Medicina practica, consilia and the illnesses of the head in Girolamo Mercuriale and Giulio Cesare Claudini. Similarities and differences of the Sexes

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Summary

My study analyzes the most common types of illnesses of the head in treatises of medicina practica and in collections of consilia written by leading Bolognese physicians in the second half of the sixteenth century. In this study I offer a partial answer to the question of madness in sixteenth-century Bologna, a university medical center for all of Italy and Europe in the early-modern period. The answer lies, in part, in the learned medical tradition of madness, and in particular, in the ways in which important physicians at the University of Bologna represented madness in relation to gender in two genres: the treatise of medicina practica and the consilium. Though stereotypes of masculine and feminine behavior shaped the way these two genres viewed mental illnesses, they played a lesser role in the consilia.

In this study I offer a partial answer to the question of madness in sixteenth-century Bologna, a university medical center for all of Italy and Europe in the early-modern period. The answer lies, in part, in the learned medical tradition of madness, and in particular, in the ways in which important physicians at the University of Bologna represented madness in relation to gender in two genres: the treatise of medicina practica and the consilium.

Erik Midelfort finds that representations of madness varied in relation to the transformations in medicine and social practices in sixteenth-century Germany. Michael MacDonald argues that gender did not play an important role for medical practitioners in the perception of madness in sixteenth and

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1 I would like to thank Nancy Siraisi and Paul Arpaia for reading earlier versions of the article and for their very useful suggestions.
seventeenth-century England³. In this study I intend to show that, though stereotypes of masculine and feminine behavior shaped the way treatises of medicina practica and consilia viewed mental illnesses, they played a lesser role in the consilia because, as Jole Agrimi and Chiara Crisciani have argued, the genre lies “à l’intersection de la profession et de l’enseignement, de la doctrine et de la pratique thérapeutique”⁴. My study analyzes the most common types of illnesses of the head in treatises of medicina practica and in collections of consilia by leading Bologna physicians in the second half of the sixteenth century⁵.

Many university professors who wrote treatises of medicina practica also wrote collections of consilia. Giambattista Da Monte (1489-1551) and Girolamo Mercuriale (1530-1606) were two of the most important⁶. In these consilia they interacted with lesser known doctors and noble patients who sought their help. This practices demonstrates that university medicine and its representatives were not isolated from the urban community, but as Ian Maclean argues,

“took on other roles, interacted with local medical communities such as colleges of physicians, town and court physicians and surgeons, and were influenced by some of their attitudes and practices”⁷.

Physicians wrote consilia and treatises of medicina practica, thus creating a sort of dialogue between the two genres; the treatises were made of different layers of comments, lessons and sources, including the physician’s consilia⁸.

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³ MacDonald, 1986, p. 271.
⁵ When analyzing consilia I limited my inquiry to ones dedicated to illnesses of the head. I focused on sixty-one such consilia out of more than four hundred written by Girolamo Mercuriale between 1563 and 1604 which were collected in four books. For the first two tomes, I consulted the 1589 edition; for the third, the 1620 edition; for the fourth, the 1604 edition. I also focused on twenty-five of the one hundred and forty-seven consilia written by Claudini and printed for the first time in 1606. For my analysis I used the 1607 edition. When analyzing works of medicina practica, I focused primarily on two: Mercuriale’s Medicina Practica which is based on his lectures at the University of Padua, where he taught from 1569 until 1587; and Domenico Leoni’s Ars medendi humanos which was published in 1583. To provide background for my analysis of these documents, I consulted twenty-seven of the four-hundred and thirty consilia I found written by Giambattista Da Monte which were published in 1583 and his Medicina Universa, published in 1587.
⁶ For Da Monte’s life, see Cervetto, 1839 and Dizionario biografico degli Italiani, (from now on DBI).
⁸ Agrimi and Crisciani, 1988, p. 175. For instance, Mercuriale introduces the story of a noble young man from Padua who was reduced to sanity after four cauteries were applied to his arms and knees at the end of the chapter on mania in Medicina Practica. Mercuriale, 1602, p. 65.
Although sixteenth-century consilia had a standard structure, referring to ancient authorities, like the treatise, the consilia's main difference consists in their emphasis on the individual case, the story of the patient, and the specific relationship between the author and the doctor who sought his help. My observations on the consilia dedicated to the illnesses of the head by Girolamo Mercuriale and Giulio Cesare Claudini (ca. 1550-1618) are by necessity provisional. However, they constitute a starting point for a broader investigation of the treatment of madness in the many collections of consilia published in fifteenth and sixteenth-century Italy. The consilia written by Mercuriale and Claudini, both active at the University of Bologna in the second half of the sixteenth century, offer a vision of madness in relation to gender that is slightly different from the ones expounded in the treatises of medicina practica. This difference can be explained by the bridge-like nature of the genre of the consilium, a different attitude toward the role of narrative, which played an increasingly important role in sixteenth-century medicine; and the notion of the individual, which was more developed in the consilia than in the treatises. In both genres mental illnesses like melancholy and mania were dependent on stereotypes of masculine and feminine behavior which played a lesser role in the consilia. To support my statement, I will investigate the definition, diagnosis and treatment of the most common types of madness in the treatises of medicina practica by Mercuriale and Domenico Leoni (d. 1592), a professor at the University of Bologna at the same time Mercuriale taught there. Then, I will compare them with some of the most significant consilia by Mercuriale and Claudini. However, before analyzing and comparing them, a brief overview of the two genres is necessary.

