

Daniel McCann. *Soul-Health: Therapeutic Reading in Later Medieval England*. Religion and Culture in the Middle Ages Series. Cardiff: University of Wales Press, 2018. 272 pp. \$96.00, cloth, ISBN 978-1-78683-332-7.

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The idea of *Christus medicus*, Christ the Physician, is a commonplace in late medieval religious texts. In *Soul-Health: Therapeutic Reading in Later Medieval England*, Daniel McCann analyzes how Middle English didactic devotional texts evoke difficult, even dangerous, emotions as a kind of medical treatment to bring about healing and reformation of the soul. In contrast to recent work linking the history of emotions to performance theory (for example, Sarah McNamer's 2010 *Affective Meditation and the Invention of Medieval Compassion*), McCann argues that devotional texts do not merely "script" emotional responses for readers to enact. Instead, he approaches these works as "*compositions* which work to *compose* a psychological state within their readers," with the health of the soul as their ultimate aim (p. 5).

At the heart of McCann's work is the Vernon manuscript (Oxford, Bodleian Library, MS Eng. poet. a. 1), a late fourteenth-century compilation of devotional and didactic texts in Middle English and Anglo-Norman. It provides a comprehensive program of religious instruction, and its overall purpose, as described in the manuscript, is to bring about "in latyn tonge Salus anime and in englyhs tonge Sowle-hele"—the "soul-health" of McCann's title—by reading.

In Galenic medicine, reading was regarded as having a physical effect on the body by manipulating the passions of the soul. This idea continued through the Middle Ages: monastic *lectio divina* drew on metaphors of consumption, most famously in the language of *ruminatio*, chewing over the text, and these metaphors extended naturally into the idea that reading was a form of ingesting pharmaceuticals. As experiencing emotions caused physiological changes to the balance of the humors, the emotional stimulation of didactic and confessional texts functioned as a "medicyn of words," a phrase McCann borrows from Richard Rolle's *English Psalter* (ca. 1340) (p. 2). That medicine would act violently, purging the soul and bringing about healing. Each of McCann's chapters centers on a specific medicinal emotion and the texts (both in Vernon and outside it) that evoke it. The book thus moves programmatically through increasingly intense passions.

McCann begins with a chapter titled "Apprehensive Medicine," which addresses the initial step in the treatment of the soul. Apprehension—both knowing and fearing—cleanses, bringing the soul to awareness of its sinful nature. McCann uses the *Speculum Vitae*, which outlines the power of fear, and the Prick of Conscience, which deliberately evokes it, as case studies for how texts

of pastoral instruction promote engagement with key concepts and provoke appropriate emotional responses. From there, McCann moves to a discussion of how lyrics can evoke sorrow and encourage readers to “perform a simulated confession” (p. 52). He observes that the penitential psalms functioned as a model text, imitated by medieval writers looking for formulas to evoke sorrow and self-awareness in lyric poetry and thereby bring readers to a confessional posture. Confession itself is portrayed as a specialized medical procedure requiring specific linguistic acts and the emotional states that accompany them, a kind of blood-letting of the soul that purges sin.

“Compassionate Healing” addresses compassion literally, as a sharing in the agony of Christ’s suffering on the cross. Compassion is not a single emotion but a metaphorical compound medicine blending fear, penance, pity, and sorrow in precise quantities. Like the surgeon who cuts in order to heal, sharing in the suffering of the Passion is the “best and bitterest medicine” to purify the soul (p. 84). Examples from the *Prickyng of Love*, a popular fourteenth-century prose meditation on the Passion, show how compassionate torture of the soul forcefully pushes the reader toward purification and soul-health. In “Longing for Health,” McCann describes the desire for God as a paradoxical state characterized by “tears yet joy, pain yet passion, madness yet intensely clear perception” (p. 131). Reading contemplative lyrics, prayers, and devotional treatises such as the late fourteenth-century *A Talking of the Love of God* is an intimate act that focuses the soul and promotes “longyng”: not a shallow enthusiasm but an all-encompassing desire that demands profound humility, even loss of the self.

“Dangerous Reading” moves beyond the programmatic progression of emotions in order to focus on the virtue of discretion, the moderation necessary to administer dangerous medical emotions safely. Here, McCann also moves outside the Vernon manuscript, exploring examples from the

Cloud of Unknowing and the Chastising of God’s Children. Just as a medicine administered by someone unskilled can be poisonous, McCann argues, the emotions of dread, penance, and compassion can similarly cause damage to the soul if induced to excess or not correctly controlled. Incremental, ordered reading programs moderate the application of different emotional treatments, bringing about spiritual control and immunity to demonic temptations.

McCann’s brief conclusion offers a short exploration of a later manuscript, John the Blind Audelay’s devotional poetry in Oxford, Bodleian Library MS Douce 302. Like the Vernon manuscript, Audelay’s work explicitly sets out to promote soul-health but less violently; it is “concerned not with pushing the soul to its emotional limits, but with evoking an elaborate penitential subjectivity” (p. 154). Overall, McCann finds that fifteenth-century devotional texts are less forceful than the Vernon manuscript and its fourteenth-century contemporaries but continue to pursue a therapeutic agenda through manipulation of the emotions.

Throughout the book, McCann uses Middle English words like “sowle-hele,” “luf,” and “drede” as technical vocabulary (all unitalicized, in contrast to Latin *salus animae*, *amor*, and *timor*) when discussing the medicinal emotions. This allows him to destabilize modern preconceptions about emotions and their significance, as when he explains that “to feel drede is not simply to be startled or frightened, but to undergo a complex emotional experience; one that incorporates reverence and awe alongside doubt, danger and a pervasive terror” (p. 28). He draws illustrative examples from a broad range of Middle English and Latin texts of various genres. Somewhat frustratingly, he habitually refers to each simply as “the text,” with the name of the text often delayed until paragraphs later or appearing only in the end-notes. But this is only a minor distraction in what is overall a fascinating and thoroughly researched book that will quickly become essential reading

for anyone working on the medical humanities, history of emotions, or devotional reading practices in late medieval England.

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