Examining Women’s Roles in the Publication of Medical Texts During The Sixteenth and Seventeenth Centuries

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Early Modern English policies made it difficult for women to practice medicine. During the early seventeenth century, for example, fifteen percent of those pursued by the Royal College of Physicians for practicing medicine without a licence were women. This is a significant number because fewer women attempted to perform medicine without a license than men.\(^1\) Writing and publishing medical texts was also a difficult profession for women to pursue. Although women’s ability to produce documents of this nature improved for a time as a consequence of the decrease in print censorship following the English Civil War (1642-1651), published male authors continued to question their knowledge publicly.\(^2\) Edith Snook observes that women were often openly criticized in male-authored medical texts. Their authority was disputed partly due to their lack of formal training and their “gendered social subordination.”\(^3\)

Despite the numerous obstacles that prevented women from formally learning medicine and consequently writing about it, females nevertheless participated in medical publications. Women evaded the Royal College of Physicians’ sanctions and participated in the world of medical publications through disclosing their treatments to male-physician authors, publishing almanacs, and using metaphors to conceal the medical advice in their texts. A few exceptional women also disregarded societal expectations and openly published medical guides of their own. Although these women deserve mention, they were a minority and will not be examined in this

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\(^2\) More than fifty medical recipe books written by women were printed in the 1650s, compared to twelve in the 1640s and twenty in the 1630s and 1660s. Elaine Leong, *Recipes and Everyday Knowledge: Medicine, Science and the Household in Early Modern England* (Chicago: University of Chicago Press, 2018), 150.

context. This article will first examine the ways in which male authors utilized women’s medical knowledge in their texts. Next it will discuss how women produced medical literature in their own name. Much of the scholarship in this field centers upon one of the two aforementioned topics. This paper aims to unite these narratives in one cohesive paper that provides a brief overview of how women were involved with medical literature in early modern England.

**Part One: Intersection of Gender and Medical Texts**

In the seventeenth century, the Royal College of Physicians allowed the publication of male-authored texts that cited female sources of medical knowledge. Many such texts that relied on female knowledge nevertheless undermined their female sources by asserting that women could not be considered medical authorities. For instance, Walter Harris’s (1647-1732) text *An Exact Enquiry Into, and Cure of the Acute Diseases of Infants*, first published in English in 1693, begins by discussing the value of medical knowledge that women garnered through experience. Harris writes:

>The Diagnostick of Childrens Diseases, cannot so much be collected from their own Relation, neither from the touching of their Pulse, or from a more curious Tryal of their Urine as from the Answers of the Nurses and women that are their constant Attendants. The women know if they have been troubled with Loathings, and Vomitings, and how long; whether the Food or Milk that was cast up, was curdled; whether untimely Weeping, Watching, and Disquiet, give any Notices of Colick Pains; whether they be affected with acid Belchings, or the Hick up, or a Cough doth appear; whether their Belly hath kept a due course, and if their Excrements be white, green, or filled with Bile. They know, if their Infants have had extraordinary drouth, and so be Feverish, or if their mouths be full of Thrushes, which do much trouble their Sucking. Being enquired, they can inform you, if epileptic Spasms have seized their ender Bodies, with the several Concomitants of time and severity, or whether their present Sickness be treisted with their breeding of Teeth; or lastly, whether any thing considerable, whether that be a swelling of their Belly, or of any other part, either Wheels or Pushes, or the Jaundice, or Rose do appear.

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4 Ibid.
Although Harris asserts his belief that women should not be trusted as medical caregivers later in his book, this passage demonstrates his faith in females as observers. Harris contends that through their constant attention to young children, women are able to notice changes in a child’s behaviour and the appearance of new symptoms. By virtue of the extended time women spent with children, they were deemed useful aides to male physicians who were regarded as the medical authorities. The practice of assigning value only to a woman’s observations eradicates their contribution in medical experimentation and transcription of remedies from the formal record.¹

Significantly, Harris was suspicious of women who attempted to provide a remedy to the sick rather than relay their observations to male physicians. It appears Harris extended his trust in women’s expertise only to their ability to observe various symptoms. Harris describes females who participated in medical caregivers outside the domestic space as gossipers, noting that access to medicinal information is useless unless a trained male physician utilizes it. Harris writes:

The right use of Medicaments for satisfying the designs of curing, the adjusting both the kind and quantity of Medicaments to the particular Constitution of the Patient, from a quaint Reflection upon the nature of the present Disease; the exquisite knowledge of the constitution, especially of people of full Age, whether it be Sanguine or Melancholic; and whether the Fever doth mostly affect the Blood, or whether Spirits be wanting and their strength weakened by the bustle and trouble; and lastly, the right knowledge of appointing Diet, are all more requisite to make a good Physician than the most numerous Provision of Medicinal Receipts, whence ever Collected. And if that be not true, the Apothecary being most Learned in Receipts will easily excel the most Learned physician, and his prattling Servant be equal to his Master; and also a Nurse, or at least, the babbling and Cup-Gossip Women being enriched with Books of Receipts preserved from Generations, shall carry the Prize and Glory from the most Learned Physitian and Apothecary, howsoever conversant in Prescriptions of Physicians.²

