



Naoë Kukita Yoshikawa, ed.. *Medicine, Religion and Gender in Medieval Culture*. Rochester: Boydell and Brewer, 2015. 310 pp. 99.00, cloth, ISBN 978-1-84384-401-3.

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Medicine, Religion, and Gender in Medieval Culture is a collection of essays in four parts on the intersections and interactions between the literate cultures of medicine and religion in the Middle Ages. The editorial introduction by Naoë Kukita Yoshikawa situates the volume in its historiographical context and defines its own contribution to the history of medicine. This contribution lies primarily in exploring the many ways in which the cultures of medicine and religion informed one another from the twelfth through the fifteenth century. Yoshikawa reminds us that literate medicine “operates within a culture deeply inflected by gender discourse” (p. 8), and women’s medieval medical experience is woven throughout the volume in the examination of metaphors, discourses, poetry, and the reading of the physical appearance of diseased, disabled, and healthy bodies.

Part 1 contains two essays which focus on Mary as Physician: “Mary the Physician: Women, Religion and Medicine in the Middle Ages,” by Diane Watt, and “Chaucer’s Physicians: Raising Questions of Authority,” by Roberta Magnani. Each author argues for a prominent role for the Virgin in the theory and practice of medicine. Both Watt and Magnani see the Virgin’s presence in healing discourse as representative of medieval women’s role as caretakers and healers. For Watt,

Mary’s healing capacity buttressed medieval women’s roles as healthcare providers, albeit as those who generally operated informally, in the home, as medicine became increasingly professionalized. Roberta Magnani understands Chaucer’s interpretation of the Virgin as one possessing an authority on par with that of the Trinity and finds in Chaucer’s Marian representations a feminine figure who maintained her healing agency in the wake of the professional exclusion of women in the later Middle Ages.

Part 2 turns to the self-expression of religious women in three essays on medieval mystics. Naoë Kukita Yoshikawa begins by examining the early fifteenth-century Middle English translation of Mechtild of Hackeborn’s revelations (*The Book of Gostly Grace*). Yoshikawa shows how the discourses of religion and medicine overlapped and intersected in this vernacular mystical text (“Heavenly Vision and Psychosomatic Healing: Medical Discourse in Mechtild of Hackeborn’s *The Booke of Gostlye Grace*”). Mechtild frequently used both religious and medical imagery—displaying familiarity with humoral theory and the *regimen sanitatis*—to express her mystical experience as a type of “spiritual therapy” (p. 84). Liz Herbert McAvoy shows us how Julian of Norwich similarly viewed her spiritual health in medical terms, in which confession and penance could heal the

wounds of the soul and where sin was capable of physical materialization (“Bathing in Blood: The Medicinal Cures of Anchoritic Devotion”). Julian of Norwich reappears alongside Margery Kempe in Juliette’s Vuille’s discussion of the modern desire to diagnose medieval mystics (“‘Maybe I’m Crazy?’ Diagnosis and Contextualisation of Medieval Female Mystics”). Such retrospective diagnosis is problematic to say the least, given the uncertainty of correlating medieval notions of disease and illness with our own, an argument similarly made by Helen King after the “discovery” that a recipe from Bald’s *Leechbook* seemed to work.[1] Both Julian and Margery were considered by their contemporaries to be not only sane but “experts on madness [and] sanity” (p. 120). Vuille takes care to point out that many mental disorders are the product of social constructs and argues that, when placed in their proper medieval context, we can understand both the mystic experience and perceptions of illness better.

The two essays included in part 3 focus on literature by fifteenth-century Englishmen which utilized medical language to describe their religious experience (“Purgatory and Spiritual Healing in John Audley’s Poems,” by Takami Matsuda, and “Reginald Peacock’s Reading Heart and the Health of Body and Soul,” by Louise M. Bishop). Matsuda shows us how the link between physical and spiritual health extended beyond death. The blind Audley, who believed himself soon destined for Purgatory, perceived his physical state as indelibly linked to his spiritual one and his process of healing one that would continue in the afterlife. The bishop of Chichester, Reginald Peacock, used metaphors of the heart as a locus for spiritual health and religious meditation. Medical historians will no doubt find Bishop’s discussion of the functions of the (medieval) human heart particularly useful.

The final section, part 4, looks at medieval experiences of disease and disability in four essays on birth defects, disfigurement, blindness, and

leprosy. Parents shouldered much of the blame for the congenital defects of their children as a result of their prenatal activities, both corporeal and moral. These essays utilize a variety of source material such as penitential and synod literature, hagiographies, didactic and encyclopedic texts, as well as medical treatises, giving readers multiple perspectives on medieval notions of infirmity and impairment. Irina Metzler argues that the medieval conception of birth defects was a highly gendered one and that women were often, but not exclusively, designated the responsible party (“Disabled Children: Birth Defects, Causality, and Guilt”). Patricia Skinner (“Marking the Face, Curing the Soul? Reading the Disfigurement of Women in the Later Middle Ages”) looks at the facial disfigurement of women in terms of social value and religious expression in three hagiographies of female saints: Oda of Brabant, Margaret of Hungary, and Margaret of Cortona. These women either self-mutilated or considered doing so. Skinner considers how this did—and did not—reflect secular experience. The moral failing of drunkenness had both immediate physical ramifications as well as a degenerative effect on one’s eyesight (“Did Drunkenness Dim the Sight? Medieval Understandings and Responses to Blindness in Medical and Religious Discourse”). Joy Hawkins argues that a disregard for maintaining humoral balance via a sensible and moderate lifestyle fit well with the Christian understanding of personal responsibility, moderation, and restraint (p. 203). Finally, Elma Brenner looks at how the spiritual and physical needs of lepers—particularly female lepers—were met in *leprosaria* and how their experience was a gendered one (“Between Palliative Care and Curing the Soul: Medical and Religious Responses to Leprosy in France and England, c. 1100-c. 1500”).

This volume succeeds in its aim of “investigat[ing] [the] interaction of medieval medicine and religion in the Middle Ages” (p. 2) through the lens of literate medieval culture, set primarily in the later medieval period. With few exceptions,

this work does not focus on the more folkloric and oral elements of medieval medicine. The religion in question is Christianity, not Islam or Judaism; this omission is particularly significant in light of the former's influence on so much of the medieval medical tradition. The final section provides the most Continental context, although most of the essays in this text are focused on England and the fifteenth century, building upon the linguistic work on vernacularization of medical and scientific literature by Päivi Pahta, Irma Taavitsainen, and Ruth Carroll. Many of the contributors are specialists in English and English literature, and their perspectives are refreshing additions to the historiography of medieval medicine which has tended to focus on medicine's literate or intellectual traditions (Monica Green, Faye Getz, and Luke Demaitre), professionalization (again, Monica Green, as well as Tony Hunt and Vern Bulough), or even visual culture (Jean Ann Givens, Karen Reeds, Alain Touwaide, and Peter Murray Jones). *Medicine, Religion, and Gender in Medieval Culture* is an indispensable addition to the history of medicine. As Denis Renevey reminds us in the afterword to this volume, medieval ideas of medicine were pervasive and complex, and modern scholars benefit from examining medieval medicine from the variety of perspectives offered by the contributors. The interconnectedness of the body and the soul disposed religion and medicine toward overlapping vocabulary and imagery that is to be found in many aspects of medieval culture and helps us to understand how medieval people viewed sickness and disease.

Note

[1]. Helen King, "Why I Wasn't Excited About the Medieval Recipe That Works Against MRSA," *The Conversation*, April 9, 2015.

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