

David Gentilcore. *Medical Charlatanism in Early Modern Italy*. Oxford: Oxford University Press, 2006. 426 pp. \$150.00, cloth, ISBN 978-0-19-924535-2.



Reviewed by Elizabeth Mellyn

Published on H-Italy (August, 2009)

Commissioned by Monica Calabritto (Hunter College, CUNY)

In our current health care climate, patients and doctors would be up in arms if the American Medical Association began licensing people who professionally identified themselves as charlatans. And yet this is exactly what David Gentilcore found to be common practice among elite and learned physicians, serving in institutions responsible for supervising the medical arts in Italy from the sixteenth through the eighteenth centuries. Much to his surprise, Gentilcore discovered that early modern health officials regularly licensed charlatans, authorizing them to provide a range of medical services from selling remedies to performing minor surgical procedures in the public squares of Italy. His book, *Medical Charlatanism in Early Modern Italy*, offers a richly detailed and stunningly comprehensive account of the kind of medical world that welcomed charlatans into its midst.

Gentilcore's findings fly in the face of traditional histories of early modern charlatanry, which tend to characterize charlatans as bizarre or menacing outliers skulking on the margins of

mainstream medicine or as purely constructed identities fashioned by medical elites in their attempts to mark the limits of their professional sphere. Far from being marginal or imaginary, however, Gentilcore argues, charlatans were an important part of the early modern medical world and should not be viewed apart from other medical practitioners. They were multifaceted characters, to be sure, at once peddlers and merchants, stage performers and buffoons, remedy sellers and surgeons. But they also filled an occupational category recognized simultaneously by themselves and their contemporaries as being involved in healing. In so doing, they provided health care for a huge portion of the population, and one arguably larger than that of learned physicians.

This book is part of a recent historiographical trend in the history of medicine that seeks to shift our view of premodern medicine from a modern model, which favors the study of the learned medical profession to a world of quite a different shape where healing was often a matter of contract and negotiation. Most recently, Gianna Po-

mata's revolutionary work on Bologna (*Contracting a Cure: Patients, Healers, and the Law in Early Modern Bologna* [1998]) has shown that early modern medical practice was governed by oral or written contracts between patient and practitioners. In this contract-based system, no one type of medical practitioner, regardless of status, defined health, illness, and cure. Rather, these concepts were negotiated between patient and practitioner. Moreover, Katharine Park's work on Italy ("Medicine and Society in Medieval Europe, 500-1500," published in Andrew Wear, Roger K. French, and I. M. Lonie's edited collection *The Medical Renaissance of the Sixteenth Century* [1985] and "Medicine and Magic: The Healing Arts," published in Judith C. Brown and Robert C. Davis's edited collection *Gender and Society in Renaissance Europe* [1998]), Matthew Ramsey's work on France (*Professional and Popular Medicine in France, 1770-1830: The Social World of Medical Practice* [1988]), and Gentilcore's earlier book on medicine in Naples (*Healers and Healing in Early Modern Italy* [1998]) have shown that the expertise of the learned physician was only one of the therapeutic options available to patients in a broader medical marketplace. A range of healers, such as empirics, cunning men and women, and alchemical, astrological, or occult healers, hawked myriad approaches to bodily ailments including the naturalistic, religious, and magical. In this pluralistic world of medical practice, patients seeking medical advice or remedies had a number of choices and often made use of any and all medical strategies that they had the means to pursue. Charlatans may have occupied the lower rungs of the healing hierarchy, lacking the prestige conferred by a medical degree or guild license, but their treatments were considered no less valuable or efficacious.

This in no way suggests that charlatans were not problematic identities. In fact, part 1 of Gentilcore's book is dedicated to figuring out how the category of charlatan was constructed. Here he takes a postmodern approach to the problem by

exploring the different discourses on charlatans that existed in early modern Italy. We meet the charlatan as imagined by contemporaries in medical, literary, and visual sources. These sources suggest that charlatans were viewed along a sliding scale of acceptability ranging from utter contempt through derision to tolerance. The most successful discourse was not unlike our own, depicting charlatanry as vice personified and charlatans as ignorant, boorish itinerants preying on mankind's fear of death to turn a quick profit. This was the opinion of Scipione Mercurio, a sixteenth-century Dominican friar and physician who wrote a successful guide to midwifery and had only the worst contempt for charlatans. The word "ciarlatano" trumpets such a dim view. The word appeared for the first time in the writings of the famous Florentine bookseller Vespasiano da Bisticci to indicate an impostor or fraud. According to Gentilcore, this usage came from the noun "cerretano," a reference to the small town of Cerreto, inhabitants of which contemporaries accused of making a profit by begging under false pretenses ("ciarlare"). Through the vicissitudes of language and usage, the "cerretano" and "ciarlatano" came to be associated with the remedy peddler.

Vincenzo Braca, another sixteenth-century physician, saw charlatans as objects of condescension rather than contempt. Instead of vilifying them in print as Mercurio had done, he parodied them in two of his plays, using some of the more absurd of their ranks to satire the ignorance that plagued all institutions and professions, especially that of medicine. Braca also, however, highlighted the theatrical nature of charlatanry by referring to them as "mountebanks," since they often performed their sales pitches from stages. The Jesuit Giovan Domenico Ottonelli had a more neutral take on the charlatan. In his five-volume moralizing treatise on the need to reform theater, he offered up the image of the virtuous charlatan in possession of ability and expertise so long as he

tempered his stage performances with moderation and decorum.

