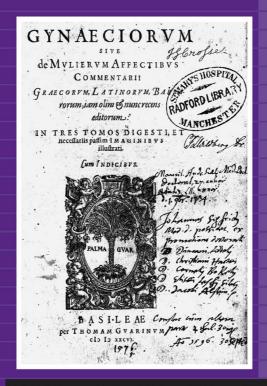
Midwifery, Obstetrics and the Rise of Gynaecology

The Uses of a Sixteenth-Century Compendium
HELEN KING



WOMEN AND GENDER IN THE EARLY MODERN WORLD

MIDWIFERY, OBSTETRICS AND THE RISE OF GYNAECOLOGY

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HELEN KING
University of Reading, UK



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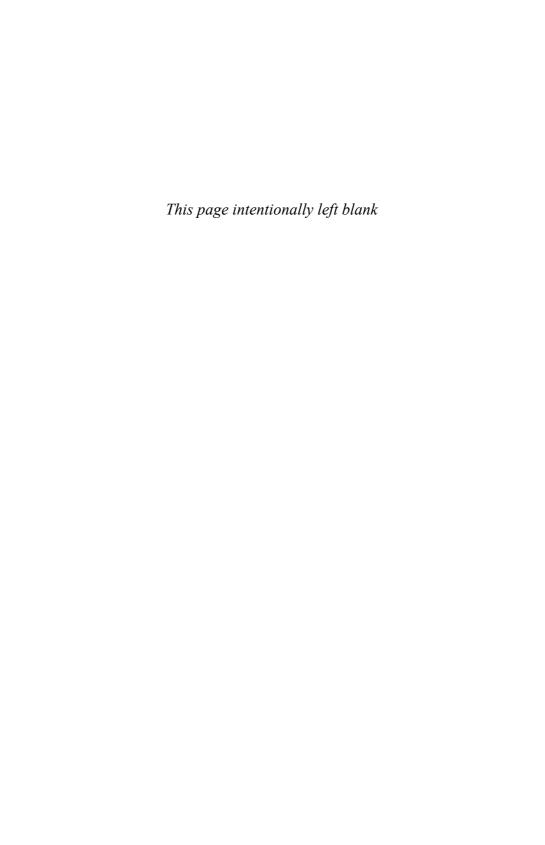
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Introduction

Towards Gynaecology

'Why can't a woman be more like a man?'

Henry Higgins, My Fair Lady

How far does female difference from men extend, and to what degree does the decision that gynaecology is necessary – that the difference is so great that women require their own medical field – relate to specific historical and cultural views on the nature of woman? In the late nineteenth century, Dr. Ludovic Bouland, a physician who also founded the French society for collectors of bookplates and artistic bindings, rebound a 1663 collection of five texts in Latin on virginity and on the diseases of women; looking for 'a binding appropriate to the subject', he chose a piece of female human skin, tanned by himself, decorated with gilt on the spine, borders, and cover ornaments. For him, skin – the wrapper of the female body – was also the most appropriate container for material on female difference. His decision implied that, even in its skin, the female body differs from that of the male.

The Gynaeciorum libri

Extracts from two of the works included in this 1663 collection had also featured in versions of an earlier and far more extensive Latin compendium of ancient and contemporary texts on the medical treatment of women, first published in Basle in 1566. Edited by Hans Kaspar Wolf (1532–1601), but conceived by the great humanist scholar Conrad Gesner (1516–64), the full title of this compendium was

The book, now held at the Wellcome Library (shelfmark EPB Bindings 14), is I. Sever. Pinaei, De integritatis & corruptionis virginum notis: graviditate item & partu naturali mulierum, opuscula. II. Ludov. Bonacioli, Enneas muliebris. III. Fel. Plateri, De origine partium, earumque in utero conformatione. IV. Petri Gassendi, De septo cordis pervio, observatio. V. Melchioris Sebizii, De notis virginitatis (Amsterdam, 1663). A handwritten note at the front of the title page reads Ce curieux petit livre sur la virginité et les functions génératrices féminines me paraissant mériter une reliure congruente au suject est revêtu d'un morceau de peau de femme tanné par moi-même avec du sumac. The skin came from a woman who died in the hospital in Metz when Bouland was a medical student. For a discussion of the early history of bindings made with human skin, see John Symons, http://www.wellcome.ac.uk/doc WTX024047.html> (accessed 28 December 2005).

