

A few observations on the leprosy of the Middle Ages / by T. Shapter.

Contributors

Shapter, Thomas, 1809 or 1810-1902.
Royal College of Physicians of Edinburgh

Publication/Creation

Exeter : printed (for private circulation) by W. Roberts, 1835.

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To Dr. Craigie
with the author's best & complimentary
regards

A
FEW OBSERVATIONS
ON
THE LEPROSY
OF
THE MIDDLE AGES.

BY
T. SHAPTER, M. D.

PHYSICIAN TO THE EXETER DISPENSARY, LYING-IN CHARITY,
ETC. ETC.

“O! treason of the blood!”
Shakespeare.

EXETER
MAY 10 1835

EXETER:
PRINTED (FOR PRIVATE CIRCULATION) BY W. ROBERTS.

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Few Observations
ON
THE LEPROSY

IN THE MIDDLE AGES

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W. Roberts, Printer, High-Street, Exeter.

R35988

PREFACE. iv

A VERY general opinion prevails, that “the leprosy of the middle ages” is an extinct disease;—with this opinion, however, I have seen sufficient reason to differ.

There are many who not only think that the disease is extinct, but would also assert it to be a mistake to consider the question undecided—recent occurrences contradict them in this—offering an apt parallel to the following anecdote:—Among the subjects which at different times occupied the attention of Cuvier was the organ of voice in singing birds. The introduction of this subject at the Institute was attended by a curious illustration of the propriety of investigating it. Physiologists, Cuvier observed, were not agreed concerning the mechanism of the human voice, which some compared to a wind instrument, and others to a stringed instrument. This observation was not al-

lowed to pass uncontradicted. A celebrated anatomist, who was present, declared that it was a mistake to consider the question undecided, for it was generally agreed that the human voice was a wind instrument. Another anatomist immediately exclaimed that this was quite erroneous, for the organ of voice was a stringed instrument, thus confirming M. Cuvier's first assertion.

Much recently expressed contrariety of opinion on the nature and prevalence of this ancient disease of leprosy, offers apology for the following enquiry; in which I have endeavoured to place the matter in as clear a light as the crude materials relating to this subject would permit.

As the investigation is intimately and interestingly connected with the history of this country, I have deemed the presenting these few pages to my friends would not be unacceptable.

Exeter, March, 1835.

SHORT ACCOUNT
OF
THE LEPROSY,
&c. &c.

THE very curious and frequent mention in the early annals of Europe of the occurrence of the Leprosy, attaches, necessarily, much interest to any enquiry into the history of this disease:—depending not only upon the very remarkable descriptions so abundantly detailed, both of its general character and prevalence, but also from the fact that numerous establishments were specifically instituted for the reception of those afflicted with it. This interest, for the most part, however, must be esteemed to be derived rather from its historical relations than from its adding to the practical knowledge of the disease in the present day. In fact, the idea has been very generally received, and the conclusion almost established, that the leprosy,

of such reputed general prevalence during the period between the tenth and sixteenth centuries, has long been extinct. And this notion has not been a little strengthened by the evidence given before the Commissioners of charities:—grounded upon which they not unfrequently in the course of their report, when speaking of the leper houses,—institutions of great importance in the early times alluded to, both from their number and the extent of their endowments,—lay stress upon the expression that the objects of these charities are most probably no longer to be met with.

In fact, their report states in terms most decided and positive, that *THE LEPROSY, for which these foundations were established, is no longer a scourge upon the inhabitants of this country.**

* The following is one of the many passages to this point: "We cannot ascertain at what time this hospital ceased to be the receptacle for lepers, in consequence of there being no persons of that description to be found. At the present time a preference is given to candidates afflicted with scrofula." *Commissioners' Report on the Magdalen Hospital.*

It has been particularly stated in the above sentence, "THE LEPROSY, *for which these institutions were founded,*" in order that, in the investigation of the subject, there may be no misconception or quibble about a name, as all medical men, we are assured, are fully aware, that a disease termed leprosy, having for its characteristic feature a scaly eruption, is, at the present period, of frequent occurrence.