In this passage, Harris is concerned with differentiating women who own extensive collections of medicinal recipes collected over the course of generations to heal household members from those formally trained by male physicians. As Snook details,

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¹ Women were placed in charge of domestic healthcare. Many recorded medical remedies and observations in the family recipe book. For more information on early modern English recipe books, see Elaine Leong, Recipes and Everyday Knowledge, 2018.
² Harris and Cockburn, An Exact Inquiry, 57-58.
women’s recipe books were a threat to the authority of physicians, and thus it was essential for Harris to assert that women did not possess the theoretical knowledge necessary to determine a patient’s course of treatment. This narrative encourages readers to invest all authority in the physician despite women’s vital role in identifying symptoms of illness before contacting a doctor.

Walter Harris was by no means the only male physician who authored a text that was reliant upon but disparaging of women’s medical expertise. Many other publications, particularly those that discussed treatments for children’s illnesses, utilized women’s remedies while identifying themselves as sole sources of medical authority on the subject. One such author was the German surgeon Felix Würtz (1518-1575), who wrote a book titled *The Childrens Book of Felix Wurtz: A Famous and Expert Surgeon* that was translated into English and published in London in 1656. Würtz wrote his book to provide guidance to families who sought to employ a woman to care for their infant, and to give medical advice to wet nurses and midwives regarding the child in their charge. In his section titled “Running Eyes in Children,” Würtz authorizes a remedy traditionally used by mothers and nurses: “Some Childrens eyes are always running, others have sore eyes, and some of them have their eyes clung together, which to remedy, Mothers or Nurses usually let their Milk run into them, of which I do approve…”

Dr. Franciscus de le Boë Sylvius (1614-1672) also wrote about curing eye ailments in his book *Of Children’s Diseases Given in Familiar Style for Weaker Capacities*, which was translated from French and published by a London company in 1682. De le Boë writes as follows: “The Eye-lids endure much pain and trouble, sometimes by the Pox blinding them, and by crying which swells them… In such cases Women use their own Milk, or put a little Saffron to it; which others dissolve only in Rose-water, and lay cloaths wet therewith to the eyes, and not badly done.”

In both instances, the authors assert their authority by detailing the remedy that nurses and mothers traditionally utilize, followed by their seal of approval. These texts add to the perception that a women’s medical knowledge is valuable only after it has been tested and recommended by a male physician.

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9 Franciscus De le Boë, *Of Childrens Diseases Given in a Familiar Style for Weaker Capacities*. (London: St. Dunstan’s Church, 1682), 124.
Jacques Guillemeau (1550-1613) relies quite heavily upon women’s recipes in his text *The Nursing of Children*, which was translated to English and published in London in 1612. In his discussion of remedies for a teething child, Guillemeau’s narrative mirrors those of de le Boë and Würtz when he describes a treatment utilized by women before deeming it to be credible. Guillemeau writes:

> The Nurses themselves shew us this practice is very necessary and fit; for oftentimes they do scratch and tear the gumme with their nailes, which turneth to the childs great profit and ease, and keeps him from lying languishing so long in paine: And I can assure the young Chirurgion that I have practiz’d it, and caused it to be practised with good success, above twenty times.  

From these texts, it is evident that women’s experiences with young children led to the creation of effective cures. Guillemeau writes that scratching the gums is more effective than treatments prescribed by the ancients, which were both painful and dangerous. Despite wet-nurses’ success in performing the procedure, Guillemeau insists that the child should be entrusted to a male surgeon who would make a tiny incision along a teething child’s gums. Although women’s knowledge of remedies for children’s illnesses is demonstrably effective, male physicians and authors include them in their texts only after conferring their authority on the antidote. In this case, the cure is only offered with the affirmation that Guillemeau treated patients using this method in more than twenty instances. The practice of a male physician imposing his approval upon women’s recipes is also seen in Guillemeau’s suggested remedies for diaper rash:

> Women doe commonly be sprinkle those parts [affected with diaper rash] with meale dust, or with Barley, or Beane flower. Some use the powder of a rotten post [rooting wood], or else a little Irees [iris root] and Roses beaten into a fine powder, Rhasis useth this medicine.

This passage differs from other male-physician-authored texts because Guillemeau does not sanction the poultice by attesting to his own use of the remedy. Rather, Guillemeau observes that Rhazes [Rhasis in French] (865-925)—a renowned physician from medieval Persia whose texts were used in European medical schools during the seventeenth century—used the treatment. Invoking a well-recognized scholar's name would have added credibility to both Guillemeau’s text and to the diaper rash medicine

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11 Ibid.
he advised. Nevertheless, it is significant that women’s antidotes are not recommended on their own merit but instead authorized via Rhazes and Guillemeau.

Thus far, the texts examined demonstrate that women’s remedies were prominent in texts deemed acceptable for publication by the Royal College of Physicians. Despite the effectiveness of women’s treatment plans, male physicians and authors consistently undermined women’s medicinal knowledge. Many books authored by male physicians in early modern England only acknowledged women’s remedies alongside a statement of the male author’s approval. Walter Harris did so most explicitly by describing caretakers as gossipers. Other seventeenth-century scholars, including Würtz, le Boë and Guillemeau, did it implicitly.