Gynaeciorum, hoc est, de mulierum tum aliis, tum gravidarum, parientium, et puerperarum affectibus et morbis, libri veterum ac recentiorum² aliquot, partim nunc primum editi, partim multo quam antea castigatiores; 'Of matters pertaining to women, that is, concerning both the affections and diseases of pregnant women, those bringing forth and those in labour, and other [conditions] of women, some books of ancient and more recent [authors], partly now edited for the first time, others more carefully revised than before'. Here I will refer to this compendium as the Gynaeciorum libri, the 'Books on [the diseases of] women'; the Latin gynaecia, like the Greek gynaikeia, has many meanings, extending from 'women's matters' to 'women's diseases', to the female genitalia, and also covers 'remedies for women's disorders'. A second, enlarged, edition followed in 1586/8 under the editorship of Caspar Bauhin (1560–1624) and a third, running to 1097 folio pages, was produced by Israel Spach (1560–1610) in 1597.

Although the title page to Spach proudly claimed that the work was *necessariis IMAGINIBUS exornati*, 'embellished with indispensable illustrations', it contained very little beside text. The short extract from Felix Platter, which opened the collection from the second edition onwards, had some anatomical illustrations based on Vesalius, while instruments were shown in Ruf, Paré and Albucasis, and Ruf's text also included fifteen foetal positions. Other than the full-page illustration of the 'stone infant' of Sens, which will be discussed in detail in chapter 3, this was the extent of the images used in the collection. Far from being an accessible work on the nature of the female, this was a confusing and intellectually challenging volume.

Both the later editions of the *Gynaeciorum libri* stated in their titles the multiple origin of the works included – Greek, Latin and Arabic – here using not only the term *Arabori* (1597) but also, as a synonym, the derogatory *Barbari* (1586).⁵ In Greek, the collection included from its first edition the text of the sixth-century writer Muscio translated into Greek from what was believed to be its original

² Ian Maclean, 'The Diffusion of Learned Medicine in the Sixteenth Century through the Printed Book', in Wouter Bracke and Herwig Deumens (eds), *Medical Latin from the Late Middle Ages to the Eighteenth Century* (Brussels, 2000), p. 105, points out that 'recentior' could at this time mean any writer after 1300.

³ Helen King, *Hippocrates' Woman: Reading the Female Body in Ancient Greece* (London and New York, 1998), p. 23.

⁴ Once the 10-year privilege granted to the previous, 1586/8, edition ran out; Ian Maclean (pers. comm. 29 December 2000) says the 10-year privilege granted to Spach in 1597 still survives in Vienna. See his chapter, 'The Diffusion of Learned Medicine', p. 103, on how decisions were taken to reprint books. Online access to all three editions is provided by the Biblioteca Digital Dioscórides at the Universidad Complutense Madrid; see http://cisne.sim.ucm.es/search*spi~S4.

⁵ Israel Spach (ed.), Gynaeciorum sive de Mulierum tum communibus, tum gravidarum, parientium et puerperarum affectibus et morbis libri Graecorum, Arabum, Latinorum veterum et recentium quotquot extant, partim nunc primum editi, partim vero denuo recogniti, emendati (Strasbourg, 1597).

language, Latin, edited by Gesner and Wolf and, from the second edition, the text (with Latin commentary) of the first book of the Hippocratic *Diseases of Women*; in Greek, *Gynaikeia*, or 'women's matters'.⁶

When I began to study these collections, my initial research question was simply 'Why?': why were these different texts on women's medicine put together and printed at this time (Table 1)? A further question followed from this one: of the works available on women's diseases and on childbirth in the second half of the sixteenth century, why were some texts selected for these compendia, and others left out? The Gynaeciorum libri offered a pan-European group of texts, the authors of the contemporary works included being the Spaniard de Mercado, the Italians Bonacciuoli, Mercuriale, Bottoni and Trincavelli, the German-speaking Platter, Ruf, and Bauhin, and the French Akakia, de la Roche, Paré, Dubois, Rousset, le Bon and de la Corde. Some of the treatises included had already been available for a few years; some moved rapidly from publication as a separate volume, to inclusion in the compendium, while one was published without authorization in the Gynaeciorum libri, and appeared separately a year later. The production of the collection in Latin is a further aspect of its pan-European status. When Peter Murray Jones studied medical libraries in early sixteenth-century Oxford and Cambridge, he found that there was still very little that was not in Latin, even among non-professional owners, but by the mid- to late sixteenth century vernacular works were available in many European languages.8 For the Gynaeciorum libri, however, work which existed in French was translated into Latin so that the international learned community would have greater access to it; François Rousset's treatise on Caesarean section, Hysterotomotokia, had first been published in French in 1581, but was translated into Latin for the 1586 Gynaeciorum libri, while the treatises on menstruation and generation by Jacques