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10 Claudini started teaching in Bologna in 1578 (“Ad logiam mattutinam”). In 1591, he began teaching “practica medicina ordinaria” (second hour of the afternoon), after having taught “practica medicina extraordinaria” (third hour of the morning). He was known in Italy and in Europe for his professional ability rather than for his scientific discoveries. DBI and Arieti, 1987, pp. 376-79.
11 Mercuriale spent only part of his career in Bologna (from 1587 to 1592) where he taught medicina theorica at the “fourth hour” of the afternoon, the most prestigious time of the day for teaching. Simili, 1941, p. 163. When Mercuriale came to Bologna, Claudini had been teaching there for many years, but was paid a fraction of what his more famous colleague received annually, which was 5,400 lire. Simili, 1966a, p. 6.
13 Domenico Leoni studied at the university of Bologna, where he received his degree in 1559. In Bologna he taught medicina practica from 1561 until 1591. He died in 1592, the year Mercuriale left for Pisa. See Mazzetti, 1848, p. 182; De Renzi, 1846, vol. 3, p. 504; Dallari, 1888-91, vol. 2, p. 227. See also Arieti, 1987, pp. 375-76.
The study of medicine at the university was divided in the two main branches of practical and theoretical medicine. Teaching theoretical medicine at the university constituted a very high privilege, as the discipline was considered closer to the spheres of natural philosophy and *scientia* than practical medicine. During the three years of study in practical medicine, professors “focused on the anatomical, pathological, and therapeutic knowledge needed to cure the sick”\(^\text{14}\). To exemplify an entry in a treatise of practical medicine, let us turn to the chapter that Girolamo Mercuriale dedicates to the treatment of melancholy. He defines the illness, and explains its internal and external causes—the *intemperies* of humors or the *mala compositio* of an organ, the weather, lack of sleep, excessive exertion, or inactivity. Then, he lists the *signa* or symptoms, the prognosis and the cure. Mercuriale shows his erudition by quoting from and discussing Galen, Aristotle, Hippocrates, Avicenna, Averroës and Areteaus, as well as modern authors like Jacques Fernel, Donato Antonio Altomare and Girolamo Cardano, with whom he disagreed on the interpretation of a passage from Hippocrates\(^\text{15}\).

The genre of the medical *consilium* or *consultatio* was born in the thirteenth century in Bologna, probably under the influence of the legal *consilia*, which appeared in the twelfth century and increased in number at the end of the thirteenth century. Taddeo Alderotti wrote one of the earlies substantial collection of medical *consilia* to be preserved\(^\text{16}\). The genre was largely developed in the fourteenth and fifteenth centuries, and in the sixteenth century it appeared to have a rather fixed structure\(^\text{17}\). It consisted of a written text in which one doctor requested help about an individual case from another doctor who identified the illness, gave a possible prognosis and prescribed a cure tailored to the patient. In other words, the *consilium* dealt with a specific illness of a specific patient on a specific occasion\(^\text{18}\).

To give an example of the structure of a sixteenth-century *consilium*, let us consider one by Mercuriale dedicated to a melancholic and epileptic woman. The title of the *consilium* tells the reader the patient’s gender, her

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\(^{15}\) Mercuriale, 1602, book 1, pp. 27-41.

\(^{16}\) Siraisi, 1981, p. 271; Agrimi and Crisciani, 1994, p. 62; Lockwood, 1951, p. 44.

\(^{17}\) For an exhaustive analysis of the genre of the *consilium*, see Agrimi and Crisciani, 1994 and Crisciani, 1996, pp. 1-32.

\(^{18}\) For a definition of the genre of the *consilium*, see Lockwood, 1951, p. 47 and Agrimi and Crisciani, 1994, p. 19.
multiple disturbances, and the name of the physician requesting Mercuriale’s advice\textsuperscript{19}. Mercuriale links the information found in the texts by Plutarch and Hippocrates with the patient’s family history, which he must have learned from the physician who sought his help. Then, he explains the causes of the many diseases affecting the woman’s heart and brain, which come from the vapors and humors originating in the liver and the hypocondria—the portion of the body between the ribs and the inwards\textsuperscript{20}. Mercuriale states that, even though the woman’s menstrual period had decreased, the uterus did not seem to have been affected by the intemperies plaguing her, since she already had children. The rest of the consilium is dedicated to the cure, made of recommendations about the victus ratio (the life style), surgical remedies like blood letting and cauteries, and recipes for herbal medications.

The consulting doctor received each individual’s basic information, such as age, social status and profession, which made the approach to the patient’s illness and the cure less formal than the ones present in treatises of medicina practica. Sometimes the person who brought the letter to the physician was questioned to gather more information about the patient\textsuperscript{21}. In general, less known physicians sought after the consilium of a more established, famous doctor for very wealthy patients\textsuperscript{22}. In the titles of the consilia by Mercuriale and Claudini the terms nobilis and nobilissimus/a are often used to describe the patient’s social status, whereas his or her name is not always specified. From the biographical elements that sometimes appear in these consilia, the male

\textsuperscript{19} “Pro muliere melancholica atque epileptica, gravitate, dolore capitis, lippitutudine oculorum, ad somnum propensione, et dolore acerbissimo ventriculi laborante ad Horatium Guargantum Medicum”, Mercuriale, 1620, book 3, consultatio 81. The titles could have been given when the collection of consilia was printed, as often happened in the sixteenth century. In the 1559 partial edition of Da Monte’s Consilia, some titles were different from those present in the 1583 edition. For instance, consilium 16, in the 1559 edition is entitled De melancholico Indaeo, clarissimorum Doctorum Petri Navarre, Frisimelcae et Baptitiae Montani, while in the 1583 edition is consilium 22, De Indaeo delirante [...].