In pursuing then the enquiry into the history of the disease in the middle ages, the following questions naturally present themselves:—whether are we to consider it as an extinct disease, or as the leprosy of the present day occurring then in the same form and to the same extent as it does now;—or the leprosy of the present day occurring in a more aggravated form;—or whether the term leprosy during these middle centuries was not applied to some other disease?

Though as above stated no practical utility can be derived from the prosecution of this enquiry, yet an interest is derived not only

from the medico-historical discussion involved, but from the frequency and importance of these institutions, rendered in many instances so desirable for the poor, from the richness of their endowments, and from the comforts provided, as even to "make the hoar leprosy adored."

To speak firstly of these institutions. It is very evident, from many charitable records, that the leper, lazar, or, as they are very generally called, St. Mary Magdalen hospitals,* were erected in great number throughout this country. Their history is no less interesting than it is illustrative of the enquiry in question. The point which first prominently presents itself, is, that the general belief that leprosy was imported into this country, or rather into Europe, by the crusaders, returning from the seat of the holy wars, is directly opposed by the fact that lazar houses were erected and largely endowed long before

* These are also in different places termed *misellaria*, *mezelleries*, *ladreries*, *maladreries*, *lazaretti*, &c. and the lepers are occasionally styled *lazari*, *miselli*, *mezeaux*, &c.

the period of these holy expeditions ; and lepers themselves are mentioned, earlier even than the time that Pope Silvester II. planned a crusade, when, at the close of the tenth century, this ornament of his age entreated unavailingly the church universal to succour the church of Jerusalem.

If we were to believe the account of some historians, we might trace the origin of the order of St. Lazarus—an order intimately connected with this disease—to a supposed association of Christians in the first century. As suggested, however, by Mr. Mills, these accounts are no doubt fabulous. Nevertheless, in very early times there is indisputable evidence to the formation of lazarettos ; and in the fourth century, according to the authority of Theodoret,* the lepers confined in them were in a most deplorable condition, for these poor men were interdicted from intercourse, not only with the world in general, but also with their friends.

* Vol. 4, c. 16.

A host of authority, and the public acts of the holy see, abound in early times with mention of them, and with the provisions for their good government.*

In the sixth century, Gregory, of Tours, speaks of the place where these unfortunate persons were accustomed to wash themselves, as well as of a hospital appropriated for them.†

Following the plan of the many leper houses established in Italy, St. Othmar, during the eighth century, erected similar institutions in Germany, as did Nicolas de Corbie in France; and in the following century the persons thus afflicted occupy the attention of the council of Worms, which, by the thirty-first decree, A. D. 868, give lepers the liberty of receiving the sacrament of the body and blood of Christ, but not with those in perfect health.‡ In 750, King Pepin issued ordinances, as did also Charles the Great in 789, by which the associating of

* Muratori.

† Enc's. Rees.

‡ Du Pin's Ecclesiastical History, Vol. 7.

lepers with the healthy was prohibited, and the marriages of such as became leprous were dissolved. Isidore, a Spanish writer of the eighth century, in speaking of the diseases of the skin, particularly alludes to leprous affections; and Constantine, who also wrote before the period of the crusades, enters into a long history of these diseases and their cure.*

From the eleventh century, in which the first crusade took place,† to the sixteenth, the history of each of the principal European nations teems most certainly with mention of this disease, and to which reference will shortly be directed; but sufficient has been shewn to prove, not only the existence, but

* Dict. des Scienc. Med. 'De morborum cognat. et curat. lib. v.'

† It was in this century that the elements of combustion were enkindled, turning the people of the west from intestine discord to foreign war, from dull superstition to furious zeal, not only by the exertions of the Pope, but by the preaching of the enthusiastic, half-maddened fanatic, Peter the Hermit, by the entreaties of Alexius, the councils of Placentia and Clement, on which last, as Mills observes in a note, Malmsbury's observations are highly curious. Vid. p. 57.

somewhat a prevalence of it in Europe before the period when “the thousands and millions of armed saints and sinners ranged themselves to fight the battles of the Lord.”

But though history thus teems with pointed allusions to this disease, yet it is much to be regretted that certain information as regards the disease itself, previous to the fourteenth century, is not to be gathered with equal accuracy to that, with which the public acts enable us to collect the history of the hospitals for the reception of its victims.

After the fourteenth century, the period at which European medical knowledge may be said to have dawned, more certain and accurate observations are, however, within our reach; and to which we shall presently more particularly refer.