**Part Two: Female Authored Texts**

Women who authored texts containing medical recipes were required to use various imaginative strategies to convey the information they wished to publish. These techniques enabled women to engage in medical discourse without facing fines from the Royal College of Physicians, who punished women for openly publishing texts on this topic. In this section, I will examine almanacs produced by Sarah Jinner between 1658 to 1664, which contained remedies for their female audience. Moreover, this section will include an analysis of *A Sweet Nosegay* (1573) by Isabella Whitney can serve as a case study to demonstrate how some women indirectly participated in the early modern English medical marketplace.

Almanacs were short publications that contained astrological predictions and tables with information regarding sunrises, sunsets and tides. These booklets also included medical cures that were accessible to the general populace. Only three women have been acknowledged for authoring almanacs in England during the seventeenth century; Sarah Jinner, Mary Holden and Dorothy Partridge.\(^{13}\) Here Sarah Jinner’s works are focused upon because she published the largest number of medical recipes.

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\(^{13}\) Louise Hill Curth claims that four women wrote almanacs during the seventeenth century. One of the women included in Curth’s count signed her writing as Sara Ginnor and wrote a satire of Sarah Jinner’s work. Consequently, I do not believe that we can assume the gender of the Ginnor author. I believe it would be more accurate to state that three women wrote almanacs during the seventeenth century. Louise Hill Curth, “The Medical Content of English Almanacs 1640–1700,” *Journal of the History of Medicine and Allied Sciences* 60, no. 3 (2005): 264.
directed toward female audiences. For instance, she included thirty-eight recipes in her 1658 almanac, for ailments such as menstrual disorders, infertility, and childbirth complications.\(^\text{14}\)

During the seventeenth century, the Company of Stationers regulated the English almanac industry. James I granted this powerful agency a monopoly over the publication of almanacs in 1603.\(^\text{15}\) In the mid-seventeenth century, Sarah Jinner was the only woman authorized to publish “female branded” almanacs by the Stationers, which may account for the lack of women involved in writing almanacs during this period. Indeed, the Company of Stationers did not authorize the printing of a second almanac for female audiences until the 1680s, when Mary Holden began publishing her texts.\(^\text{16}\)

Sarah Jinner’s almanacs have been identified as the first female-authored publication to contain medical advice for women. It should be noted, however, that these texts did not exclusively discuss female concerns. Jinner’s texts contained cosmetic therapies (including instructions for sunburn treatments and the removal of freckles, sweat, and unwanted hair) and medical recipes. The medical remedies in Jinner’s almanacs ranged from medications for children’s problems such as rickets, worms, bed-wetting, and teething to more general cures for rotting teeth, colds, indigestion, earaches, eye pain and hernias. Leigh Ann Whaley notes that Jinner’s writing about hernias indicates her comprehensive knowledge of human anatomy. In her 1660 almanac, Jinner describes a hernia, noting that “hernia or rupture is said to be when any tumor appears in the purse of the testicles proceeding either from something descending into the cods, or from some matter going there and causing them to swell.”\(^\text{17}\) Jinner also observes three types of hernias: Aquosa or Watery, Aentoia or Windy and Carnola or Helby ruptures. Following the description, Jinner provides a cure and discusses how the patient likely received his injury. Jinner observes

\(^{14}\) Ibid., 274.
\(^{15}\) Ibid., 260.
\(^{16}\) Ibid., 264.
that watery ruptures occur “when much water is descended into the Cods, which causeth them to swell”\(^{18}\) and suggests a two-fold cure for the ailment.\(^{19}\)

Despite her demonstrable knowledge in cosmetic and physiological medicine, Sarah Jinner was most notable for her gynecological recipes in her almanacs. For instance, Jinner’s almanac for the year 1659 contains three recipes to regulate a woman’s menstrual cycle, four to help men and women with “fruitfulness,” two to prevent a miscarriage, and two to clear the womb after miscarriage. Jinner’s inclusion of both recipes to regulate a woman’s menstrual cycle and treatments to aid fertility is not evidence that women in early modern England understood the role of ovulation in conception. Chantelle Thauvette notes, “since… ovulation’s role in conception remained unclear until the 1930s, it is unlikely that women would have used Jinner’s almanac to coordinate their sexuality with their fertility, the way women in the early twentieth century practiced the rhythm method of contraception.”\(^{20}\) Nevertheless, astrology played an important role in regulating the most favourable times for conception. For example, in popular culture those who became pregnant while menstruating were thought to produce disfigured children.\(^{21}\) In her almanacs, Jinner advises her readers which months they should refrain from sexual activity lest they face physical consequences. Jinner warns her audience to avoid wanton acts on the night of September 12, 1658; otherwise, they will be afflicted with the pox.\(^{22}\) Jinner also writes that pregnant women will be exposed to evil during the month of February 1659 and advises them to “make much of your selves.”\(^{23}\) The existence of Jinner’s texts discussing menstruation and fertility suggests that some women in early modern England may have been interested in exercising autonomy over their reproductive systems.