\textsuperscript{20} Priscianus Theodorus, a physician active in the fourth century A.C.E defines the hypocondria “illa corporis humani regio, quae a macronata cartilagine utrinoque illa usque protruditur”, Priscianus Theodorus, 1502, p. 10.

\textsuperscript{21} Lockwood, 1951, p. 50. Da Monte’s consilia are structured differently. Some were dialogues among three physicians, including Da Monte. Others were situated at the patient’s bedside. See Da Monte, 1583, consilium 237, pp. 581-84, for a young man suffering of “hypocondriac” melancholy. The consilium is done in colloquio with the physician Frisimelca. On page 583 Da Monte says “[...] ut vidimus bodie in D. Benedicto, qui laborat affectione hypocondriaca, in quo et inrigidatum est heman, ut secutus sit tumour pedum.” For an evaluation of Da Monte’s consilia, see Bylebyl, 1991, pp.187-88 and Bylebyl, 1993, pp. 56-59.

\textsuperscript{22} Lockwood, 1951, pp. 117, 135; Siraisi, 2001, p. 164.
patients were members of the aristocracy (Mercuriale, book 1, consilium 39; book 2, consilium 33; book 3, 34, 110; book four, consilia 6, 18; Claudini, consilium 36, 81, 84, 99, 103, 106), military people (Mercuriale, book 3, consilium 133), men of the church (Mercuriale, book 3, consilium 14; Claudini, consilia 72, 136), doctors of law (Mercuriale, book four, consilium 42; Claudini, consilium 89) Bolognese senators (Claudini, consilia 103 and 110), and young intellectuals (Mercuriale, book 1, consilia 25 and 86). The female patients were defined generally as nobles and illustres. In five cases Mercuriale reveals their specific social status. One consilium is for a countess and the other four are for nuns. Claudini also dedicates a consilium to a nun. Three of the six women treated by the two physicians are affected by melancholy, while the other three suffered from disturbances, among which the suppression of the menstrual period and the alteration of their natural temperature. Another female patient is an older woman devoted to intellectual studies. Due to the popularity of Mercuriale and Claudini, their recommendations were requested by physicians and patients residing in numerous Italian cities—Ravenna, Ferrara, Rimini, Padua, Urbino, Imola, Piacenza, Venice, Lucca, Genoa, Siena, Forli, Milan, Modena and Cesena, as well as in foreigners from Germany, Poland and Spain.

The authors of the consilia and their students used the collections for didactic and editorial purposes. Thus, in the fifteenth and especially sixteenth centuries the consilium became the genre that mediated between the university course and professional activity. Consequently, a sixteenth-century collection of consilia was thoroughly edited before being printed and contained a vast number of citations from ancient authorities. It allowed the student or physician to connect the mostly impersonal material found in the treatises with contemporary, individual cases treated in the consilia that exemplified the assumptions of the medical tradition.

Italian physicians defined madness through a series of pathologies for which they devised symptoms, causes, diagnosis and cures. These pathologies all derived from an intertemperies, an imbalance of the four humors that affected

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23 Stressing the high social status of patients was probably also a way of emphasizing the doctor's high standing in his profession, revealed by the distinguished people who consulted him. I thank Nancy Siriisi for this idea.
25 Claudini, 1607, consultatio 128.
26 Claudini, 1607, consultatio 92.
directly or indirectly the head. Therefore, one of the main causes that produced insanity was physiological, even though in several consilia Mercuriale underlines that disturbances of the mind (perturbationes animi) such as falling in love or witnessing a traumatic event, can also induce the imbalance of the humors producing insanity. The relationship that Mercuriale drew between the mind and physical illness, which the medieval physician Taddeo Alderotti had emphasized before him, accorded with Plato’s assertion in the Charmis that “all the misfortunes from the mind overflow into the body” 29.

Giralamo Mercuriale’s Medicina practica (1602) contains a section dedicated to the illnesses of the head, among which the author listed traditional categories of insanity: melancholy in its various forms (per essentiam, per consensum, hypocondriaca and ab utero), lycanthropia, fatuitas, amnesia, phrenitis and mania. Melancholy is defined as the condition of “corrupted imagination” or “corrupted discourse” or both, to which the affectus of lycanthropia also belongs30. Those affected by lycanthropia believe and imagine that they are wolves or dogs31. Fatuitas and amnesia are disturbances that affect only the ability to speak (fatuitas) or the ability to both speak and the functioning of the mind (amnesia)32. Phrenitis and mania are forms of delirium, with fever (phrenitis) and without fever (mania)33. While melancholy affects the imagination, but not the mind, the mania affects the mind and one, two or all three faculties of speech, imagination, and memory34.

In the treatment of all these illnesses, except for lycanthropia, Mercuriale and Leoni include gender as one of the discriminating elements in the definition of the disturbance. This situation reflects an ideological position that viewed women as weak and irrational, a position the textual medical tradition naturalized and rendered physiological. Treatises of practical medicine ideologically colored observations that were supposed to be ‘referential’ and ‘objective’. Ancient physicians stated that the dominant humors of a woman’s body are cold and moist, in opposition to the hot and moist temperies of a