Muscio translated Soranos's (Greek) *Gynaikeia* into Latin, possibly in the sixth century AD; it was then translated back into Greek again later in the Byzantine period, before being translated into Latin once more early in the Renaissance. See further Ann Ellis Hanson and Monica H. Green, 'Soranus of Ephesus: *Methodicorum Princeps*', in *Aufstieg und Niedergang der Römischen Welt* 37.2 (1994): 968–1075, esp. pp. 1042–43, 1046, 1053–57. The text in the *Gynaeciorum libri* reprints the separate publication of Wolf's edition (Basle, 1566).

⁷ Maurice de la Corde's commentary on the Hippocratic *Diseases of Women* 1 appeared separately in 1585 and entered the compendium in 1586, while Girolamo Mercuriale's treatise appeared separately in 1587, the year *after* its inclusion.

⁸ Peter Murray Jones, 'Medicine and Science', in Lotte Hellinga and J.B. Trapp (eds), *The Cambridge History of the Book in Britain*, vol. 3, 1400–1557 (Cambridge, 1999), pp. 446–7.

Table 1 The contents of the three editions of the Gynaeciorum libri

Author	Short Title	First Publication Outside This Collection	First Entry into Gynaeciorum libri
Caspar Wolf (ed)	Harmonia Gynaeciorum		1566
Albucasis	Gravissimorum aliquot affectuum muliebrium curandi ratio		1566
Trotula	De mulierum passionibus		1566
Nicholas de la Roche	De morbis mulierum curandis liber	1542	1566
Luigi Bonacciuoli	Muliebrium liber	1505*	1566
Jacques Dubois	De mensibus mulierum et hominis generatione	1555	1566
Muscio	De passionibus mulierum liber		1566
Felix Platter	De mulierum partibus generationi	1583	1586
Jakob Ruf	De conceptu et generatione hominis	1554	1586
Girolamo Mercuriale	Muliebrium libros IV	1587	1586
Giovanni Baptista da Monte	De uterinis affectibus	1554	1586
da Monte	Consilia de affectibus muliebribus	1554	1586

Vittore Trincavelli	Consilia III muliebria	1586	1586
Albertino Bottoni	De morbis muliebribus	1585	1586
Jean le Bon	Therapia puerperarum	1571/7	
Ambroise Paré	De hominis generatione	1573	1586
François Rousset	Hysterotomotokia	1581 (F)	1586
Maurice de la Corde	Gynaeciorum in quo Hippocratis Coi, Liber prior de morbis mulierum	1585	1586
Luis de Mercado	De morbis mulierum communibus	1579	1588
Caspar Bauhin	Libellus variarum historiarum	1579	1597
Martin Akakia	De morbis muliebribus		1597

^{*} Dated on the grounds that the dedicatee, Lucrezia Borgia, is referred to as the Duchess of Ferrara, a title she only took in this year. I owe this point to Monica Green.

Dubois had appeared in Latin in 1555, then in French translation in 1559, and entered the 1566 *Gynaeciorum libri* in a revised Latin version.⁹

Other questions raised by this compendium concern its specific cultural contexts. How significant is it that a collection on the female body, emphasizing its distinct nature, was created during the Reformation, and in a period identified by some scholars as one in which – at least in England – masculinity began to undergo

The printing history of Dubois's work will be discussed further in chapter 1. As Jones points out, John Caius similarly published his work on the English sweat in Latin in 1552, but then produced a Latin version for the European market. However, here there was a clear reason for choosing the vernacular first. See Peter Murray Jones, 'Medical Libraries and Medical Latin 1400–1700', in Bracke and Deumens (eds), *Medical Latin from the Late Middle Ages to the Eighteenth Century*, p. 119. On translation into Latin see also Maclean, 'The Diffusion of Learned Medicine', p. 93 and n. 1.

