Humana Medicina: The Development of Rational Medicine Alongside

Christian Theology and Folk Healing in Twelfth and Thirteenth-Century Europe.

Circa 800CE, a book of remedies was compiled in a monastery near Lorsch, Germany. It is a typical medical manuscript for the period, full of cures and recipes that make one grateful to be living in the modern era. However, this book does stand out in one fascinating way, as it includes a foreword written by an anonymous monk defending the use of human medicines (humana medicina)¹ as being compliant with Christian Orthodox faith, supported by Holy Scripture itself. This monk describes medicine as "the gift of the Holy Spirit,"² and insists that "human relief and human medicine are not to be rejected utterly."³ It is interesting that, despite the close relationship medicine and Christianity have shared,⁴ during the early Middle Ages people were evidently seriously considering whether the medical sciences held any true value, perhaps believing that partaking in the Sacraments and remaining pious was enough to maintain their bodily, in addition to spiritual, health. However, the writer of the Lorsch preface assures the readers that "[doctors'] wisdom and learning (doctrina), because it was given by God, seems to be worthy of imitation."⁵ The writer further counsels that "when one falls sick, one respectfully requests from the physician a medication appropriate to the illness and implores a healthful remedy for the disease from God with humility,"⁶ a suggestion that is perhaps, from the modern perspective, not

¹ Human medicine is regarded as healing practices that rely on physical remedies (i.e: medicines, surgery, etc) rather than spiritual ones (such as prayer). *Das 'Lorsch Arzneibuch'. Ein medizinisches Kompendium des 8. Jahrhunderts* (*Codex Bambergensis medicinals 1*), *Text, Ubersetzung und Fachglossar*, ed. Ulrich Stoll, Sudhoffs Archiv, Beiheft 28 (Stugart: Franz Steiner, 1992), 48-63, as cited in *Medieval Medicine: A Reader*, ed. and trans. Faith Wallis (Toronto: University of Toronto Press, 2010), 85.

² Das 'Losrch Arzneibuch,' 86.

³ Ibid., 87.

⁴ See Rodney Stark, *The Rise of Christianity: How the Obscure, Marginal Jesus Movement Became the Dominant Religious Force in the World in a Few Centuries* (San Francisco: Harper Collins, 1997).

⁵ Das 'Losrch Arzneibuch, ' 85. Original emphasis.

⁶ Ibid., 91.

unexpected. After all, medieval societies are not well-known for their hygiene practices. Those that did exist would have had to be introduced to the general population, and it only makes sense that such information should come from a learned source like a monastery. However, to ascribe these stereotypes to medieval European society as a whole would be to severely underestimate the highly complicated history of the development of medical science and the extent of Christianity's influence upon it. There were many fluctuations across this period in which medicine and religion battled for dominance, within the universities and popular culture alike. This essay will focus on the twelfth and thirteenth centuries, as at this time there was a concentrated a shift away from the Church and towards a rational science which did not rely on divine causes and cures.⁷ By looking at the growth of the medical programs in Paris and Salerno, northern versus southern trends and attitudes, and the deep influence of not only Christian rituals, but also pagan popular culture,⁸ this essay aims to explore the exact nature of the relationship between religion and medicine, and the mediating role that superstition played between them.

In his commentary on Avicenna's *Canon*, Gentile of Foligno, an fifteenth century Italian medical professor, wrote that "medicine is one of the necessary *arts*."¹⁰ Both Christianity and science recognized the necessity of this so-called art—for by Gentile's definition it was an art, as "science in the strict sense is purely speculative and does not exist for the sake of action,"¹¹ and medicine is meant for nothing if not action. In the early history of the religion, Christianity and

⁷ Peter Dinzelbacher, *Structures and Origins of the Twelfth-Century Renaissance* (Stuttgart: Anton Hiersemann, 2017), 115.

⁸ Which, as we will see, is an amalgamation of pagan, Christian, and scientific beliefs.

¹⁰ Gentile of Foligno, "Gentile of Foligno's Commentary," *Praesens maximus codex est totius scientie medicine principis Aboali binses cum expositionibus onium … interpretum est … Expositores … gentilis de fuliginio, Auerrois cordubensis, Jacobus de partibus, Matheus de gradi, Dinus florentinus, Thadeus florentinus, Ugo senensis, Gentilis florentinus,* (Venice: a Philippo Pincio Manuano, sumptibus Luceantonij de Gionta, 1523), as cited in Medieval *Medicine: A Reader,* ed. and trans. by Faith Wallis (Toronto: University of Toronto Press, 2010), 207. Original emphasis.

