The editors of this collection of ten short papers, deriving from a conference in 2014, write in their introduction that the focus of the conference was “infections, chronic illness, and the impact of infectious disease on medieval society, including infection as a disability in the case of visible conditions, such as infected wounds, leprosy, syphilis and tuberculosis” (p. 2). Although most of the papers have been updated since the conference, it would have been good to have allowed the authors more room to further develop their case studies. A longer introduction might also have helped to explain in more detail how infectious disease and chronic illness can be stigmatizing and disabling. Some of the papers takes this aspect for granted; others provide fascinating glimpses of the effect of chronic dysentery, scarring, or cysts on the daily life of individuals, but they do not have the space to expand. As a result, the collection focuses more on representations of disease and illness than on disability—although one or two papers are difficult to fit even into this broader remit—but there are still several insightful studies that might interest historians of disability.

The two papers that most explicitly engage with physical impairment are both excellent examples of how archaeology has transformed the history of health, medicine, and disability. Both papers are interdisciplinary, drawing also on narrative sources, especially miracle collections. Cathrin Hähn identifies often quite fragmentary and difficult-to-interpret objects in burials as assistive aids dating from 600 CE-800 CE in Merovignian Gaul (northern France and northwest Germany). These probable prostheses, protective braces (orthoses), or metal caps used to reinforce the ends of long-since decayed wooden walking sticks or possibly crutches were buried in the graves of early medieval people whose skeletons present with damaged or absent bone in the lower limbs. The author suggests that the presence of these items, long after Christian conversion ended the ritual deposit of grave goods, meant that these objects were very closely associated with the individual's bodily integrity during life.

The second archaeological paper is by Cecilia Collins on the evidence for infectious disease in medieval Iceland using the bone changes that such conditions leave on the skeleton. The paper could function very well in a teaching context as an accessible short introduction to palaeopathology, including its limitations for understanding medieval health and disease, while providing useful contextual information on Iceland between the tenth and nineteenth centuries. The conditions considered, based on analysis of approximately 1,300 skeletons, are leprosy, tuberculosis, trepone-
mal disease (syphilis), and hydatid cysts caused by parasitic tapeworms. This last condition provides a fascinating insight on a little-known, but quite common, impairing condition (examples of such growths recovered archaeologically were 15-20 cm in diameter so would have affected nearby bone and organs). It could have caused death after years of pain.

Other highly interesting and well-written papers in the volume include Lucy Barnhouse’s close study of a miscellany of medical texts and practical recipes (part of MS Laud Misc 237 in the Bodleian Library in Oxford). She hypothesizes that it may have been adapted for use by a hospital run by nuns in a German-speaking region during the late Middle Ages. Also stimulating is Clara Jauregui’s study of daily life in Barcelona’s leprosarium in the late fourteenth century and based on the hospital’s extraordinarily detailed financial account books. If anyone still thinks that medieval people with leprosy necessarily led a stigmatized and isolated life, this essay would dispel such myths. The small hospital in Barcelona clearly was a compassionate and well-supplied place with a mobile and characterful community within it.

Although there are a few essays that could have done with more updating, proofreading and help with English, and greater consistency with stylistic conventions, especially as regards longer citations and the presentation of translations versus original language texts, this is a valuable collection. All the authors were PhD students in 2014 and are now early-career researchers. This collection’s interdisciplinary approach to past health through literature, archaeology, scientific methods, and ecclesiastical records therefore represents the future direction of medical history.

If there is additional discussion of this review, you may access it through the network, at https://networks.h-net.org/h-disability
Citation: Iona McCleery. Review of Connelly, Erin; Künzel, Stefanie, eds. Disease, Disability and Medicine in Medieval Europe. H-Disability, H-Net Reviews. September, 2019.

URL: https://www.h-net.org/reviews/showrev.php?id=53951

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