a 'crisis'?¹⁰ This sixteenth-century interest in women in which, as I shall show, Hippocrates came to be seen as the expert on the sex, may be related to the 'crisis in patriarchy' identified, at least in England, by scholars including Anthony Fletcher. As I have documented elsewhere, all over Europe there was considerable interest in issues of menstruation, virginity and marriage, perhaps linked to the rise of Protestantism, in which virginity was seen as problematic, or to the issues of women in power posed by queens such as Mary and Elizabeth I.¹¹

At this time, what was thought to constitute a 'woman', and what did the texts in the Gynaeciorum libri take to be the main differences between the sexes? How were a woman's physical characteristics thought to affect her mental capacity, and what were the implications for her life? Did the publication of these texts as a compendium have any effect on the medical treatment of women? The editor of the third edition, Spach, maintained that his enlarged volume was needed because of continued demand for these texts devoted to the diseases of women; he described the publisher, Zetzner, as being 'influenced by the common good', embarking on this project because the books were so sought after. 12 Was that statement merely part of the rhetoric of medical publishing, or something more? Certainly, it was not only publishing on the diseases of women that took off in the second half of the sixteenth century. All three editions came out during a period in which the production of medical books was increasing rapidly; Ian Maclean has identified the years from 1565-1625 as 'the heyday of the Frankfurt Book fair', an event held twice a year and a key forum for publicizing, as well as selling, books. 13 From 1590 onwards, the first specialist bibliographies of medical works were also published; Israel Spach was responsible not only for the 1597 Gynaeciorum libri but also for the first bibliography of medical books organized by subject, the Nomenclator scriptorum medicorum published in 1591, which included the work of a total of 1436 authors. 14

But as I continued to study the *Gynaeciorum libri*, I could not help but be aware of its subsequent uses, and it is on these that the present book will concentrate. In its three editions, these were not particularly rare volumes; as the definitive works on the diseases of women, they were a 'must have' in the medical

¹⁰ E.g. Anthony J. Fletcher, 'Men's Dilemma: The Future of Patriarchy in England 1560–1660', Transactions of the Royal Historical Society, 6th series 4 (1994): 61–81; ibid., Gender, Sex and Subordination in England, 1500–1800 (New Haven, 1995); Anthony J. Fletcher and John Stevenson (eds), Order and Disorder in Early Modern England (Cambridge, 1985). Mary Fissell locates in the late seventeenth century a crisis of both paternity and maternity; Vernacular Bodies: The Politics of Reproduction in Early Modern England (Oxford, 2004), p. 46.

Helen King, *The Disease of Virgins: Green Sickness, Chlorosis and the Problems of Puberty* (London, 2004), pp. 80 and 140.

¹² Spach (ed.), Gynaeciorum libri, preface: Nunc autem cum eorundem desiderarentur exemplaria: tam precibus aliorum, quam etiam utilitate communi adductus et permotus.

Maclean, 'The Diffusion of Learned Medicine', p. 95.

See Jones, 'Medical Libraries and Medical Latin 1400–1700', pp. 132–3.

libraries of individuals and institutions, into the Victorian era.¹⁵ Copies of the three editions, and in particular of the large folio single-volume edition of 1597, were owned by doctors all over Europe, and handed down in their families; Ian Maclean has argued that publication in folio may be about an 'externalization of knowledge', if the book is to be displayed in the workplace, but was also 'a matter of the physical expression of the excellence of the contents'.¹⁶ The folio publication of the 1597 Spach edition could therefore be seen partly as recognition of the worth of the compendium. In its later history, the collection was long regarded as being of far more than antiquarian interest. In 1891 Howard Kelly, Professor of Gynecology and Obstetrics at Johns Hopkins Hospital (1889–99), and subsequently Professor of Gynecology (1899–1919), was still able to write of it:

This book is peculiarly interesting as one of the earliest special works, and as being the largest old collective work ... it contains much of value, much in common with the teaching of today.¹⁷

As I will explore in chapter 1, many surviving copies, particularly of the first two editions, have some level of annotation, as owners interpreted the text, compared the different treatises collected in this compendium, studied the earlier sources from which the writers of the treatises supported their statements, and tried to find in their own countries plants equivalent to those recommended by the texts they read.