¹¹ Gentile of Foligno, 207.

medicine had the same goal of healing both body and soul; ¹² however, as we approach the medieval period and especially the twelfth century, the goals and ideals of the two disciplines begin to diverge. With the increasing development and prominence of the universities in France, England, and Italy, scholars began to seek ways to separate science from divinity in order to promote the development of scientific thought, while still subscribing to a belief in the Christian God.¹³ Simple, earthly explanations were sought for phenomena such as epilepsy,¹⁴ signalling a move away from reliance on supernatural entities—both divine and demonic¹⁵—as either the cause or cure of these ailments. Scientists and natural philosophers began to look at the Book of Genesis as a scientific account of the history of the natural world,¹⁶ and nature was increasingly thought of as a mediator between God and humanity.¹⁷ Carefully, science began to creep away from Christian doctrine and towards rationalism,¹⁸ though the rhetoric even in new scientific texts remained highly religious, illustrating the intrinsic role which Christianity played in the culture of the time. However, the official development of the medical discipline allowed scholars to begin to untangle the complicated relationship between healing and the superstition of Christian and pagan traditions.¹⁹ And while the medical profession was not antagonistic towards Christianity or God, this development of an independent healing tradition concerned the Church as medicine's move away from the divine carried with it the threat of spreading atheism.²⁰ Moving forward, the Church

¹² Darrel W. Amundsen, *Medicine, Society, and Faith in the Ancient and Medieval Worlds*, (Baltimore: the John Hopkins University Press, 1996), 2-3.

¹³ Dinzelbacher, 118.

¹⁴ Ibid., 115.

¹⁵ Maaike Van der Lugt, "The Learned Physician as a Charismatic Healer: Urso of Salerno (Flourished End of Twelfth Century) on Incantations in Medicine, Magics, and Religion," *Bulletin of the History of Medicine* 87, no. 3 (Fall 2013), 308.

¹⁶ Dinzelbacher, 117.

¹⁷ Ibid., 123.

¹⁸ Sara Ritchey, "Affective Medicine: Later Medieval Healing Communities and the Feminization of Health Care Practices in the Thirteenth-Century Low Countries," *Journal of Medieval Religious Cultures* 40, no. 2 (2014), 129.
¹⁹ Amundsen, 11-12.

²⁰ Ibid.

would be a persistent opponent of most, if not all, medical development that occurred over the course of the twelfth and thirteenth centuries. Despite the fact that Christianity and medicine had the same goal of healing, Christianity was adamant on keeping medicine subservient so as to maintain God's divine hierarchy.²¹ Popes passed decrees limiting the extent to which clerics and monks could practice medicine,²² creating an interesting shift in Christian tradition, which had always placed high value on its healing abilities and facilities. Indeed, it was almost counterproductive for Christianity to not have embraced and sponsored the development of a rationalized science based in nature, as it would have both maintained their authority and contributed significantly to the further development of medicine.

While university medical programs founded upon classical Latin scholarship were established in England, France and Italy and gradually later moved into Germany,²³ the development of medicine itself must be considered in terms of north and south, as the popular culture of each region significantly affected what practices were incorporated into each curriculum. First addressed shall be the northern parts of the continent, as Oxford in England and Chartres in France were two of the most significant universities of the period, and indeed were both early centers of rational medicine.²⁴ Despite these first steps into rationalism, it is important to note that in northern European schools theology overlapped significantly with medicine,²⁵ to the point that in Paris the majority of medical professionals also held degrees in theology.²⁶ While the Italian schools followed Avicenna's rationale of medicine being a science based on its nature (being

²¹ Amundsen, 2-3.

²² Ibid., 222-223.

²³ Nancy G Siraisi, *Medieval & Early Renaissance Medicine: An Introduction to Knowledge and Practice*, (Chicago: the University of Chicago Press, 1990), 49.

²⁴ Philip Lyndon Reynolds, *Food and the Body: Some Peculiar Questions in High Medieval Theology*, (Leiden: Brill, 1999), 123.

²⁵ Reynolds, 126-127.