These representative tendencies suggest several commonplaces that attached to the broadly construed social and cultural category of charlatan. He (less frequently she) was often cast as a remedy seller, toothdrawer, or snake charmer, performing his sales patter in a public square typically on a stage incorporating elements of court jesting, carnival, and the *commedia dell'arte*. But who were these people in reality?

Whatever response charlatans elicited from their contemporaries, many people still identified themselves as charlatans in tax records, letters, license petitions, trial testimonies, and pamphlet books. By tracing the lives of three charlatans through the archives, Gentilcore illustrates the difficulty in neatly categorizing the status, professional activity, and background of the typical charlatan. Some charlatans had physicians in their families and their relationship was collaborative. Other charlatans published a number of works on healing that enjoyed broad circulation. In particular, Buonafede Vitali, an itinerant peddler who spent most of his life on the road ended up obtaining a doctorate in Palermo where he was proclaimed public lecturer. In 1743, he was appointed Verona's protophysician. To add even more luster to his career, he was later offered a chair at the University of Halle after one of his treatises on contagious illnesses caught the eye of Frederick II of Prussia.

In sum, physicians often reserved a good deal of venom for charlatanry—some believed that charlatans threatened the integrity and status of their own profession. But Gentilcore insists that charlatans and physicians were not always hostile to each other, and, in fact, these occupations often overlapped and interpenetrated. The category of charlatan was plastic and subject to negotiation. The distance between charlatan and physician was not so great to preclude collaboration or shifts in status.

In part 2, Gentilcore abandons the focus on postmodern representations to take up a more quantitative study of charlatanry as an occupation that existed, changed over time, and eventually diminished in importance. This is the most original part of the book based as it is on Gentilcore's Charlatans Database, which offers a range of information on over one thousand different charlatans gathered from the records of medical tribunals, colleges of physicians, and health offices in cities throughout Italy. Gentilcore traces the origins of charlatanry in late fifteenth-century Italy through its decline in numbers in the eighteenth century, analyzes the licensing procedure that began in the sixteenth century, provides an exhaustive typology of charlatans, and systematically examines the "social life" of their remedies.

Charlatans shared many characteristics with itinerant peddlers of healing remedies who had hawked their wares in public squares since antiquity. Yet Gentilcore argues that charlatanry was a historically distinct phenomenon. In his telling, charlatans grew first in Italian soil. They were part of the motley assortment of peddlers and street performers who provided an enormous array of goods and services to the early modern Italian public. Of particular note is the fact that these itinerant peddlers incorporated aspects of theater into their sales patter so that salesmanship in the public square was explicitly a type of performance. According to Gentilcore, however, the medicalization of European society in the fifteenth and sixteenth centuries, marked by the rise of university medical faculties, colleges of physicians, and hospitals coupled with the commodification of medicine, made remedy selling particularly lucrative and remedy sellers a more distinct occupational category.

Medical elites in the sixteenth century had a hand in placing charlatans into an occupational category involved in healing by creating stricter licensing regimes designed to regulate medical practice. A whirlwind series of chapters that ad-

dress the licensing procedure, the different types of activities and remedies that won charlatans licenses, and a systematic examination of the “life cycle” of their remedies inspired by developments in anthropology slams home the claim that competition in the medical marketplace between what scholars have traditionally seen as official medicine (the province of physicians, surgeons, and apothecaries) and unofficial medicine (the realm of charlatans) was not characterized by hostility, but by symbiosis.[1] Medical elites may not have been able to eradicate charlatanism, but licensing ensured a certain measure of quality control, since in order to get a license charlatans had to play by the rules. Both efforts were rewarded. Although charlatans touted the novelty of their remedies, Gentilcore’s exploration reveals that their practice was wholly in keeping with traditional Galenism albeit in a simplified form. Their remedies closely resembled the Greco-Roman tradition employed by physicians, surgeons, and apothecaries. In so doing, they confirmed the validity of learned medicine by practicing a version of it themselves. The hope of the upwardly mobile charlatan was to join the higher ranks of the medical hierarchy. As Gentilcore shows earlier in the book this was eminently possible.

In part 3, Gentilcore explores how charlatans communicated their message through elaborate stage routines, dress, nicknames, and the emergent print media. He also uses the Charlatan Database to chart their movements throughout Italy. Despite flashy advertisements and catchy names, at no point did charlatans present to their eager public an alternative system of health or therapy. They were an important part of a complex and variegated early modern health system that made room for a broad range of medical practitioners.

Accessible to specialist and nonspecialist alike, Gentilcore’s book offers a finely wrought portrait of the lower ranks of medical practice through the protean character of the charlatan. In so doing, he shows how fluid the practice of heal-

ing was in the early modern context of competing jurisdictions, authorities, and attitudes to health and illness. Finally, he highlights the importance of specialized skills that were acquired outside of the university or guild setting, but which were equally sought after by a wide range of people and institutions.

Note

[1]. For anthropological developments, see Mary Douglas and Baron Isherwood, eds., *The World of Goods: Towards and Anthropology of Consumption* (London: Allen Lane, 1979); Arjun Appadurai, ed. *The Social Life of Things: Commodities in Cultural Perspective* (Cambridge: Cambridge University Press, 1986); and Sjaak van der Geest, Susan Reynolds Whyte, and Anita Hardon, *The Social Lives of Medicines* (Cambridge: Cambridge University Press, 2002).

If there is additional discussion of this review, you may access it through the network, at
<https://networks.h-net.org/h-italy>

Citation: Elizabeth Mellyn. Review of Gentilcore, David. *Medical Charlatanism in Early Modern Italy*. H-Italy, H-Net Reviews. August, 2009.

URL: <https://www.h-net.org/reviews/showrev.php?id=24158>



This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 3.0 United States License.