In studying this long history, I was struck by two particular owners and users of the compendium, neither of them from a time when I would have expected much interest in either sixteenth-century medicine or the classical, medieval and Arabic treatises that make up the remainder of the *Gynaeciorum libri*. One of these users was the eighteenth-century Scottish man-midwife, William Smellie, responsible for training a generation of men-midwives in London; the other was another Scot, Sir James Young Simpson, Professor of Midwifery in Edinburgh from 1840 and most famous for discovering the anaesthetic properties of chloroform in 1847. Both were also book collectors, whose collections survive at least in part; in the case of Smellie, his library is almost intact. Although both lived in times when ancient medicine remained a part of medical education – even in the nineteenth century, it was normal for medical exams to include the requirement to comment on one of

¹⁵ Ibid., p. 121, comments usefully on the conservatism of those who collected a medical library; their ambition was 'to put together as representative a collection as possible' regardless of their individual specialist interests.

Maclean, 'The Diffusion of Learned Medicine', pp. 106–7.

¹⁷ Howard Kelly, 'Israel Spachius's Gynecology', *Johns Hopkins Hospital Bulletin* 2, 1891, p. 164, cited in I.S. Cutter and H.R. Viets, *A Short History of Midwifery* (Philadelphia and London: 1964), pp. 29–30 n.3.

¹⁸ Smellie's library is held at Lanark in the Lindsay Institute: much of Simpson's collection is in the library of the Royal College of Physicians, Edinburgh. See below, chapter 2.

the aphorisms of Hippocrates – I found it surprising that the compendium was still being read and used. The authority of 'the classics' had begun to wane, being replaced by commitment to observation and to the new values of the scientific method. In an important essay review published in 1996, Irvine Loudon characterized as the most striking features of eighteenth-century medicine 'the surging spirit of enquiry, the faith in personal experience and powers of observation, and the rejection of "ancient authority". ¹⁹

Both Smellie and Simpson went to grammar schools, where they received a classical education. Smellie used Latin translations of Greek medicine, although – as we shall see in chapters 2 and 3 – his competence to do so was questioned by his contemporary, the York man-midwife John Burton. Simpson, a keen antiquarian, often assembled classical authorities to back up his points, but eventually came to challenge the place of the classics in the school curriculum, regarding them not only as being of marginal importance in a scientific education, but also as morally dangerous. The portrait of Simpson by Norman Macbeth, now hanging over the stairs of the Royal College of Physicians of Edinburgh, shows him turning away from reading his 1597 Spach Gynaeciorum libri, which is open at the title page, towards the viewer. On the table is also a clearly labelled bottle of chloroform, while beside the table are an ancient inscription and a Greek vase. The items selected clearly represent his interests, and the grounds on which his reputation was based; for example, in 1856 he had published a piece entitled Notes on Some Ancient Greek Vases for Containing lykion.²⁰ In the portrait, the red letters of 'ISRAEL SPACH' and the year of publication are shown larger than they really are, to make it even more obvious what Simpson has been reading, and thus making the book a clear statement of medical authority. [Plate 1]

The significance of gynaecology

The origin of gynaecology is usually dated to within Simpson's lifetime; for example, Roberta McGrath traced the use of the word to between 1820 and 1850, while Jeanne Peterson and Ornella Moscucci have shown that the institutional expression of the discipline, through specialist hospital departments and subject diplomas, did not occur until the second half of the nineteenth century. In the nineteenth century, the claim that gynaecology was necessary – that women were

¹⁹ Irvine Loudon, 'Essay Review: The Making of Man-midwifery', *Bulletin of the History of Medicine*, 70 (1996), p. 512.

Notes on Some Ancient Greek Vases for Containing lykion: and on the Modern Use of the Same Drug in India (Edinburgh, 1856).