²⁶ Siraisi, 65.

composed of "both theory and practice"²⁷), France and England aligned more closely with the idea of medicine as an art,²⁸ and as such, rational medicine developed closely alongside the liberal arts in these areas.²⁹ It is here that the focus on nature as mediator between humanity and the divine is more obvious, as the combination of theology and natural philosophy that was so prominent in these schools was both influencing and being influenced by this new focus on medical science.³⁰ Advancements made in medicine provided valuable information about nature, which in turn allowed scholastic theologians to better understand the nature of the divine.³¹ Further, however, the culture in northern Europe, both in urban and rural centers, differed drastically from Italian culture in ways that would influence the development and practice of medicine. Most significant to this paper are the contrasting ideas held in regards to the body.³² After death, the corpse was viewed as remaining closely linked to its living identity,³³ and thus essential medical practices such as dissection were considered taboo to the extent that they were outlawed by the state.³⁴ In Italy, however, there was no lingering personification of the corpse once death had occurred, and thus, no moral or spiritual concerns affected medicine in this manner.³⁵ But there was also a strong, contradictory belief in the body having magical, healing powers³⁶ and to dismember a holy body for the sake of further spreading those powers was a perfectly acceptable practice. In northern

²⁷ Avicenna, "Is Medicine a Science?" *Praesens maximus codex est totius scientie medicine principis Aboali binses cum expositionibus onium ... interpretum est ... Expositores ... gentilis de fuliginio, Auerrois cordubensis, Jacobus de partibus, Matheus de gradi, Dinus florentinus, Thadeus florentinus, Ugo senensis, Gentilis florentinus,* (Venice: a Philippo Pincio Manuano, sumptibus Luceantonij de Gionta, 1523) as cited in *Medieval Medicine: A Reader*, ed. and trans. by Faith Wallis, (Toronto: University of Toronto Press, 2010), 206.

²⁸ Reynolds, 122.

²⁹ Ibid., 124.

³⁰ Siraisi, , 79.

³¹ Reynolds, 144.

³² Katherine Park, "The Life of the Corpse: Division and Dissection in Late Medieval Europe," *The Journal of the History of Medicine and Allied Sciences* 50 (1995), 115.

³³ Ibid.,, 126.

³⁴ Siraisi, 88-89.

³⁵ Ibid.

³⁶ Park, 126.

France and the Low Countries especially there was the widespread belief, inspired both by Christianity and deep-rooted pagan folklore, in the power of both the saintly body and blood to heal various afflictions, particularly of the eyes.³⁷ Due to this, northern healers were more likely than their Italian counterparts to delve into folk healing practices. The mystic Hildegard of Bingen was one such healer, well-known within the Rhine Valley but almost unheard of outside of it;³⁸ she also chose to forgo rational medicine entirely, in favour of fully attributing her healing abilities to the grace of God rather than human medicines. As far as I am aware, she had no contemporary Italian counterpart.

Simultaneously, as ideas of the sacred dead pervaded northern culture, Italian schools and thinkers launched a heavy logical analysis of all things considered profane and holy.³⁹ As the English scholastic Roger Bacon had written in his treatise regarding experimentation and observation in the sciences, "philosophers and theologians misuse [the] idea"⁴⁰ of relying too heavily on divine explanations, the exact nature of which could never be understood and replicated by human physicians. "Without experience nothing can be sufficiently known,"⁴¹ Bacon continues, providing perhaps one of the best rationales for the shift towards and preference for rational, booklearned medicine in the twelfth and thirteenth centuries.⁴² Further propagating this idea were the decrees that would be passed by Holy Roman Emperor Frederick II in 1241, requiring all prospective medical practitioners to study the anatomy of human bodies via dissection.⁴³ Of

³⁷ Andrew Colin Gow, "'Sanguis Naturalis' and 'Sanc de Miracle': Ancient Medicine, 'Superstition' and the Metaphysics of Medieval Healing Miracles," *Sudhoffs Archiv* 87, no. 2 (2003), 153.

³⁸ Monica H. Green, "In Search of an 'Authentic' Women's Medicine: The Strange Fates of Trota of Salerno and Hidegard of Bingen," *Dynamis* 19 (1999), 43.

³⁹ Dinzelbacher, 115.