29 “[.] ut dicebat Plato in charmide, cuncta pene mala ab animo in corpus redundant [...]”, Mercuriale, book 2, consultatio 23, p. 56, for a young man suffering of melancholy. For Taddeo Alderotti’s idea of the link between mind and physical illness, see Siraisi, 1981, p. 203.
30 “Communiter comprehendit omne delirium, quod sequitur vel febris, vel alios morbos: proprie autem significat vel discursum depravatum, vel imaginatio depravata, vel utrumque”, Mercuriale, 1602, book 1, p. 27.
31 “Est autem hic affectus aegritudo quaedam, in qua homines putant e imaginantur, sese vel lupos, vel canes esse [...]”, Mercuriale, 1602, book 1, p. 49.
32 Mercuriale, 1602, book 1, p. 50.
33 Mercuriale, 1602, book 1, p. 53.
34 Mercuriale, 1602, book 1, 61.
man. The woman’s humoral composition affects her mental characteristics. She shows a more passive temperament than a man and has a weaker mind because of the influence that the uterus has on the brain. The weakening effect that the uterus has on the woman’s rational abilities is counterbalanced by an increase in the frequency and violence of passions. Therefore, both women’s bodies and their psychological behavior were perceived as inherently inferior to men’s, confirming the argument that Renaissance medical tradition perceived of the corporeal, the psychological and moral dimensions connected and influencing each other. Sixteenth-century physicians like Da Monte, Mercuriale and Leoni repeat these statements in their treatises, thus establishing their authority through a dialogue with or dependence on the textual medical and philosophical tradition of Galen’s Hippocrates, Galen, Avicenna, Aristotle and Plato.

In his treatment of melancholy, Mercuriale states that melancholy affects differently men and women, basing his explanation on the authority of Avicenna and Aretaeus of Cappadocia: “[...] men become melancholic more often, but women, when they become melancholic, are affected much worse than men. [...] Women kill themselves more often than men”.

Mercuriale lists three causes for this difference pertaining to the physiological and the moral dimensions. The first cause, which Mercuriale derives from Aristotle, is that women are cold by nature and therefore more prone to anxiety and sadness. The second is that the impurity of the menstrual blood, joined with the melancholic humor, produces horrible effects on women’s minds. Mercuriale quotes the authority of Hippocrates who states that, if the menstrual period is suppressed, melancholy affects the woman’s heart and

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35 Maclean, 1980, p. 42. For a discussion of gender and sex difference in the Middle Ages, see Joan Cadden, 1993.
36 In his Medicina Universa Da Monte has a chapter entitled De temperamentis ratione sexus, et quasstio utrum mares calidiores foeminius, Da Monte, 1587, pp. 156-157; Mercuriale, 1602, book 1, p. 31; Leone, 1583, p. 81. For Galen’s elaboration of Hippocrates, see King, 2002, pp. 21-36.
37 “[...] ut scribunt Aretaeus & Avicenna, viri frequentius quidem evadunt melancholici, sed mulieres, ubi melancolice evadunt, multo peius tractantur quam viri. [...] multo saepius esse interimere mulieres quam viros”, Mercuriale, 1602, book 1, p. 31.
38 “Nam Arist. 30. Probl. I ubi copiosissimum de melancholia tractatum habet, inquit diversitatem affectuum, qui conspiciuntur in melancholicis oriri ex diversitate habitus corporum, ita, ut quando habitus valde frigidos estaccident humore melancholico, sient molestiae & anxietates [...]”, Mercuriale, 1602, p. 31.
39 “[...] adeo enim saevas & infensus est hic sanguis, ubi quotiescumque coniungitur humorii melancholico, horribiles et incredibles effectus producit”, Mercuriale, 1602, book 1, p. 31.
40 “Hippocrates in libro de morbis virginiun scribit, retentis mensibus melancoliam illa in cor restagnare [...] Unde postmodum & melancolia, & terrors, & insania suborintur”, Mercuriale, 1602, p. 29. On the
then “melancholy, fears and insanity” overcome her 40. The third cause is that “this sex [i.e. the female sex] is of such a pusillanimity of soul that, once it is captured by this humor, it surrenders itself completely to its power” 41.

Leoni also establishes in his treatise of medicina practica the distinction between men and women on the presumed weakness of women’s mind and body, which fits the hierarchy of genders illustrated earlier. Like Mercuriale, he genders melancholia, by stating that men are more predisposed to it, but that the type of melancholy that affects women is more dangerous and difficult to cure “either because they are less warm and their humors are more phlegmatic and persistent; or because they are engaged in evil plans (indeed, as Seneca says, women outsmart men in evil plans)” 42. For Leoni women are affected by a type of melancholy that depends on physiological conditions — their bodies are colder — and on moral behavior — they are more predisposed than men to machinations. Even the allusions to women’s bodily temperature and humoral complexion are ideologically charged. Leoni does not explain the connection that both ancient authorities and Mercuriale make among women’s cold temperament, the uterus’s weakening effects on their minds and the violence of their passions. He simply offers the physiological and the psychological explanations side by side and asks the reader to choose one of them.

For Mercuriale, cold temperament and the retention of the menstrual blood are the discriminating elements for fatuitas, amentia and mania in women. Cold humors, either phlegmatic or melancholic, are the main internal cause for fatuitas and amentia: therefore “women are more prone to this illness than men” 43. Mania, which, like melancholia, derives from melancholic humors in the brain, is at its most dangerous when produced by the retention of menstrual

question of whether the heart or the brain is the organ most affected by melancholy, see the passage immediately after, where Mercuriale, disagreeing with both Hippocrates and Galen, states that the brain is the main organ affected by melancholy.

41 “[...] quoniam hic sexus usque adeo parvi animi est, ut ibi semel captitur ab hoc humore, sese totum tradat in potestatem ipsius”, Mercuriale, 1602, book 1, p. 31.


43 “[...] Cause interne fatuitatis & amenticie sunt frigidi humores, sive sint pituitosi sine melancholia. [...] Sexus quoque aliquid fact ad generationem huinis mali...mulieres magis, quam viri tentanter hac aequitudine”, Mercuriale, 1602, book 1, p. 51.

blood. Here Mercuriale appeals to the authority of Hippocrates44.