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\(^{18}\) Ibid., 29.

\(^{19}\) Ibid., 30.

\(^{20}\) Chantelle Thauvette, “Sex, Astrology, and the Almanacs of Sarah Jinner,” *Early Modern Women* 5 (2010): 246. Thauvette notes that women may have tracked their menstrual cycle for a number of reasons. Menstruation was thought to be the body’s way of dispelling excess humours from the female body. Therefore, if a woman’s period was late, people believed that a woman could experience poor health. Additionally, women may have also tracked their menstrual cycle so that they could determine if they were pregnant.

\(^{21}\) Ibid.

\(^{22}\) Jinner, *An Almanack or Prognostication*, 18.

\(^{23}\) Ibid., 32.
Two recipes from the almanac of 1660 that Jinner categorized as “Common Syrups which remove Obstructions of the Terms”24 have generated some scholarly interest. These medicines were designed to restart menstruation if an undefined obstruction was preventing it from occurring.25 Significantly, both recipes that Jinner provides to her readers include abortifacients among the ingredients, the first listing containing mugwort and the second requiring pennyroyal. Jinner does not explicitly connect the use of her term “obstruction” with a live fetus, suggesting that if she intended to insinuate such a relationship, she meant it to be determined by those who were reading the almanac. Although it is difficult to establish the intent with which Jinner authored these recipes, abortions did occur during this period. Women frequently received legal pardons for concealing pregnancies by committing infanticide in early modern England.26 Moreover, as Thauvette observes, there were likely many women desperate enough to rid themselves of unwanted pregnancies that, if Jinner’s recipes were available, they might have been used to “induce premature labour,” resulting in the infant’s death.27 Regardless of Jinner’s reasoning for suggesting a remedy for “obstruction of the terms,” it is clear that she was able to provide her readers with gynecological advice during a period when women who wrote medical texts were subject to punishment from the Royal College of Physicians.

Although Sarah Jinner did not have a formal medical education, her almanacs reveal her desire to communicate medical advice to the public. For instance, in the introduction to her 1659 almanac, Jinner recommends that both men and women read her text so that they have access to recipes for ailments that physicians are unable to treat. She writes:

This year I here present thee with some other of the like nature avoiding such Language as may, perhaps be offensive to some, whose Ears cannot away with the hearing of what, without scruple they will do. It is not fit the world should be deprived of such helps to Nature; for want of which,

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24 Ibid., 26.
25 As mentioned in fn. 20, delayed menstruation was believed to cause a woman’s ill health. This may be the reason that Jinner suggested herbs such as mugwort or pennyroyal to her readers. I do not have enough information to definitively decide what Jinner might have meant when she wrote about an “obstruction of the terms” instead I wish to briefly discuss the scholarly debate pertaining to this 1660 almanac.
27 Ibid.
many by their Modesty, suffer much: in many of which cases, both men and women are very shie of acquainting Physicians; onely they will carry their water to a Physician, and tell him they have a pain in the bottom of their bellies; and the Physician is such a Dunce, he cannot discern the true cause of the Distemper: so the party suffers.  

In this passage, Jinner effectively comments on the lack of knowledge possessed by physicians and asserts that her almanac will aid those suffering from untreated illnesses. Jinner also addresses her female readers at the end of her introduction. She informs them that they must not prioritize modesty over understanding their body. After providing a list of texts with which she believed women should acquaint themselves, she writes, “The reason why I commend this piece, is, that our Sex may be furnished with knowledge: if they knew better, they would be better. It is better that they should exercise their parts, in that which appertaineth to a virtuous life, and be made a useful adornment to the Age wherein they live.” This passage reveals Jinner’s belief that women should know their own bodies so they could treat their own ailments. Therefore, we may see Jinner’s writing as an outlet where she advised female readers to gain some control over their bodies and reproductive lives.

Published recipes transferred traditional medicine from the domestic context to that of the marketplace, thus making their authors susceptible to censorship from the Royal College of Physicians. Small and affordable published texts, including pamphlets and booklets circulating in London, were the most vulnerable to this policing. The English parliament further restricted such texts when in 1543 it passed an act prohibiting unlicensed individuals from charging a fee for providing medical aid to the public.

Part Three: Female-Published Texts

The final section of this paper will use Isabella Whitney’s *A Sweet Nosegay* (1573) as a case study to examine the skillful manner in which Whitney was able to publish medical

28 Jinner, *An Almanack or Prognostication*, 16.
29 Ibid., 17.
30 Rebecca Laroche *Medical Authority and Englishwomen’s Herbal Texts, 1550-1650* (Surrey: Ashgate, 2009), 141.
commentary without transgressing the regulations enacted by the Royal College of Physicians in early modern London. Although Whitney does not provide remedies for her readers, her text is an important work of medical literature. In her anthology, Whitney discusses a metaphorical floral remedy, or nosegay, intended to prevent moral and mental decay. Using medicine as a metaphor enables Whitney to comment upon the medical marketplace and women’s place in it and avoid scrutiny she may have otherwise been subjected to had she not chosen this literary device. Whitney’s intention behind the use of a metaphorical nosegay will not be speculated upon here. Instead, the way Whitney construes female medical practitioners in the text is examined.