⁴⁰ Roger Bacon, "The Case for Medical Astrology," in *Medieval Prognosis and Astrology*, ed. Cornelius O'Boyle, (Cambridge: Wellcome Unit for the History of Medicine, 1991), as cited in *Medieval Medicine: A Reader*, ed. and trans. Faith Wallis (Toronto: University of Toronto Press, 2010), 327.

⁴¹ Bacon, 326.

⁴² Van der Lugt, 308.

⁴³ Siraisi, 86.

course, these regulations were unable to be sufficiently enforced on uneducated healers in rural areas, thus allowing for the continued proliferation of charms and miracle cures.⁴⁴ Despite that, due in part to this new emphasis on examination and experimentation in the move to regularize the profession,⁴⁵ Salerno was one of the first centers to reimplement the practice of dissection, discontinued since antiquity.⁴⁶ As learned medicine continued to develop in Salerno, differentiations between practices in the discipline lead to developments such as distinguishing between medicine and surgery,⁴⁷ since it was coming to be understood that "physiology and anatomy were neither independent disciplines in their own right nor wholly subordinate to medicine³⁴⁸ and required their own specialized attention in order to develop sufficiently. Roger Bacon considered these disciplines to be "useful not only to philosophy, but to the knowledge of God,"⁴⁹ once again reminding the modern reader that religion was entwined with every aspect of culture during this period. We can see this further emphasised when Bacon, acknowledging that certain things cannot be observed through human means alone, writes that "the grace of faith illuminates greatly,"⁵⁰ accepting that certain things can only be known if God wishes to impart that knowledge to humanity. However, it is important to acknowledge that Bacon is English, despite the fact that most of his writings advocate for logical science backed by experimentation, and that conceding to divine influence in this manner could been seen as him having reverted to his northern roots, but I believe it appropriately speaks for the scientific movement of the twelfth and thirteenth centuries and its struggles as a whole. Additionally, Thomas Aquinas in his Summa Theologica

- ⁴⁵ Ibid., 8.
- ⁴⁶ Ibid., 86.

⁴⁹ Bacon, 328.

⁴⁴ Siraisi, 20.

⁴⁷ Amundsen, 237.

⁴⁸ Siraisi, 79.

⁵⁰ Ibid., 328.

also concedes to the divine in a similar manner at times, proving that a continued adherence to religious culture was not only present in northern European schools.

Still, the Church saw this increasing interest in natural phenomena and healing as a threat to Christian values and authority. They began to push back against the development of learned, rational medicine, thus contributing to the development of healing communities in which methods from religious, scientific, and superstitious practices were further blended. Though there was a common association between healers and Christ⁵¹ from the Christian point of view, this was only limited to faith healers, as learned medical practitioners were often accused of avarice and of prolonging their patients' sicknesses for financial gain,⁵² and were generally decried as untrustworthy. Some individuals, such as Friar Nicholas of Poland, did try to develop a natural alternative to medicine rooted in the acceptance of divine miracles rather than experimentation, so as not to have to rely on the universities.⁵³ Christianity favoured the view of Christ as a healer of the soul rather than the body, and while the roles of physicians and priests were perceived as being similar,⁵⁴ the push for a separation between medical and spiritual healing resulted in the further developments of various categories of health, just as the focus on biology and physiology did in the universities.⁵⁵ As Christians believed that those belonging to the Church must not shed the blood of another human, even for healing purposes-indeed, several councils and decrees forbid monks from practicing medicine⁵⁶—it was preferable to continue practicing traditional healing methods which focused on the soul rather than the body.⁵⁷ Further, the development of healing

- ⁵² Siraisi, 21.
- ⁵³ Ibid., 32-33.
- ⁵⁴ Reynolds, 128.
- ⁵⁵ Ritchey, 117.
- ⁵⁶ Amundsen, 222-223.

⁵¹ Reynolds, 124.

⁵⁷ Ibid., 223.

communities based on this shift would shape the expectations and perceptions of medical practitioners and practices,⁵⁸ leading to a proliferation of healers like Hildegard of Bingen, whose writings were based in medical knowledge which she attributed to the divine.⁵⁹ Due to the expectations developed by the healing communities, in addition to her gender, these claims of divine origin were necessary for Hildegard to successfully practice rational healing, as they negated the stereotypes of both learned medicine and female healers.⁶⁰ As will be explored further in the next section, it was this divine attribution which allowed for faith healing to become popular enough that it was viewed as a legitimate contender against rational science, despite being based in pagan ritual as much as Christian. This is an interesting example of how superstition, rather than mediating between religion and medicine, appeared at times to highlight both the tensions between and the shortcomings of these fields.