Leoni defines mania and love madness as subcategories of melancholy45. He follows the medical tradition when he states that mania is an illness affecting the brain ("mania laesio in cerebro corrupens omnes virtutes morales") or other parts of the body, such as the stomach or the uterus. These places where burned humors or sperm and menstrual blood are retained, produce noxious vapors that rise to the brain. Leoni claims that once these vapors reach the brain, they "bring the patient to narrate future events [and] speak various languages—Latin and Greek, even though he/she has never spoken such languages before" (202), and concludes by stating that "nuns, widows and virgins fit for a husband", that is, women who either by choice or by imposition of social rules cannot have sexual intercourse with a man, "suffer mostly of these symptoms, and especially those who have a predominance of bile, blood and are rather vigorous"46. In this passage, the retention of menstrual blood or "spermatic" fluid produces an enhancement of women’s imaginative and mental faculties. Leoni follows this comment by narrating the case of a "mania ca" woman he had witnessed in Zuccano which creates a stark contrast with the previous passage:

I saw a woman of choleric temperament who became prey of mania and frenzy because of the retention of spermatic liquid and of the urge to have intercourse (indeed, she was a young woman of twenty-five, she had not married yet, nor did she carnally know a man). She was in such a state of raging madness that she would wander through lands and woods and invite any man whom she encountered to sleep with her, and pursue those who refused with stones and insults. Finally, sexual intercourse appeased this kind of madness, since she married a peasant, so that, having obtained the right medicine, she was restored to her pristine health47.

In contrast with the chaste nuns, widows and virgins, who, like her, have

44 "The forms of melancholia[…] are numberless. In the writings of authors mania, wandering melancholia, heros or passio heroica or Love [erotomania] are the most famous forms of melancholia", Leoni, 1583, p. 201.
46 "[…] vidi mulierem temperaturae biliosa, ob spermatis retentionem, & coeundi desiderium (erat enim iuvenis vigintiquinquennae annorum, & nondum nupta fuerat, neque virum cognoverat) maniacam, & furiosam factam: it ut, per agros, & per silvas erraret, & numquamque obviam factum, ut secum coiret, provocatam, & reuenues lapidibus, & conviciis insectabaturs. Denique huicismodi iuorem coitum sedavit: nupsit enim cuidam rustico, unde convenientem adepta medicinam, pristinae sanitati fuit restituta", Leoni, 1583, pp. 202-203.
their body naturally predisposed to such type of insanity, this maniac young woman is not endowed with the gift of forecasting the future or heteroglossia. Leoni depicts her as a beast in heat who behaves in a very unbecoming way because at twenty-six she is still unmarried and her age is just beyond what is considered the age for a woman to marry. She regains her wits only after marrying, implying that conventional sexual intercourse makes her again a legitimate member of her community.

This woman is described differently because she belongs to a lower social status than the nuns, widows and virgins from the previous passage. Evidence is provided in a later passage, where Leoni states that coitus is the safest and most instantaneous cure for the mania caused by “the evaporation of retained and corrupt sperm” which affected the peasant woman.

[...] coitus is not granted to everybody because of respectability, either because she is a noble virgin, or a widow with brothers and relatives who are anxious custodians of her chastity, or a nun and religious woman who has sworn to God to keep intact her chastity.48

Leoni suggests that an obstetrician do the job, by inserting her index finger in the patient’s womb and by rubbing “until pain is raised and the patient complains”49. Thus, Leoni’s treatment of mania seems to be shaped not only in relation to gender, but also in terms of social class. Leoni attributes the woman’s manic state to the retention of “spermatic” liquid, which seems to imply that he believes that women, like men, produce semen, even though he does not pronounce himself on its efficacy.50 However, from the context in which the physician discusses this issue, it appears that the retention of spermatic liquid holds the same effects as the retention of menstrual blood, and probably has the same nature. Both must be evacuated for the woman’s body to regain its humoral balance.

In their treatises, Mercuriale and Leoni conveyed a gendered view of mania and melancholia. They inherited it from the Greco (Arabic)-Latin medical tradition and shared it with their Italian and foreign students as well as their fellow physicians, all of whom acquired and read their texts. It is

49 Ibid.
50 For a general discussion of the “existence and efficacy of female semen” see Maclean, 1980, pp. 35-37.
important to underline that Bologna was the most important city of the Papal State after Rome, and the medical students at the University of Bologna constituted a major portion of the future physicians in Italy and Europe.

Mercuriale’s treatment of mania and the other illnesses of the head is impressive for the author’s erudition and knowledge of the ancient authorities with which he engages at times in a respectful but nevertheless lively debate. The discriminating elements that differentiate men and women are given, explained, but not emphasized. Leoni’s treatment seems to be more focused on these differences. He offers examples taken from both the medical classical tradition and from personal experience, as the story of the young peasant woman from Zuccano demonstrates. However, both Mercuriale and Leoni use the classical medical tradition to distinguish men and women in the definition and explanation of the illnesses of the head.

In Mercuriale and Claudini’s *consilia* dedicated to the illnesses of the head, the majority of the patients are men. Nineteen of the sixty-one *consilia* by Mercuriale that I considered are dedicated to women, while four of the twenty-five *consilia* by Claudini are addressed to female patients\(^{51}\). These women belong to the high echelons of society, like the men, and their ages ranges from adolescence to old age. The fact that women constitute a small percentage of the total number of patients treated does not mean that they were afflicted less by them, but that, perhaps, they sought the help of a physician less than men for these diseases\(^{52}\). Furthermore, reasons of privacy and decorum might have prevented the physicians from printing all the *consilia*.