Whitney is recognized as the first female author who published secular verses in England. Women who were active in public were perceived negatively by many contemporary scholars. Juan Luis Vives (1493-1540), the man who tutored Mary Tudor (r. 1553-1558) when she was a princess in 1522, wrote the following in his book The Instruction of a Christian Woman (1540): “It neither becommeth a woman to rule a schoole, nor to live among men, or speak abroad… it were better bee at home within and unknown to other folks, and in company to hold her tongue demurely, and let them see her, and none at all heare her.” In this context, Whitney’s poetry anthology, written around 1573, may be interpreted as a piece of resistance, particularly due to its medical commentary. Whitney’s work is also intriguing because she writes in the first person.

Although this paper has been working largely within the seventeenth century, Isabella Whitney’s poetry provides an intriguing example of one of the strategies that women utilized to publish medical advice. Studying Whitney’s poetry will also be advantageous because it provides insight into the negotiation between gender and the medical marketplace in early modern England.

Nosegays were small bundles of flowers that were either carried or worn by men and women during the Renaissance for the purpose of protecting the owner against miasmas— or bad smells— that were thought to cause illness. For more information, refer Cora Fox, “Isabella Whitney’s Nosegay and the Smell of Women’s Writing,” The Senses and Society 5, no. 1 (2010): 131-143.

For further analysis of the way in which Whitney uses medical metaphors, see Meredith Anne Skura, Tudor Autobiography: Listening for Inwardness (Chicago: University of Chicago Press, 2008) and Rebecca Laroche, Medical Authority.


Very little is known about Isabella Whitney so it is unclear if Whitney is describing her personal experiences. For the purpose of this paper I will understand Whitney’s use of the first person to mean that she is talking about herself. This is also the lens through which scholars such as Rebecca Laroche and Cora Fox examine the text.
and found herself “harvestlesse, and serviceless”[^37]. In this instance, the term “harvestlesse” refers to Whitney’s lack of resources, wealth, and husband, which indicates the poet’s marginal place in society.[^38] That Whitney was not an aristocratic woman makes her writing more exceptional since most female writers during the sixteenth and seventeenth centuries belonged to the highest echelon of society. Instead, Whitney’s case study provides an example of a woman who had lost her position as a maidservant and, as a result, had resorted to selling medicinal preventatives, or nosegays, to support herself financially.[^39]

*A Sweet Nosegay* is a collection of poems containing a metaphorical nosegay for an unknown readership. Whitney’s text also includes correspondence with her brothers Brooke and Geoffrey, her sister Anne Baron, and her close friend Thomas Berrie, which contains non-specific medicinal recipes to protect them from “the contagions” (both moral and physical) that she perceives to be rampant in London. The poem in the collection, which bears the anthology title, includes—again unspecified—110 flowers necessary to prepare the nosegay.[^40] She does not name any of the flowers or indicate any of their defining properties, likely due to the metaphorical nature of the nosegay. The information given for the forty-fifth flower, for instance, reads:

> The sorrowful do think it death,
> to linger in this life:
> And wish to be dissolved thereof,
> thereby to stint their strive.[^41]

Although Whitney omits the names of the flowers she prescribes, she affirms the purpose of the recipe by concluding with the following stanza:

> The Juice of all these Flowers take,
> and make thee a conserve:
> And use it first and last: and it

[^37]: Isabella Whitney, “The Auctor to the Reader” in *A Sweet Nosegay, or Pleasant Posy: Containing a Hundred and Ten Philosophical Flowers* (Bozeman: Montana State University, 1995), lines 1-2.
[^38]: Fox, “Isabella Whitney’s Nosegay,” 132.
[^40]: Cora Fox notes that it was not uncommon for literary collections to be titled nosegays in early modern England. Fox, “Isabella Whitney’s Nosegay,” 134.
will safely thee preserve. Whitney’s decision not to specify any remedial plants in her nosegay also enabled her to circumvent the laws that prohibited unlicensed physicians from earning money for providing medical aid during the late sixteenth century. As Rebecca Laroche observes, “in keeping her herbs figurative…[Whitney] is immune even though she enters [the Royal College of Physician’s] jurisdiction.” Although Whitney’s discussion of the recipe itself occupies less than half of the anthology, the medical metaphor permeates the entire text and is accentuated by the author’s urgent desire to protect readers from contagion. Whitney’s discussion of contagion and disease would have deeply resonated with her London readers in 1573 due to the plague’s prevalence during this period, especially following the city’s major 1563 outbreak.

Whitney’s text conveys early modern English citizens’ concerns about falling ill. This is particularly clear in a passage where Whitney’s character encounters a friend in the streets and advises them to seek protection:

I walked out: but suddenly
a friend of mine me met:
And said, if you regard your health:
out of this Lane you get.
And shift you to some better air,
for fear to be infect:
With noisome smell and savors ill,
I wish you that respect
And have regard unto your health,
or else perhaps you may:
So make a die, and then adieu,
your woeful friends may say.
I thanked him for his carefulness…

Fear of contagion consumed English town life in the sixteenth century and likely contributed to Whitney’s motivation for designing a nosegay. Following the meeting

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43 Laroche, Medical Authority, 139.
with her friend, Whitney records her initial attempt to protect herself from the “stinking streets” of London:

A slip I took to smell unto,  
which might be my defense.  
In stinking streets, or loathsome Lanes  
which else might me infect:  
And since that time, I each day once  
have viewed that brave prospect.