Notwithstanding the mistake that has been made by the translators of a passage from Matthew Paris, * whereby the number of

* The passage alluded to is the following—“Habent hospitalarii novem decem millia manneriorum in Christianitate.”

Hist. Angli, ad annum 1244.

these institutions has been much exaggerated, thus giving rise to an error which has crept into the ordinary accounts, it is yet very evident that every European country abounded with its hospitals, which were established for the exclusive relief of lepers; and also that they were of sufficient importance to occupy the attentions of the holy councils. Thus in 1179, Pope Alexander III. in the third general council of Lateran,* grants by the twenty-third article, to such body of lepers,

* “ Cum dicat apostolus ‘habundantiorem honorem membris infirmioribus deferendum,’ e contra quidem quæ sua sunt, non quæ Jesu Christi quærentes, leprosi, qui sanis cohibitare non possunt, vel ad ecclesiam cum aliis convenire, ecclesias vel cimiteria non hermittunt habere, nec proprii juvari ministerio sacerdotes, quod quia procul a Christiana pietate esse dignoscitur, de benignitate apostolica constituimus, ut ubicunque tot simul sub communi vita fuerint congregati, qui ecclesiam cum cimiterio sibi construere, et proprio valeant gaudere presbytero, sine contradictione aliqua permittantur habere. Caveant tamen, ut injuriosi veteribus ecclesiis de jure parochiali nequaquam existant, quod enim eis pro pietate conceditur ad aliorum injuriam nolumus redundare. Statuimus etiam, ut de ortis, et de nutrimentis animalium suorum decimas tribuere non cognantur.

Ex decretis in consilio Lateranensi sub Alexandro Papa ejus nominis tertio, anno MCLXXIX. Canon. XI. De Leprosis.

who are sufficiently numerous for the keeping of a church, a church-yard, and a priest, a licence to that purpose. upon condition that they do no injury to the ancient churches, or to their parochial rights. In 1290, by the fifth of the council of Nogoral, a most extraordinary decree is sanctioned, whereby lepers are exempted from the jurisdiction of secular judges; and, by the same, they are also ordered to wear a distinguishing badge, under forfeiture of five sols; and in 1303, by the seventeenth of the same council, excommunication is denounced against those who should lay a tax upon such lepers as were shut up for their diseases.

To look, however, to the establishments in England in particular.—From the commencement of the eleventh century they became numerous in this country; so much so, indeed, that in the same city, occasionally, accounts of several of these foundations are handed down to us: in Norwich alone there were five,* and in London there were six,

* Hutchinson.

which, considering the then size of that city, was a large number:—that of St. Giles' without Temple Bar is spoken of as being of considerable importance.* It was founded in 1101, by Matilda, queen of Henry I. for the maintenance of lepers, the number of whom was to consist of forty, exclusive of a chaplain, clerk, and messenger; to which were added, in after times, as the hospital revenues increased, several other officers, and also a certain number of matrons or sisters.†

Nichols, in his history of Leicestershire, when addressing himself to this matter, is represented to say, that “the most extensive institution was in Leicestershire, at a place thence called Burton Lazars, it was founded in the reign of King Stephen, (1050) and dedicated to the Virgin and St. Lazarus, and became possessed of immense riches, so that all the other inferior lazar houses in England were, in some measure, subject

* Becket.

† Parton's account of the hospital and parish of St. Giles in the Fields.

to the master of it, as he himself was to the master of the lazars at Jerusalem." He further says that this hospital was supposed to have been built by a general collection throughout England, but chiefly by the assistance of Roger de Mowbray:—Tanner, however, says nothing of the general collection, but, "that Roger de Mowbray, in the time of King Stephen, giving two carucates of land, a house, mill, &c., here, to the lepers of St. Lazarus without the walls of Hierusalem,—laid the foundation of a well-endowed hospital, consisting of a master, and eight sound, as well as several poor leprous brethren, which was the chief of all the spittles or lazar houses in England, but dependent upon the great house at Hierusalem."* The hospital of St. Giles, before alluded to, became annexed to this, and both were dissolved in 1539.