The most common illness treated in the *consilia* by both Mercuriale and Claudini is melancholy, either *per essentiam* or *hypocondriaca*, alone or together with other illnesses\(^{53}\). The other illnesses are *insania*, a term that, according to

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\(^{52}\) On the basis of sixteenth and seventeenth-century records of medical practice in sixteenth and seventeenth-century England, MacDonald states that “women complained to doctors of mental disorders and distress more often than men”, and that “[o]ver twice as many women as men blamed their afflictions on intolerably stressful situations, mostly family conflicts of one kind or another”, MacDonald, 1986, p. 276.

\(^{53}\) Fifty-two by Mercuriale and sixteen by Claudini analyzed deal with patients affected by melancholy. A similar situation occurs in Da Monte’s collection, where sixteen of the twenty-seven *consilia* I consulted are on melancholy.
the fifth-century physician Celsus, includes several types of deliria, mania, desipientia and a “morbosus pudor” which is the consequence of melancholy. On the basis of the consilia analyzed in this study, it appears that melancholia hypocondriaca was the disease that plagued the Italian elite in the second half of the sixteenth century. It was caused by burned juices formed in the hypocondria creating obstructions in the intestines and affecting first the stomach and the liver and then ascending to the brain. Other diseases that were carefully treated in the treatises of medicina practica were conspicuously absent or meagerly represented.

Mercuriale likens melancholy to the mythical figure of Proteus since it is able to assume many forms and can cause many disorders in the body. He compares melancholia hypocondriaca to a Trojan horse from which all the symptoms arise. Mercuriale states that people throughout Italy suffer from this disease and ask his advice every day. He attributes this phenomenon to a reckless lifestyle, especially when it comes to food, which is always excessive, never entirely digested, and therefore produces noxious vapors that ascend to the heart and the brain, creating fear, sadness and perturbationes animi in those either naturally inclined to it or brought to such misfortunes by external circumstances. Claudini also describes this disease as a communis calamitas and, like Mercuriale, compares it to Proteus.

There is no clear distinction between female and male patients in the causes, symptoms, prognoses and cures Mercuriale and Claudini recommend for the cases of melancholia hypocondriaca, except when melancholia is linked to a disorder of the uterus. The uterus is the locus of difference between the sexes. In the consilia it still produces melancholy and madness, but the way in which it is conceived as a container of poisonous juices and dredges and the way it is cured by evacuation, makes it analogous to parts of the male body,

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54 For the definition of the term mania, see Mercuriale, 1602, book 1, p. 60.
56 “Qui fiant ut haec nostrae tempora vitae sentur tot qui hypocondriaca melanochia excentetur, dix ac multum mecum cogniti, cui ex plurimi qui quotidie, & in haec urbe, & in aliis regionibus ad me confluunt, maiorem partem huiusmodi contumaeissima aegritudine detentos consipicare accidit”, Mercuriale, 1620, book 3, consultatio 86. The “urbs” to which Mercuriale alludes in this passage is not Bologna, but Pisa, since the consilia included in book three of the collection were written between 1593 and 1597 at the time he was teaching at the university of Pisa. For a description of Mercuriale’s move from Bologna to Pisa, see Simili, 1966b, pp. 1-36.
58 “Quod affectus melancholicus tum frequentissime ingruit, ut iure communis calamitas omnibus hominibus sit consensud”, Claudini, 1607, consultatio 110.
such as the stomach and hemorrhoids. These conclusions are based on a comparison of consilia for melancholy and melancholia hypocondriaca written for men and women; a consideration of the cases of melancholia hypocondriaca related to religious women; and several cases of the disease when directly affecting the uterus or linked to its suffocation.

In a consilium for a young man whom Mercuriale thinks is affected by melancholia hypocondriaca, the constant fevers afflicting the patient are caused by the inflammation of the mouth of the lower stomach and are a symptom of the disease, as Galen and other ancient authorities had proven. The inflammation is caused by obstructions in the hypochondria, producing “vapores cereberrimi tam pituitosi quam melancholicii”. These fumes ascend to the head and turn into humor which then spread throughout the body\(^{59}\). The cure varies little from one melancholic individual to another, regardless of gender. It consists in the doctor managing, together with the patient, several or all of what Galenism considered to be the six res non naturales; that is, elements in the realm of nature that were external to the body: air and weather, food and drink, motion and rest, sleep and wakefulness, evacuation and repletion, and passions of the mind\(^{60}\). One surgical remedy is bloodletting in the lower parts of the body – for instance the hemorrhoids. In the Canon, Avicenna asserts that blood flowing from the hemorrhoids “provides immunity” from many illnesses, including “folly, melancholia, melancholic epilepsy” and that if that blood is retained inside the body “one of these diseases is to be feared”\(^{61}\). The other surgical remedy consists in putting cauteries to the internal part of both knees, in order to divert the ascension of the poisonous fumes produced in the lower stomach to the heart and the brain. Finally, the pharmacological remedies are made of herbs such as the buglossa (anchusa), sena, mamma and veratum nigrum (a type of hellebore) which make the body evacuate the humoral dredges causing the disease. Other ingredients include the borage, a plant thought to have anti-depressive qualities, the lupulus, (hops), used to treat insomnia, nervousness and anxiety, the oxalis, a herb for the treatment of liver and digestive disorders, the rhubarb, with purgative properties, the

\(^{59}\) Mercuriale, 1589, book 2, consultatio 103.

\(^{60}\) Garcia-Ballester, 1993, p. 105. For a thorough dicussion of the sex res non naturales and their link to Galenism, see Garcia-Ballester, 1993, pp. 105-113. In Mercuriale’s consilia, evacuation and repletion included sexual activity and bodily functions; passions of the mind, worries and excessive intellectual exertion.