²¹ Roberta McGrath, *Seeing her Sex: Medical Archives and the Female Body* (Manchester and New York: 2002), p. 34; M. Jeanne Peterson, *The Medical Profession in Mid-Victorian London* (Berkeley, CA and London, 1978); Ornella Moscucci, *The Science of Woman: Gynaecology and Gender in England, 1800–1929* (Cambridge, 1990).

sufficiently 'different' to need a medical specialty – could have economic as well as theoretical implications; the treatment of women had become a contested field between surgeons, physicians, and the emerging hybrid of the gynaecologist.²²

But what happened before Simpson's lifetime? Michael Stolberg has traced an earlier use of the word 'gynaecology' in Latin, citing the German physician Johann Peter Lotichius's work, advocating the education of women to the same level as men, entitled Gynaicologia, id est de nobilitate et perfectione sexus feminei (1630).²³ This is a positive work on female difference, arguing not for exclusion but for equality; but gynaecology, in the sense of a separate branch of medicine, usually carried a far more negative charge. I will be arguing here that the intense interest in the diseases of women in the second half of the sixteenth century, stressing the difference of women from men, and noting the implications of this difference for their effective treatment, should make us revisit attempts to place the origin of gynaecology – in anything other than a narrowly institutional sense – as late as the nineteenth century.²⁴ Furthermore, although Simpson's portrait of a nineteenth-century Professor of Midwifery with a sixteenth-century compendium on gynaecology links these two historical periods in which the 'invention' of gynaecology can be situated, neither was the first time in Western medicine that women were considered so different from men as to warrant a separate branch of medicine. That claim was first made in fifth-century Greece, in the texts of the Hippocratic corpus; indeed, sixteenth-century writers on the diseases of women looked to Hippocrates as the man who had finally tied down into categories the shifting body of the female.²⁵ By bringing these ancient texts into the debate, we can consider the explanations proposed for the nineteenth-century 'origin' of gynaecology - economic, social, political - more generally. Of course, the explanation of the emphasis on female difference does not have to be the same in every case, and it is valuable to take the long view while simultaneously looking for what is culturally specific.

The existence of Hippocratic texts exclusively devoted to the female body, and the publication of three editions of a compendium of gynaecological texts in the sixteenth century, should therefore make us think again about the origin of

²² King, *Hippocrates' Woman*, p. 2.

Johann Peter Lotichius, *Gynaicologia, id est de nobilitate et perfectione sexus feminei* (Rinteln, 1630) cited in Michael Stolberg, 'A Woman Down to her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries,' *Isis*, 94 (2003), p. 288. See also Winfried Schleiner, 'Early Modern Controversies About the Onesex Model', *Renaissance Quarterly*, 53 (2000), pp. 189–90.

Stolberg, 'A Woman Down to her Bones', pp. 288–9.

Helen King, 'Hippocratic Gynaecological Therapy in the Sixteenth and Seventeenth Centuries' in Ivan Garofolo et al. (eds), *Aspetti della Terapia nel* Corpus Hippocraticum (Atti del IX^e Colloque hippocratique, Pisa, 25–29 settembre 1996) (Firenze, 1999), pp. 499–515.

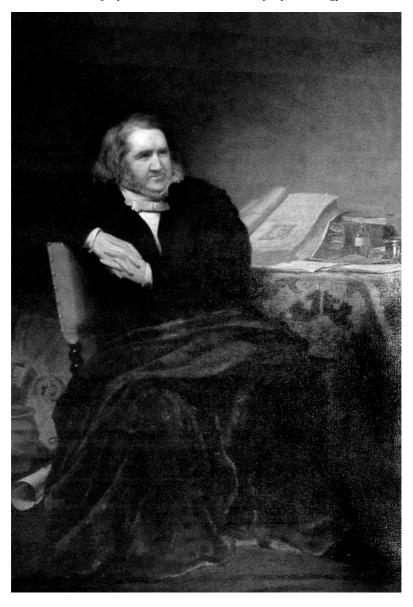


Plate 1 Sir James Young Simpson, by Norman Macbeth. Photograph by Iain Milne. Reproduced with permission of the Royal College of Physicians, Edinurgh.