The hospital of St. Julian, at St. Albans, was founded by the Abbot of St. Albans, in the

* Dugdale's Monasticon, vol. vi, p. 632.

reign of Henry I. (A. D. 1112.) It consisted of a master and four other chaplains,* and six poor lepers, who enjoyed the privilege of going into the fields to assist in husbandry. This institution received pilgrims and travellers.†

The number of lepers in each lazaretto or maladrerie in the French dominions, and the means that they enjoyed to their support, were required by Francis I., about the middle of the sixteenth century, to be reported to him. The result of which report satisfied him that their endowments amounted to more than sufficient to their support:—he was therefore induced, after appropriating sufficient to this purpose, to order that the remainder of their revenues should be given to the grand almoner for general use.

A modern writer observes, that although

* According to Tanner, there were generally two or three religious persons attached to these institutions; one to be master, the others chaplains.

† These institutions, which are all of the Augustine order, were first established for travellers on the road, and particularly for afflicted pilgrims, and were therefore built upon the road's side.

similar measures and a like alienation of the property of these institutions had been generally adopted, yet in the seventeenth century the leper houses were still continued ; but that they were greatly abused by the admission of beggars and idle vagrants of all descriptions, who employed every species of trick to imitate leprosy, and to produce appearances of cutaneous disease.

In Dugdale's *Monasticon** we find that the hospital of St. Leonard, at Leicester, was a lazarus house, or hospital for lepers, so dedicated, situated on the north part of the town, founded, as we learn from a passage in Knyghton's history, by William, the youngest son to Robert Blanchmains, Earl of Leicester, who was himself a leper in the time of Richard I. Dugdale further informs us, in his *Baronage*, (vol. i. p. 586.) that William Lord Hastings, sometime before the seventeenth of Edward I, begged this hospital of the king, and gave it to the dean and chapter

* Vol. vi. p. 686.

of our Lady's College at Leicester, as parcel of which it was granted, in the second of Edward, to Robert Catlyn.

The hospital of St. Bartholomew, near Oxford, was founded for two healthful and six infirm or leprous brethren.

The hospital of St. Mary Magdalen, (A. D. 1145,) was founded for a prior and twelve brethren and sisters, nine of whom were to be sound and three leprous.

I shall shortly draw particular attention to the fact, as stated in the foundation deed of these two houses, and in that of Burton Lazars, of the admission of sound persons to these institutions.

John Howard,* from whom one might have anticipated deriving some information, alludes to but one establishment of this nature.—“The only hospital I have seen,” says he, “for lepers, is in the island of Scio, near the city bearing that name. It contained about one hundred and twenty

* Account of Lazarettos, p. 65.

lepers, consisting of men and women, lodged in separate apartments, in a long range of rooms elevated above the ground. The situation is airy and pleasant; and most of the lepers are accommodated with little gardens, which supply them with almonds, potherbs, and delicious figs and grapes. Water has lately been conducted within from the mountains, in streams, one supplying those in health, and the other the lepers."

Bishop Tanner, Dugdale, and others, abound with the most exact and copious information on these institutions, which those who are curious on this matter would be entertained by referring to.

I shall now confine myself to the reports given in by "the Commissioners concerning charities," illustrating the subject, as far as possible, by referring to the records of the Magdalen hospital in this city.

The hospital of St. Mary Magdalen in the liberty of Ripon, in the county of York, originally founded for a chaplain and sisters, and for the relief of all the lepers in Rich-

mondshire consists of a building containing six separate apartments, for a like number of poor women, styled sisters. The members of the institution are the six sisters above mentioned, a master, and a chaplain.

It appears, from an inquisition respecting this hospital, taken in the time of Edward III. that it was founded by Thurston, who was archbishop of York, in the early part of the twelfth century.

By an inquisition taken in Edward the Second's time, before that king's escheator, it appears, as is mentioned in Dugdale's *Monasticon*, (vol. vi. p. 620.) that there ought to be, according to the form of the foundation, two chaplains in the hospital to perform service, but during the whole time of Nicholas de Molyns, then master, the chauntry of one chaplain was withdrawn by him. It also appears, that strangers, mendicant clergy, or other indigent persons, happening to travel that way, ought to have a bed and provision for one night; but it likewise appears, that at the time of this inquisition, none enjoyed that

benefit, but went away "vacuâ manu:"—also, that on St. Mary Magdalen's day, annually, a farthing loaf, (the quarter of wheat being worth five shillings) and a herring, should be given to every poor person that came; but during the time of Nicholas de Molyns that charity was withdrawn, and in place of it, he gave poor people, who came on that day, a salt-seller (salsarium) of beans or meal, but the greater part of the poor got nothing.