\(^{61}\) Avicenna, 1490, book 3, fen 17, tract. 5, ch. 2. The passage is quoted and discussed in Pomata, 2001, p. 126.
cardamon, with digestive qualities, and the *scolopendrium*, which removes obstructions from the liver and the spleen\textsuperscript{62}. In many cases when the heart is affected as well, Mercuriale suggests to put a sachet of flowers over one’s heart, to be carried all the time\textsuperscript{63}.

In a *consilium* dedicated to a “*nobilis senes*”, the paucity of natural warmth in the entire body causes the most deleterious symptoms of *melancholia hypocondriaca*, such as slow digestion, flatulence, but also sadness and sorrow\textsuperscript{64}. If in the previous case the lack of natural warmth in the body was probably due to the patient’s advanced age, in the *consilium* for an *egregius iuvenis* who suffers from catarrh and melancholy, it was due, according to his relatives, to a traumatic fear. This fear led to an unnatural cold temperature of the internal organs except for the liver, which *melancholia hypocondriaca* always makes hot. To restore the body’s normal temperature, the patient should be subject to bloodletting from the hemorrhoids, cauteries from the internal part of the knees and purgatives that help evacuate the body\textsuperscript{65}. Melancholy can produce effects similar to those caused by mania, or be accompanied by mania. A twenty-year old man was verbally and physically abused by his tutor and had been drinking wine from a very young age which leads Mercuriale to quote the *divinus Plato* who states that if children are terrorized or drink wine before the age of eighteen, they will be melancholic for the rest of their lives. The youth also lost his parents when he was very young and led a debauched life with the result that his faculty of imagination and speech are deeply affected. He has the strong desire to strike himself and others, which is the sign of a deranged mind and demonstrates a warm temperament. However, Mercuriale justifies this peculiar behavior by stating that burned humors upset the *hypocondria* and the liver, and consequently the brain. Mercuriale recommends that the young man be cured through sleep, a moderate life and diet, daily evacuation, bloodletting from the right arm and the hemorrhoids, and cauteries in both knees\textsuperscript{66}. Claudiini’s *consultationes*, though less rich in personal histories than Mercuriale’s, present similar symptoms, causes and cures. *Consultatio* 81 is for a noble man from Ferrara, whose sadness and desire for solitude, together with abundant flatulence and discomfort in the lower abdomen, show that he is affected by *melancholia hypocondriaca*. The main

\textsuperscript{62} For a sixteenth-century text dedicated to the herbs, their composites and their function in relation to the four humors, see for instance, Antonio “Musa” Brasavola, 1552, Venice.
\textsuperscript{63} Mercuriale, 1589, book 2, *consultatio* 87.
\textsuperscript{64} Mercuriale, 1620, book 3, *consultatio* 20.
\textsuperscript{65} Mercuriale, 1620, book 3, *consultatio* 77.
\textsuperscript{66} Mercuriale, 1620, book 3, *consultatio* 47.
problem is in the stomach—too cold—and the liver—too hot—and the surgical remedies recommended are bloodletting from the elbow and the application of leeches to the anus.67

Of the nineteen consilia by Mercuriale considered in this study that were written for female patients, fourteen deal with melancholy or melancholia hypocondriaca, and three of the four consilia by Claudini. Seven of Mercuriale’s consilia are not directly linked to the retention or irregularity of the menstrual blood or to the suffocation of the uterus.68 In another, Mercuriale cannot infer from the information if the period is scarce.69 In one of his consilia Claudini does not mention the retention of menstrual blood as the main cause for the melancholic disease.70

In the case of Camilla Feramonti, melancholy is coupled with epilepsy and a sort of blindness, all serious disturbances affected by the melancholic humors. The cure recommended is to apply cauteries to the head and the knees and purgatives such as a syrup of “polypodium”, a substance that Mercuriale uses to cure all his melancholic patients to free the body of the poisonous melancholic dredges.71 If this consilium, like other written for male patients, is exquisitely physiological in its explanation of melancholia, other consilia underline the coexistence of internal and external causes producing melancholy, which Mercuriale was able to learn through his experience.72 The cause for a noble woman’s constant desire to cry, which is common with other patients afflicted by melancholia hypocondriaca, is an excessively cold stomach and hot liver. The cure aims at reestablishing the warmth of the stomach and cooling off the liver. It does not matter whether or not the woman’s temperament is colder than the man’s. The cure is perarduum since both the body and the mind aegrotants, but Mercuriale places his trust in a good diet and cauteries. He does not recommend bloodletting because the woman has a regular menstrual period. The menstrual blood appears to have the same function as the bloodletting in the hemorrhoids for men: evacuating

67 Claudini, 1607, consultatio 81.
68 Mercuriale, 1620, book 1, consultatio 9, 11, 87; book 2, consultatio 86, 98.
70 Claudini, 1607, consultatio 92.
72 “[..] & quantum ipse experientia dedit, paucissimos melancholicos inveni, qui non aequo internam, ac externum morbis causam gerent”, Mercuriale, 1589, book 2, consilium 9, p. 27.
73 For an analysis of the parallel between menstruation and hemorrhoids, which was commonplace since Galen, see Pomata, 2002.
“bad” blood and noxious humors\textsuperscript{73}. Finally, the cause of the melancholia that plagues a nun is not the lack of sex or the retention of blood, but the fact that her life “is spent mostly in inactivity and meditations, and it is not surprising that their body is disturbed by these conditions”\textsuperscript{74}. A very serious case of melancholia upset the same nun’s brain, heart, liver, and stomach; she suffers from vertigo, heart palpitations, flatulence, inappetence, fear and sadness. The best cure consists in a good diet and lifestyle along with medications that help her body evacuate. In fact, in at least three consilia Mercuriale underlines the connection, established by Hippocrates, between lack of pregnancy, sex and menstrual period, and grave disturbances in a woman’s body, which is painfully evident among nuns. However, he does not list melancholy as the main disturbance\textsuperscript{75}.