Larouche comments that early modern London was a city “filled with both physical and metaphysical disease.” Citizens were concerned with protecting themselves from moral decay, which they believed to be caused by both an illness of the mind and bodily diseases such as the plague. In this context, herbal recipes were endowed with particular importance by those who dwelled in the city. Whitney’s text is intriguing because it appears to have been written by an author who sought to provide a solution for her reader’s concerns while providing commentary on the medical marketplace but could not do so in an obvious manner due to her gender. On this account, Whitney

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45 Whitney’s discussion of “stinking streets” should be considered within the context of miasma theory which originated in Classical Greece and continued to be the prominent theory of infection throughout a large part of the nineteenth century. For more information on the evolution of disease transmission, see Karamanou, M., et al., “From Miasmas to Germs: A Historical Approach to Theories of Infectious Disease Transmission,” *La Infezioni in Medicina* 20, no. 1 (2012): 58-62. Miasma theory was first conveyed in the Hippocratic treatise *Breaths* which states in part that “when the air is full of miasmas [meaning pollution], whose properties are hostile to human nature, this is when men are ill…” This is to say that miasmatists believed polluted, stale, or corrupt air caused disease. For more information about ancient ideas of miasma, see Jouanna, Jacques and Neil Allies, “Air, Miasma and Contagion in the Time of Hippocrates and the Survival of Miasmas in Post- Hippocratic Medicine,” in *Greek Medicine from Hippocrates to Galen*, ed. Philip van der Eijk, (Leiden: Brill, 2012), 119-136. When Isabella Whitney discusses “stinking streets” her readers would understand that the smell of the street could lead to fatal diseases.

46 Whitney, “The Auctor to the Reader,” lines 71-76.

47 Larroche, *Medical Authority*, 140.

48 Ibid., 140.

49 It is important to note that the sanctions placed by the Royal College of Physicians did not explicitly state that women would be fined for practicing medicine. Rather, the College sought to prevent any unlicensed physician from profiting off of practicing medicine or providing medical advice. Consequently, many unlicensed men were also policed during the seventeenth century for disobeying these laws. Since women were unable to formally learn medicine or receive a license they were unequally targeted by the sanctions enacted by the Royal College of Physicians.
does not claim to have the experience to cure her readers should they fall sick, rather she emphasizes that her medical advice acts as a preventative.

Whitney provides her audience with a series of protective measures that they could practice to avoid contagions. The last poem of her collection, titled *Wyll and Testament*, which is composed as if it is the poet’s will, contains a few such proposals. As Wendy Wall observes, in this last section of the anthology, Whitney wills items “that she could not possibly own—shops, gallows, streets…” to the city of London. Whitney additionally uses this piece to critique the excesses enjoyed by the city’s wealthy citizens. Whitney describes London as a city in a state of decay because of the latter’s compulsion for riches. To protect her family and loyal readers from the air contaminated by those she describes as “ruffians”, Whitney includes provisions in her will for the upkeep of public bathhouses. She writes:

And near the same, I houses leave,
for people to repair:
To bathe themselves, so to prevent
infection of the air.
On Saturdays I wish that those,
which all the week do drug:
Shall thither trudge, to trim them up
on Sundays to look smug.

This passage suggests that the metaphorical remedial recommendations included in Whitney’s text are practices intended for both men and women. Bathing, for instance, was a regimen that provided hygienic benefits for both sexes.

Additionally, Whitney’s nosegay was advertised solely as a preventative measure against disease. She explicitly asserts this in her anthology’s introduction:

But if thy mind infected be,
then these will not prevail:
Sir Medicus with stronger Herbs, a doctor

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51 Whitney, “The Maner of Her Wyll, and What She Left to London: And to All Those in it” in *A Sweet Nosegay*, line 119.
52 Ibid., lines 121-128.
53 Whitney utilizes the term Sir Medicus to refer to a licensed physician.
thy malady must quell,
For these be but to keep thee sound,
which if thou use them well:
Pains of my life in healthy state
thy mind shall ever dwell.\textsuperscript{54}

Whitney prescribes the use of her metaphorical nosegay only to those whom the contagion has not yet infected. This passage is significant for scholars including Patricia Phillippy and Cora Fox. Upon examining Whitney’s poetry, they determined that the author’s lack of employment and her consequent financial troubles were the text’s central issues rather than its medical commentary as proposed by Laroche and Skura.\textsuperscript{55} Contradicting Phillippy and Fox’s interpretation, Whitney counsels her readers to seek the assistance of a physician only if they are already ill. This could suggest that one of Whitney’s motivating factors for writing her text was to comment on the high cost of physician’s fees. More significantly, since the poet published her text as a small octavo—the most affordable form of print—Whitney likely wanted to ensure the largest possible audience, particularly from those of lower economic groups who were sensitive to the cost of medical aid.\textsuperscript{56} Whitney’s disguised commentary on the cost of a physician may have been a reaction to the rising price of treatment in England during the late sixteenth century, which resulted from the increasing regulations that the Royal College of Physicians enforced.\textsuperscript{57}