It is also mentioned by an inquisition taken in the reign of Edward III. (Dugdale's *Monasticon*, vol. vi. p. 621.) that the hospital was founded for the relief both of the poor and of those afflicted with leprosy.

So late as the year 1674, this building was put into repair by Richard Hooke, D. D.

It may fairly be inferred, as well from the different classes of persons, whether healthy or leprous, admitted to the benefits of the above institution, as from the appointment (as it should seem exclusively of other duty) of two chaplains, that it was rather an establish-

ment of charitable resort and of religious uses for the lepers and the poor, than a house of separation of those so afflicted from the healthy.

The earliest document relating to the St. Margaret's hospital at HONITON, is an indenture bearing date the 19th of April, 1641, and made between John Chard, Gentleman, of Awliscombe, and John Humphrey, Husbandman, of Honiton; "whereby it is witnessed, that the said John Chard, whose ancestors were the founders of the hospital and leprosy house of St. Margaret, in the parish of Honiton, and whose said ancestors, time out of mind, had, and ought to have, the gift, nomination, and appointment, of the governor's place thereof as often as the same should become void, granted to the said John Humphrey, the custody and lawful keeping of the poor and lazar people in the house of St. Margaret, in Honiton aforesaid." &c. &c.

From a copy of a decree of the commissioners of charitable uses, made the 18th of June, 1642, it appears that John Chard, and his father Richard Chard, had misgoverned the

hospital, and had applied the profits of the lands to their own use, wherefore the commissioners ordered that the hospital, and the profits of the lands, should be employed for the habitation, relief, and maintenance, of a governor and four leprous persons, for ever, according to the intention of the first founders; or for poor people instead of leprous persons, in case no such should sue to be admitted thereto.

From the above it appears that in 1642 the commissioners made provision for lepers, but that they evidently regarded this establishment rather in the light of an alms house than a place of separation.

By a will, dated 1712, Elizabeth Strode, of Downsyde, in Somersetshire, gave five pounds annually to such strangers who, being poor and leprous, resorted to Bath for the use of the waters.

We find from the foundation deed (4th October, 1538) of the lazar house near Newton-Bushell, by John Gilberd, of Grenaway, Esq., that it is stated to be "for the releff of

powre lazar people, whereof grete number with that diseas be now infected in that partis, to the grete daunger of infection of moche people to whom they use to resort and be conversant withall, for lacke of convenient hospitals in the county of Devon for them.”*

An establishment for the reception of lepers, under the name of St. Margaret's hospital, existed in the parish of Pilton.—The date of its foundation is not known, but various very ancient grants are in existence of tenements and rents to the “lepers of the hospital of the blessed Margaret at Pilton.” It is mentioned in a deed of settlement before H. Marshall, Bishop of Exeter, in 1197, as then governed by a prior; and in an indenture, 29th of May, 1735, it is stated that the members of this corporation consisted of a friar, brother, and sister.

We see, therefore, from the deeds relating to the above mentioned establishments, that

* Oliver. p. 136.

as late as the beginning, and towards the middle, of the eighteenth century, provision is made for these people; whereas, were we to take the following notice on that of St. Mary Magdalen, at Christ Church, Southampton, only, under our consideration, a different opinion might be formed. There is no certain information regarding its foundation, but, from indenture dated 1646, the place of master is granted to Richard Flurry. In 1699, it is stated, that by the mercy of God, the leprosy, for the use of which the small revenue of the said lazarus house was appropriated, had so far ceased, that there had not been, for many years past, any leper who had resorted to the hospital for relief; the funds were therefore charitably distributed, with a reservation, in case of the application of any lepers.

The history of these establishments may well be concluded by a more detailed mention of the St. Mary Magdalen hospital of this city (Exeter), which the researches of Mr. Oliver render a task of no difficulty.

The documents still extant connected with this charity, together with the liberal extent of foundation, give to its history a considerable degree of importance in the investigation of this subject.