As Hildegard of Bingen writes in a letter of "Causes and Cures," in which she attempts to explain the origins of human sickness, "all these things happen by God's judgement,"⁶¹ and thus medicine must follow the path of the divine rather than that of experimentation and observation. However, the methods commonly employed by both Hildegard and many other faith healers were based not only on Christian traditions, but on pagan and folkloric ones as well,⁶² contributing to the overall label of "superstition" that has been implemented throughout this essay, as it most sufficiently expresses the diverse nature of healing practices outside the universities. To explore this diversity, this section will look at the use of blood and relics from saintly bodies as cures for

⁵⁸ Ritchey, 115.

⁵⁹ Green, 45.

⁶⁰ Ibid., 47.

⁶¹ Hildegard of Bingen, "Causes and Cures," *Causae et Curae*, ed. Laurence Moulinier, 183-184, (Berlin: Akademie-Verlag, 2003) as cited in *Medieval Medicine: A Reader*, ed. and trans. by Faith Wallis, 357-360, (Toronto: University of Toronto Press, 2010), 360.

⁶² Van der Lugt, 309.

various illnesses. The most obvious correlation between this type of healing and Christian doctrine is found in the ritual of the Eucharist, which ascribes divine salvific and healing powers to the body and blood of Christ. However, the powers of both blood and flesh can be traced back to ancient medical sources, in which the soul and blood are equated⁶³ to explain the power of blood for spiritual and physical healing.⁶⁴ Further belief in the healing power of the body, saintly or otherwise, comes from northern European pagan belief in the lingering vitality of the deceased body, which could therefore be used to make drugs.⁶⁵ The rationale behind these remedies was both spiritual and surprisingly logical when viewed in a modern context: in the same way that consuming an orange allows an individual to absorb vitamin C, the virtue of one person could be transferred to another through contact with their blood or body.⁶⁶ An excellent example of the powers attributed to holy bodies comes from the murder of Thomas Becket, who died a martyr, and due to this relationship between Becket and the Church, was expected to become a mediator of miracles.⁶⁷ There are numerous gory stories that depict areas that came in contact with Becket's blood or brains—such as cobblestones, or the table on which his dead body lay after it was retrieved from the church—as having gained the same grace that was bestowed unto Becket.⁶⁸ Because his body and blood were viewed as a mediator between heaven and earth,⁶⁹ any miracles that came from Becket's body therefore came directly from God, and Canterbury would become one of the most popular pilgrimage cites of the Middles Ages due to people seeking out this form of healing. But this is only one example of already deceased spiritual healers. Many female healers, such as Hildegard and Catherine of Sienna, viewed themselves as mediators between the divine

⁶⁵ Park, 116.

⁶³ Gow, 134.

⁶⁴ Ibid.,138.

⁶⁶ Gow, 143. Human flesh and blood were consumed symbolically (i.e., the Eucharist) and otherwise.

⁶⁷ Hayes, 85.

⁶⁸ Ibid., 83.

⁶⁹ Ibid., 91.

and the natural world and offered their bodies and blood to heal the sick. However, unlike Thomas Becket, these healers had to attain this nature and further to prove it. The most common methods were through self-flagellation and acts of asceticism, which proved their devotion to the Divine and thus granted them healing powers.⁷⁰ There are examples of religious women in the Low Countries whose bodies were used as healing remedies both while alive and deceased. Catherine of Siena was one of the most well-known of these types of healers; she viewed the act of interacting with and healing mortally ill people as further proving her devotion to God. These spiritual healers produced prolific writings, both personal (such as in the cases of both Hildegard and Catherine) and for documentary purposes; this proliferation of written records can be viewed as a push back against professional, standardized medicine.⁷¹ Though the Church had no outright involvement with these healers while they were practicing, it shows that the Christian desire to move away from rational medicine was indeed at work, and, further, that this desire would influence the practice of rational medicine, as it forced physicians to adapt elements of these spiritual healing methods in order to appeal to a wider demographic of patients.