gynaecology. One of the ways in which the model of female difference was given authority in the sixteenth century was through the selection of appropriate classical passages to cite on the title page of a new work, or to discuss in the preface; two passages, in particular, taken from Hippocratic treatises were used in this context. The first of these was *Places in Man* 47, ²⁶ which stated that 'the womb is the cause of all diseases of women' and was cited, for example, in Caspar Wolf's Harmonia Gynaeciorum of 1566, a question-and-answer work based on several medieval texts that was included in all three editions of the Gynaeciorum libri.²⁷ The same Hippocratic reference was also used as a key reference in Wolf's dedicatory epistle included in both the 1566 and 1586 editions. 28 The second passage used in these claims for greater attention to female difference was the Hippocratic Diseases of Women 1.62, which probably derives from the fifth century BC. It warned that women should not be treated as if they were men, because 'the treatment (iêsis) of the diseases of women differs greatly from that of men'. 29 This statement. suggesting that gynaecology should form a separate area of medicine, and which Paola Manuli memorably described as the founding act of ancient Greek gynaecology, 30 appeared, for example, on the title page of Maurice de la Corde's commentary on the text Diseases of Young Girls, published in 1574, and was discussed at length in 1597 in Israel Spach's preface to the third edition of the Gynaeciorum libri. 31 While the first passage suggests that the medical focus should rest on one organ - the womb - the second is more radical, arguing for a more extensive degree of difference, spreading throughout the female body.

For sixteenth-century medical writers, these two Hippocratic passages suggested that women were particularly difficult to treat, and therefore needed a separate branch of medicine. While *Places in Man* concentrated the difference into one organ, *Diseases of Women* went further by claiming in addition that the diseases of women are difficult to recognize, because they are experienced only by women; these women do not understand what is wrong with them, if they lack experience of 'the diseases coming from menstruation', but 'time and necessity' teach them the cause of their diseases. Spach's preface summarized this passage. Women who fail to understand the origin of their illness call in a healer too late,

Loeb VIII, ed. Paul Potter (Cambridge, MA, and London, 1995), p. 94; Elizabeth Craik (ed.), *Hippocrates*, Places in Man (Oxford, 1998), p. 86.

The text has been translated into Italian: see Gino Fravega, *Harmoniae gyneciorum:* epitome di Gaspare Wolf su Moschione, Cleopatra e Teodoro Prisciano (Genova, 1962).

²⁸ Caspar Wolf 1564 and 1586 Epistolaria dedicatoria: Atque hoc illud est, quod omnium bonorum autor Hippocrates, Laconica brevitate usus: UTEROS MORBORUM IN MULIERIBUS CAUSAM EXISTERE, alicubi commemorat.

²⁹ Ed. Emile Littré (Paris, 1839–61), 8.126.

³⁰ Paola Manuli, 'Donne mascoline, femmine sterili, vergini perpetue. La ginecologia greca tra Ippocrate e Sorano' in Silvia Campese, Paola Manuli and Giulia Sissa, *Madre Materia. Sociologia e Biologia della Donna Greca* (Turin, 1983), p. 154.

Maurice de la Corde, *Hippocratis Coi libellus Peri Partheniôn, hoc est, De iis quae virginibus accidunt* (Paris, 1574); Spach, preface to 1597 *Gynaeciorum libri*.

while those who do understand are reluctant to talk to a healer. The healer must always bear in mind that the cause of women's diseases is different, and therefore the treatment must also be different.³²

Although the concept of 'gynaecology' - a medical approach focused on female difference – was thus invented in the Hippocratic Diseases of Women, there were no 'gynaecologists', as all physicians were supposed to have this knowledge in order to treat their female patients. Nor was belief in women's difference a novel medical idea. Instead, it expressed deep-rooted cultural views on women, as the Greeks regarded them as a late creation, having their origin in the deceptive body of the first woman, Pandora.³³ The Hippocratic corpus is a collection of treatises from different dates, their authors or compilers holding a range of theoretical positions on the nature and treatment of the human body; this variety was probably adaptive, as the Hippocratic healer was 'materially dependent on a public with the broadest possible spectrum of religious and philosophical beliefs, and the less clearly he expressed himself about such matters, the better for him'. 34 Nevertheless, common to many of these treatises was the idea that women are wetter than men, and that this in turn results from the flesh throughout their bodies being of a softer and more spongy texture, absorbing more fluid from their diet.³⁵ Glands 16 explains that women's bodies retain moisture because they are loosetextured (araios), spongy (chaunos) and like wool (eirion).³⁶ In addition, social factors come into play; because women do not take as much exercise as men, they cannot use up any accumulated excess.³⁷ Here the social is natural, because it was believed that women are specifically designed to live sedentary lives at home, while men are made to deal with the 'things outside'. 38 Women's fluid collects in the body and eventually comes out as menstrual blood; the menstrual function is the evidence for, as well as the direct result of, the different texture of flesh throughout the female body. Hippocratic gynaecology, performed by men whose practice also included the diseases of men, therefore covered far more than the organs of generation, because every inch of female flesh was thought to be different to male flesh. This is not 'the same' flesh with different levels of moisture: it is 'different' flesh, which is why it responds to moisture in a different way.