The first document relating to this charity is the act* of Bishop Bartholomew, who filled the episcopal throne of the diocese of Exeter

* "The whole of the document," says Mr. Oliver, "is important; it does honour to the benevolent feelings of the prelate, and throws so much light on the history of the hospital, that we shall submit a faithful copy of it to the consideration of the reader. Izack's report is, as usual garbled and inaccurate."—

"Omnibus fidelibus ad quos præsens carta pervenerit, Bartholomæus Dei gratiâ dictus Episcopus Exon salutem in Domino. Noverit universitas vestra nos assensu dilectorum filiorum nostrorum Capituli Beati Petri Exon concessisse et in perpetuam elemosynam donasse Leprosis Sanctæ Mariæ Magdalene juxta Exon quinque marcas argenti singulis annis de camerâ nostrâ percipiendas in quatuor terminis, duas in Paschâ et unam in festo Sancti Johannis Baptistæ et quartam in festo Sancti Michaelis et quintam in Natali Domini; necnon etiam decimam gabuli nostri de Morceth et commodum quod proveniet de corticibus nemoris nostri de Chedelegâ. Idem vero Capitulum assensu nostro concessit eis in perpetuam elimosinam quatuor decim panes de communâ eorum singulis ebdomadis percipiendas. Hanc autem donationem tam nos quam prædictum Capitulum nostrum divinæ miserationis intuitu eis fecimus, eamque volumus observari quam-

from the years 1161 to 1184; from expressions in which it may be inferred that a

diu subscripto legitimo modo se continerint, vedelicet, ut continentur, et honeste vivant et ut numerum tredecim fratrum non excedant, nec aliquem leprosum cum pretio vel sine pretio recipiant, nisi consilio Episcopi Exon, quicumque pro tempore fuerit, nec civitatem Exon ingrediantur, nec alicubi evagentur, nisi per licentiam illius, qui per Episcopum Custos fuerit eis deputatus. Si autem Episcopatus vacaverit vel Episcopus absens fuerit, quæ prædicta sunt concilio potioris partis capituli disponantur. Si vero dicti leprosi hæc non observaverint, volumus ut præfata elemosina in aliquos bonos elemosinæ usus per dispositionem Episcopi et Capituli et Civium Exon assignetur. Præterea nos et tam dictum Capitulum nostrum, sicut ex assertionem antiquorum et meliorum Civium Exon cognovimus, testificamur antedictos leprosos subscriptas possessiones et redditus rationabiliter fuisse adeptos, easque diu pacifice possedisse; scilicet, terram quandam juxta Capellam Sancti Kerani, de quâ Algarus Papa et hæredes ejus debent eis annuatim reddere X. solidos et unum sextercium cervisiæ; et terram quandam in Cordewaneriâ juxta terram Ricardi filii Andreae, de quâ Radulphus nepos et hæredes ejus debent eis annuatim reddere XX. solidos; et terram quandam contra Capellam Omnium Sanctorum, de quâ Johannes Sellarius et hæredes ejus debent eis annuatim reddere IV. solidos et unum sextercium cervisiæ; et terram quandam quæ quondam fuit Guncel, de quâ Galfridus de Bristoldo et hæredes ejus debent eis annuatim reddere III. solidos, et tres terras extra Portam Orientalem Exon quæ valent eis annuatim II. solidos et X. denarios; et terram quandam versus Portam Occidentalem Exon, de quâ Galfridus de Tunebrigiâ et hæredes ejus debent eis annuatim reddere XVIII. denarios; et terram

society of leprous persons had existed in this place sometime previously, and most probably, as Mr. Oliver very properly observes, anterior to the crusades;—a fact which may be regarded as a point of much interest, as it bears upon the discussion, whether or not, the leprosy of these early times owes