Whitney’s liminal place in English society—due to her lack of employment, her fiscal hardships, and her status as a single woman—allows her to use the metaphor of a nosegay to provide insight into how early modern females interacted with the medical marketplace. The passage in which Whitney refers her sick readers to “Sir Medicus,” for instance, reveals that women who offered medical assistance operated largely outside the realm in which physicians ran their practices in the late sixteenth century. Additionally, Whitney, acting as a medical practitioner through her use of metaphor,
did not have a personal relationship with her readers except for her siblings and close friends with whom she corresponded. These two observations do not necessarily represent an accurate account of all female interaction with healthcare in the sixteenth and seventeenth centuries. For example, women such as midwives and nurses held positions that gave them some form of medical authority. It does seem, however, that those who authored advice texts, as Whitney did through metaphor, did not tend to interact with their readership.

The extent of Whitney’s medicinal knowledge and interactions with medical practitioners is unknown. Nevertheless, she appears to have been aware of some of the theories proposed in early modern medical literature, as evidenced by the vocabulary she utilizes in her text. Whitney’s medical understanding is demonstrated in the introduction of her piece when she cautions her reader that the prescribed nosegay may not be effective for everyone. Whitney notes:

Because myself did safety find,
by smelling to the same.
But as we are not all alike,
nor of complexion one:
So that which helpeth some we see,
to others good doth none.58

It is likely that Whitney’s discussion of people’s differing “complexion” in this passage is a reference to the theory of the four humours. Hippocrates (450-370 BCE) first proposed this theory in ancient Greece, which became an integral aspect of European medicine during the medieval and early modern periods.59 Although Whitney was using medicinal metaphors rather than recording a recipe, her knowledge of medicinal texts

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58 Whitney, “The Auctor to the Reader,” lines 105-108. See fn. 45 for a discussion of miasma theory and how smells could be fatal.

59 In a treatise titled *The Nature of Man*, which was published in the fifth century BCE, Hippocrates proposed that the body contained four humours—blood, yellow bile, black bile, and mucous—which corresponded to air, fire, earth, and water. In a healthy person the four bodily elements were balanced, conversely, an imbalance in the humours would lead to illness. The theory as expanded upon by Galen (129-216 CE) also posits that as people age different humours become more predominant in their body. This is likely what Whitney refers to when she states that people have different “complexion[s].” For further reading, see Jacques Jouanna, “The Legacy of the Hippocratic Treatise the Nature of Man: The Theory of the Four Humours,” in *Greek Medicine from Hippocrates to Galen*, ed. Philip van der Eijk (Leiden: Brill, 2012), 119-136.
marks a point of departure from women’s traditional expertise. It is unlikely that many women, aside from those who practiced medicine as a form of employment, would be familiar with the works of Hippocrates or Galen. Indeed, during the late sixteenth century, most women possessed only a basic understanding of the herbal remedies which were to be utilized in a domestic context to treat family members who had fallen ill.

Women who practiced medicine in their homes often gifted valuable recipes to each other as a method of currency or as a sign of their friendship. Whitney’s use of the metaphor of a nosegay enables her to provide a commentary on this rich tradition. In her address to the reader, for example, Whitney presents her recipe as a gift to her readers. She writes:

And now I have a Nosegay got,
that would be passing rare:
If that to sort the same aright,
were lotted in my share.
But in a bundle as they be,
good reader them accept:
It is the giver: not the gift,
Thou oughtest to respect.
And for thy health, not for thy eye,
did I this Posy frame.61

Whitney’s request that her readers respect “the giver: not the gift” indicates that women may have utilized the gift-giving tradition to gain respect among their peers. This is especially true if there was a chance that the intended receiver may reject the gift, as suggested by Whitney’s plea that her audience choose to accept her nosegay. This passage alludes to the anxiety women may have felt while engaging in the recipe trade due to their desire to be accepted and the vulnerability of offering a gift that could be rejected.

In recording a metaphorical recipe, Whitney also comments upon how women who practiced public medicine were more susceptible to public censure than those who partook in the exchange of domestic recipes. Gentlewomen who provided medical aid to the poor for charitable purposes were immune from punishment. Still, women such as Whitney’s character, who sought to earn an income from selling medical advice, were at the mercy of her paying clients. Should they be unsatisfied with the remedies they had purchased or believe that the treatment they received exacerbated their illness, these clients could report female practitioners to the appropriate authorities. These women were also vulnerable because they offered remedies to the citizens of London for a fee. They did not, however, possess a medical license, which forced them to navigate the strictures enacted by the Royal College of Physicians against laypeople practicing medicine. Whitney comments on the dangerous position of female medical practitioners in her poem. Assuming the character of a woman providing medicinal recipes, Whitney implores her readers not to punish her if the nosegay she prescribed fails to work:

I thee commend to mighty Jove,
and thus I thee assure:
My Nosegay will increase no pain,
though sickness none it cure.
Wherefore, if thou it hap to wear
and feel thyself much worse:
Promote me for no Sorceress,
nor do me ban or curse.
For this I say the Flowers are good,
which I on thee bestow...