³² DW 1.62, Littré 8.126.

King, Hippocrates' Woman, pp. 23–7.

³⁴ Volker Langholf, *Medical Theories in Hippocrates: Early Texts and the 'Epidemics'* (Berlin and New York, 1990), p. 239.

Diseases of Women 1.1, Littré 8.10–14; Ann Ellis Hanson, 'Fragmentation and the Greek Medical Writers' in Glenn W. Most (ed.), Collecting Fragments (Göttingen, 1996), p. 307.

³⁶ Glands 16, ed. Paul Potter (Cambridge, MA, and London, 1995), Loeb VIII, p. 124.

³⁷ DW 1.1, Littré 8.14.

Ps-Xenophon, *Oikonomikos*, 7.22–23; 'I believe that the god arranged that the work and supervision indoors are a woman's task, and the outdoors are the man's.'

The womb was seen as the collector of menstrual blood accumulated by the spongy texture of female flesh, but it was also believed capable of moving around the body to exert pressure on other organs. In such a situation, in addition to the local problems caused by the incorrect location of the womb, the blood would not be able to leave the woman's body. Although the *Diseases of Women* treatises ascribe many disorders to the movement of the womb, the source of all diseases in women remains the accumulation of menstrual blood in the flesh, in contrast to *Places in Man* 47, where it is the womb itself. But the idea that the womb is the main problem found later support in the philosopher Plato, whose *Timaeus* (91c4) – written in around 360 BC – described the womb as wandering around the body if not impregnated. Tobias Smollett, who assisted William Smellie in editing his midwifery treatises, was still stressing the influence of the womb over the whole female body in 1760; he also sought support from the Anglo-Saxon 'womb-man', regarded as the origin of the word 'woman'.³⁹

It is also important to realize that the position we find in the Hippocratic Diseases of Women treatises was not the only one taken in the ancient world. Galen, writing in the second century AD and the first decades of the third, most famously considered that women and men had the same genital organs, but with women's on the inside and men's on the outside, due to the greater innate heat of the male, which is 'Nature's primary instrument'. 40 This is the classical model best known to cultural historians today, due to its appearance in Thomas Laqueur's Making Sex (1990), which argued for a shift from what he called a 'one-sex' to a 'two-sex' model. Following Galen, Laqueur argued that the dominant model from antiquity into the early modern period stressed not the difference, but the similarity, between male and female bodies. In this one-sex model, there was no such thing as the female body; instead, there was just one body, which if it was cold, weak and passive was female and if it was hot, strong and active was male. The reason why my model differs so radically from that of Laqueur – the strengths and shortcomings of whose work I have discussed in detail elsewhere – is that his model is based so heavily on Galen and, to a lesser extent, on a specific strand of the Hippocratic corpus. 41 He used only the Hippocratic treatises

Tobias Smollett] 'Review of Mrs Nihell, *Answer to the Author of the Critical Review*', p. 39, reproduced in Philip Klukoff, 'Smollett's Defence of Dr. Smellie in *The Critical Review*', *Medical History*, 14 (1970): 33–41. This originally appeared in *Critical Review* 9, pp. 187–97 for March 1760. The *OED* gives the standard etymology of 'woman' as derived from the Old English 'wifmon' (wife-man), which became 'wimman' in Middle English. 'Womman' emerged in the late thirteenth century; as the double 'm' was simplified to a single letter, the preceding vowel was lengthened, although in the sixteenth and seventeenth century both pronunciations existed.

Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (Cambridge, MA, 1990), pp. 25–6; Galen, *Use of Parts*, 2.630, cited Laqueur, p. 28.

Helen King, 'The Mathematics of Sex: One to Two, or Two to One?' *Studies in Medieval and Renaissance History: Sexuality and Culture in Medieval and Renaissance Europe*, 3rd series, 2 (2005): 47–58.