quandam juxta Cimiterium Exon quæ fuit Gwarini Lotingarii, de quâ habent annuatim XII. denarios; et terram quandam non longe a capellâ Sancti Stephani, de quâ Henricus Pistor et hæredes ejus debent eis annuatim reddere XII. denarios. Præter hæc longis retro temporibus habuerunt et adhuc habent singulis ebdomadis quartâ et sextâ feriâ, tolnetum de omni blado quod venditur Exon et tolnetum debet; et insuper quâlibet sextâ feriâ habent tolnetum de omni pane qui venditur Exon et tolnetum debet. Habent etiam in Nundinis Exon tolnetum de omni pane et blado quod tolnetum debet. Ex antiquâ etiam bonorum Civium Exon consuetudine, aliquis de civitate solet eis pro Dei amore singulis ebdomadis tertiâ et quintia feriâ elimosinam per Civitatem colligere. Ne igitur quæ prædicta sunt, tractu temporis in dubium revocentur, nos ea, quæ confirmationem nostram jure desiderant, præsentî scripto et sigillo nostro prædictâ lege confirmamus: reliqua vero, tempore nostro sic fuisse, testificamur. His Testibus, Magistro Roberto, Totton, et Magistro Rogero, Barnest. Archidiaconis: Magistro Roberto de Anc. Roberto de Bukynt: Joele capellano Episcopi: Magistro Petro de Mandavill: Magistro Edwardo de Carswillâ: Magistro Petro Picot, Galfrido de Exon, Ricardo Grim tunc temporis procuratore eorum: Magistro Heliâ Martino, Willelmo de Oteri, et Willelmo Lumbardo, clericis Episcopi."

its origin in Europe to a communication with the East.

The following abstract of this charter will show sufficiently there are grounds for concluding that this society had an origin far more remote, than is generally supposed to have been the case with these institutions in England.

Bishop Bartholomew,* with the consent of the chapter, conceded and gave in perpetuity, as alms, to the lepers of the Holy Mary Magdalen, near Exon, five marks of silver, to be given annually at his palace (de camerâ nostra†) at four separate periods, two at Easter, one at the feast of St. John the Baptist, a fourth at the festival of St. Michael, and the fifth on Christmas-day; and

* The charter itself is without date, but this bishop was head of the See during the years 1161 to 1184.

† Some have translated "camera" by treasury:—but it evidently refers to the bishop's palace in this place, as this is a private alms of the bishop, and not given from the common chapter fund—moreover, "camera" is elsewhere used in this sense.—"Londinum camera regis Angliæ." "Leyda Hollandiæ camera." &c. &c.

also the tenth of the toll of Morceth and the profits that may be derived from the bark of the woods at Chedelega; and the chapter granted, with the bishop's consent, fourteen loaves to be given weekly from the common stock, which gift, we (the bishop) and chapter made to them from a feeling of pity, and desired might be rendered to them as long as they demeaned themselves legitimately, as follows:—that they should live honestly, and that they should *not exceed the number of thirteen* (fratrum) brothers or sisters—that they should receive no other leper with price or without price, unless by consent of the bishop—that they should not enter the city of Exeter, or wander elsewhere, without the permission of that person whom the bishop may have placed over them. If the lepers should not comply with these observances, the alms may be disposed of to other charitable purposes, according as the bishop, chapter, and citizens of Exeter, may deem right. The document goes on to show, on the authority of “old and better” citizens

of Exeter, that this corporation had long existed, and had peaceably enjoyed certain endowments which are specially detailed.

To this charter there is a confirmation by Pope Celestine III. on the 26th of May, 1192, in which he says, “*Quanto vos omnipotens occulte suo judicio morbo incurabilis ægri tudinis* visitavit, tanti sincerius afflictioni vestræ paternâ benignitate compatimur, vestrisque desideriiis effectum celerem impertimur.” From the “Pamphlet of the offices and duties of every particular sworn officer of the city of Exeter, collected by John Vowell, alias Hooker, Gent. chamberlain of the same,” and originally printed in 1584, it is stated as part of the duty of the warden of the Magdalen, that he is “to govern, and to see to be governed, all such lazar people as shall be received for sick persons into the Magdalen house, according to the orders of the said house, and according to the direction of the maior and common council;” and also “that they shall not admit any person or persons to be one of the said hospital, without

the consent of the maior and common council, and that the same be a sick person in the disease of the leprosy.”