While these alternative healing practices represented no explicit threat to scientific medicine,⁷² physicians now had to combat the influence that these practices held amongst the general society in order to spread the knowledge of rational medicine. As Andrew Gow writes:

The textual evidence suggests a complicated situation in which folk belief, popular piety, ancient and folk medicine, the medieval scientific and medical state of knowledge, Biblical beliefs and ancient medical ideals interacted and combined to produce variations on our two central themes [of medicine and superstition].⁷³

⁷⁰ Gow, 152.

⁷¹ Ritchey, 119.

⁷² Ibid., 116.

⁷³ Gow, 156.

This interaction resulted in the additional blending of superstition into medicine, as professional doctors turned to using charms in an effort to lure patients away from unlearned healers.⁷⁴ The use of charms and supposedly magical or holy blood illustrated both a desire to satisfy customers⁷⁵ and of the crossing-over of popular culture and learned science,⁷⁶ to the point that such charms and relics became essential in the development of bedside manner.⁷⁷ There is an example of a poem from Salerno simply titled "the Salerno Regimen of Health," either written for an actual, unnamed ruler or simply advertised as such for the appeal, which imparts unto the reader or listener practical advice on keeping healthy and healing minor afflictions.⁷⁸ It is simple in its composition, and to some extent resembles the charms that were produced by rural spiritual healing communities in the early Middle Ages. The poem also emphasises that the issue of shunning rational medicine for spiritual was not simply a matter of north versus south, nor rich versus poor; rather, it proves that cautious, often negative attitudes towards learned medicine were prevalent across all levels of society, due to the vast amount of influence that the Church held over all over Europe at this time.

The relationship between medieval medicine and religion is a complicated one, and it has been demonstrated that superstitious beliefs and practices were much more than a simple mediator between the two. Despite the push for standardization of medical education and practice in the twelfth century, various factors, the most prominent being geographical location, greatly affected this effort. Especially pertinent for the scope of this paper are the contrasts between northern and southern Europe, and more narrowly, urban versus rural communities. The primary sources and

⁷⁴ Van der Lugt, 318-319.

⁷⁵ Ritchey, 131-132.

⁷⁶ Gow, 151.

⁷⁷ Ibid., 156.

⁷⁸ "The Salerno Regimen of Health." *The schoole of Slernes most learned and iuditious directorie, or methodicall instructions, for the guide and gouerning the health of man* … trans. Philemon Holland, 1-98, 109 (London: Imprinted by Bernard Alsop, and are to be sold by Iohn Barnes, at his shop in Hosier Lane, 1617), as cited in *Medieval Medicine: A Reader*, ed. Faith Wallis (Toronto: University of Toronto Press, 2010), 487.

examples taken from the secondary literature have proven that northern and rural ideals aligned, while the views held in urban centers of learning were almost synonymous with the south, particularly Italy. The scholarship further shows the extent to which religion and folklore have affected the development of medicine throughout history. While most of the first major universities were founded in England and France, the development of medical science in these areas remained relatively conservative in comparison to their Italian counterparts. This can be directly attributed to the close ties the northern countries still held with their pagan roots, to the point that ideals predating Christianity—and indeed incorporating it, such as in the spiritual healing practices of Hildegard of Bingen and Catherine of Siena-affected the extent to which rational medicine was accepted in these areas. With the example of Thomas Becket, we can see the value that northern cultures placed on the body and blood of significant personalities, and that rural healing communities acted as a medieval equivalent of doctors' offices and hospitals. In both northern and southern cities, particularly Paris and Salerno, standardization was a much simpler process, with the universities in the direct vicinity able to provide the necessary authority to enforce these new regulations. Still, however, folk beliefs pervaded into the cities, to the extent that medical practitioners adopted the use of healing charms and rituals in an effort to win patients over. It is obvious that there was a significant struggle to emphasize the importance of learned medicine to every stratum of society. Theologians and natural philosophers, however, were quick to accept the development of medicine, as it allowed them insights into the natural world, and thus into the divine. The Church, despite not allowing clerics to study the discipline, also understood the importance of medicine and the threat it posed to religion because of it. Their search for an alternative to learned medicine lead to a proliferation of faith healing that fed into folkloric superstitions. We can see that despite the sincere efforts put in by the flourishing and wellrespected universities to completely rationalize medicine during this period, this endeavour was nigh on impossible so long as the Church held such a degree of authority and influence.

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