This passage illustrates that female medical practitioners may have been concerned that their clients could accuse them of witchcraft or report them to the Royal College of Physicians if their herbal recipe was ineffective. This fear was likely justified due to the outlier position many of these women occupied, as women of little financial means who earned wages from selling remedies. Legal authorities regularly brought women before the Royal College of Physicians for practicing medicine without a license.

62 Ibid., lines 165-174.
Although the majority of these women were not punished, many were fined, imprisoned, or censured. Moreover, as Laroche observes, the policies imposed by the Royal College of Physicians combined with the lasting paranoia consequent of the 1563 plague “made one’s role as a female London practitioner at best, needed, at worst hangable.” This fear of prosecution is likely the explanation for Whitney’s persona, which I argue she intended as a generalized representation of many females who practiced medicine in sixteenth-century England. To further protect herself from the wrath of patients for whom the prescription did not work, Whitney also repeatedly emphasizes the effectiveness of her recipe while simultaneously asserting that her nosegay may be unsuccessful for patients of a particular complexion.

Whitney also expresses concern that her readers may believe she is a sorceress. Witchcraft accusations were a serious threat to women medical practitioners since 1563—a decade before the publication of *A Sweet Nosegay*—when Elizabeth I (r. 1558-1603) renewed Henry VIII’s (r. 1509-1547) 1542 statute against witchcraft by enacting *An Act against Conjurations Enchantments and Witchcrafts*. Although witchcraft accusations transpired before 1563, Elizabeth I’s ratification of a new law against the practice saw an increase in allegations. After examining the records from the Home Circuit of the Assize courts—which covered the English counties of Essex, Hertfordshire, Kent, Surrey, and Sussex—Malcolm Gaskill documented that 258 individuals were indicted for witchcraft between 1560 and 1600. While the majority of the witchcraft accusations and trials occurred in locales within the jurisdiction of the Home Court, pamphlets and reports of the proceedings were regularly sold in London. Consequently, many women dispensing medical advice were doubtlessly

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63 Deborah E. Harkness, “A View from the Streets: Women and Medical Work in Elizabethan London,” *Bulletin of the History of Medicine* 82, no. 1 (2008): 58. Harkness estimates that around ten percent of the women who were reported to the Royal College of Physicians were prosecuted.
64 Ibid., 57. Harkness includes case studies of women who were punished by the Royal College of Physicians that she extracted from the College’s annals in her text.
65 Laroche, *Medical Authority*, 146.
66 Here the use of the word “complexion” refers to a person’s humoral balance. See fn. 59 for further information. Whitney, “The Auctor to the Reader,” lines 105-108.
67 Ibid., lines 165-174.
68 Criminal trials that were deemed to have a serious nature were tried at the Assize courts which met twice a year and were presided over by a professional judge.
aware of these cases and were likely worried about being labelled a witch. Such concerns would have been amplified for women of lower financial status and women who provided herbal remedies in exchange for a fee, both of whom were frequent targets of witchcraft charges. Whitney’s use of the metaphor of a nosegay provides a commentary upon the medical concerns most prevalent in the minds of those living in sixteenth-century England. Additionally, the text provides insight into how women who practiced medicine, particularly those of lower financial status who exchanged recipes for money, would have interacted with the medical marketplace. Whitney’s analysis is indispensable in examining women’s participation in medicinal texts because it provides an example of how one woman was able to comment upon the medical community without facing scrutiny from large institutes like the Royal College of Physicians.

Little scholarship exists on published medical texts that were written by women during the sixteenth and seventeenth centuries. Few books exclusively discussing this topic exist, nor are there any historians who provide an estimate of the number of women who published remedial texts in early modern England. Females were limited in their ability to work in the field due to the policies existent within the medical world, including those implemented by the Royal College of Physicians that prohibited people without a license from practicing medicine. Since women were barred from entering formal medical institutions, this restriction effectively banned them from treating patients in England or publishing texts on the subject.

This paper synthesizes the work of many medical historians to demonstrate that governmental policies did not prevent women from participating in the publication of medical texts. Though their medicinal work was not often published in a formal manner, it was made available to the public in several discreet ways. Women’s knowledge was represented in the medical marketplace through the male-authored texts that often relied upon traditional remedies and techniques that women had used in domestic medicine for generations. Almanacs, though not considered a traditional

71 The scholarship that I rely upon in this paper comes from small chapters within larger texts. For instance, Rebecca Laroche’s scholarship on Isabella Whitney is found within her larger book on herbal texts at large, and the work of Cora Fox is contained in an article within a scholarly journal.
form of medical text, also provided a medium for women, including Sarah Jinner, to provide essential healthcare knowledge to her audience. Finally, the use of medical metaphors, as demonstrated by Isabella Whitney’s poetry, enabled some women to comment on the medical marketplace without alerting the authorities like the Royal College of Physicians.

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