In contrast, \textit{melancholia hypocondriaca} produced by a badly affected uterus, disturbs a Genoese nun treated by Claudini: a great decrease of menstrual blood, which appears discolored and flows out irregularly, is the main sign of this disorder. The first remedy listed is the application of cauteries to the thighs, followed by medications meant to reestablish the menstrual period and help the body evacuate and alter its cold temperature\textsuperscript{76}. In other consilia by Mercuriale for female patients who suffer of \textit{melancholia hypocondriaca}, the suppression of menstrual blood is listed as one of the causes, if not the main cause of the disease\textsuperscript{77}. However, in two consilia the melancholic disposition is also declared hereditary. In one case, Mercuriale argues that a teenager who has received the melancholic humor when still a fetus, now suffers from other disorders of the suffocation of the uterus. In the other cases, Mercuriale agrees with the auctoritates that a child born from a melancholic and epileptic parent is bound to suffer the same disorders. The woman’s father suffered from vertigo and apoplexy and her brother from melancholia and epilepsy. Therefore, he does not find it surprising that she suffers from vertigo, epilepsy and melancholy\textsuperscript{78}.

In both cases Mercuriale recommends bloodletting from the lower parts of the body, as proposed by Galen for “affectibus melancholicis”. This helps divert

\textsuperscript{73} “[...] quandoquidem [...] vita cum plurimum temporis in oti et cogitationibus versetur, corpus ab ipsis affectis minimis mirum est”, Mercuriale, 1589, book 3, consultatio 87.
\textsuperscript{74} Mercuriale, 1620, book 1, consultatio 62; book 2, consultationes 27 and 85.
\textsuperscript{75} Claudini, 1606, consultatio 128.
\textsuperscript{77} Mercuriale, 1620, book 2, consultatio 101; book 3, consultatio 81.
the fouls vapors formed in the uterus and the inner organs from reaching the heart and the body”\textsuperscript{79}. In other consilia Mercuriale quotes the authority of Hippocrates who states then when a woman has never been pregnant, is sterile or lacks her period, she is bound to be sick and have “perturbationes animi”. Mercuriale says that the woman has been having her period regularly, even if she has never been pregnant. Furthermore, even though the woman’s brain has been affected and her imagination has been badly damaged, the woman’s power of speech and memory are not, thanks also to the love and affection of her husband. Besides following a good diet and medications that help the body evacuate, Mercuriale suggest bloodletting from the lower parts of the body and also considers the opening of the hemorrhoids: “[…] certe natura ubi aperit ora ipsarum, adeo ampla dilata, ut crassior sanguis, et foeculentus exeat […]”\textsuperscript{80}.

From the analysis of the treatment and cure of the illnesses of the head in the consilia by Mercuriale and Claudini, some provisional conclusions can be made regarding the differences and similarities between female and male patients. It is significant that, even though they may link physiological and psychological qualities in female patients, especially when dealing with melancholia discussed above, in some cases they attribute the woman’s illness to hereditary causes that can be modified by the affection of loved ones. More importantly, the cure for female and male patients is very similar, regardless of their sex. In several cases of melancholia affecting male patients, bloodletting from the hemorrhoids or from the knees seem to correspond to the natural evacuation that occurred to women each month through their menstrual period. In these cases, the function of surgical remedy was to evacuate dredges from the lower part of the body—the stomach or the uterus—and to reestablish the body’s natural warmth. Finally, the interest that Mercuriale showed in his patients’ stories and his focus on usus and experientia rather than on ratio seem to go beyond the schematic difference that he explained in his treatise of medicina practica. Probably because of the bridge-like role that they played between doctrine and therapeutic practice, the consilia dedicated to the illnesses of the head proposed a less rigid distinction in the molding of gender than the treatises. In the analyzed consilia the role of narrative and the interest for the individual, even though reined within the structure of the genre, seem to moderate the sixteenth-century misogynist attitude towards the difference of sexes between men and women.

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\textsuperscript{79} Mercuriale, 1589, book 2, consilatio 101, p. 249.

\textsuperscript{80} Mercuriale, 1620, book 3, consilatio 98.
Riassunto

Questo lavoro analizza i più comuni tipi di malattie alla testa nei trattati di *medicina pratica* e nelle raccolte di *consilia* scritti da importanti dottori bolognesi nella seconda metà del sedicesimo secolo. Questo lavoro fornisce una risposta parziale alla questione della pazzia nel sedicesimo secolo a Bologna, un centro medico universitario per l’Italia e per l’Europa durante il Medioevo e il Rinascimento. Una risposta parziale a questa domanda si trova nel modo in cui autorevoli dottori dell’Università di Bologna hanno rappresentato la pazzia in relazione alla nozione di “gender” nei trattati di *medicina pratica* e nei *consilia*. Anche se convenzioni circa il comportamento maschile e femminile modellavano il modo in cui questi due generi comprendevano la malattia mentale, esse avevano un ruolo meno importante nei *consilia*.

*Keywords:* madness, gender, treatises of *medicina pratica*, *consilia*, Girolamo Mercuriale.

*Running head:* Illnesses of the head in Girolamo Mercuriale and Giulio Cesare Claudini. Similarities and differences of the sexes.

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