The rules of the Magdalen Charity, as extracted from Hooker's manuscript, are not only important in reference to the charity itself, but bear much upon the early feeling that existed of the disease of leprosy, wherefore I shall not scruple to transfer them in full length to these pages.—

“ The Mayor, Bailiffs, and Commonality of the city of Exon, were made patrons and founders of the hospital of the Mawdlin, without the south gate of the city of Exon, by way of a permutation between them and William Brewer, Bishop of Exeter; that is, that the said bishop and his successors should be patrons of the hospital of St. John the Baptist, within the east gate of the city of Exeter, which before did appertain to the mayor and citizens; and the mayor and citizens should be patrons of the hospital of the Mawdleyne, which before appertained to the byshop. Anno 27. Hen. III. Adam Ryfford.

“ The mayor, bailiffs, and twenty-four common council, are to chuse yearly a governor or warden, who, by himself or his sufficient deputy, shall govern and rule the impotent and sick persons within the said hospital, according to the orders and ordinances of the said house, which are as followeth :—

“ First.—That any brother and sister admitted and being one of the company of the said house, shall daily, twice upon every day at least, unless he or she be sick and not able to come to the chappel, and then and there to hear such divine service as shall be said before them, upon pain that every one failing, unless he or she be sick or have some reasonable cause of absence, to fast with bread and water for three days together.

“ Also no brother nor sister shall go or pass out of that house beyond the bryde, without the gate of the said hospital, without the licence of the warden or his deputy, upon pain to be put into the stocks and to have but bread and water for one day.

“ No brother shall enter into the house or lodging of any sister, nor any sister to enter into the house of any sister (brother?) without special licence of the warden or his deputy, upon pain to be punished in the stocks or otherwise, at the discretion of the warden.

“ No brother shall belie his sister, nor sister shall belie any of her brothers, nor yet any of them shall belie the warden or his deputy, upon pain to have but bread and water and to sit in the stocks for three days.

“ If any brother or sister do in any malice or displeasure, in presence of any person, call one the other of them thief, or any evil name, or do revile one the other, shall likewise be in the stocks and fast with bread and water for three days.

“ If any brother or sister do maliciously, slanderously, and in displeasure, revile the master, warden, or his deputy, he shall fast with bread and water and lie in the stocks twelve days.

“ If any brother or sister do in anger,

malice, or displeasure, strike or lay violent hands upon one the other, he shall be punished in the stocks, and have but bread and water for thirty days.

“ If any brother or sister do disclose, utter, or betray any of the secrets of their house, or of the warden or his deputy, and thereof by due proof be convicted, he shall be punished in the stocks, and have but bread and water for twelve days.

“ No brother nor sister shall receive nor lodge into his house any stranger or other person whatsoever, without licence of the warden or his deputy.

“ That no guest being received or lying in the house, shall lie with his wife, nor any wife with her husband within the precinct of the said hospital, in one and the same bed.

“ If any brother or sister do threaten the other of life or limb, shall abide the same pain and punishment as if he smite or hurt him.

“ If any brother or sister do pick or steal from the other, shall be punished as if he

had gone out of the doors beyond the place appointed, and as by the warden shall be thought good. Anno 30. Hen. IV. Martin Roff."

The "permutation" that is spoken of in the first paragraph of this paper of Hooker's, is thus explained in Jenkins'* History of Exeter,—“According to the original charter they continued to collect toll from corn and bread sold in the fairs and markets, and by alms from door to door, on certain days, till the year 1244; when the citizens complaining that their frequent intercourse through the markets and streets was obnoxious to them, and occasioned the spreading of the disease, forbid them the markets, and refused them any relief; which much grieved the then Bishop Brewer, and to prevent any further dispute, an agreement was made between the mayor and citizens on the one part, and the bishop on the other, to exchange their rights of patronage.”

* Jenkins' History, p. 384.

So late as the fifteenth century we find the noble instance of a wealthy and influential citizen* voluntarily submitting himself to a residence in this establishment.

There are many other documents relating to this charity, besides those now alluded to, but as they rather relate to *its means* than to *its objects*, we shall not further quote them, but proceed to direct attention to some few portions of the above passages, from which inferences may be drawn, both as to the nature of the disease in question, and the light in which it was regarded by the people in general. These subjects, however, will be more fully discussed when addressing myself to the history of the disease itself.—but I prefer making the few following observations, as they will not only assist in devel-

* "Richard Oreng, Esq. a gentleman of noble parentage, and mayor of this city in 1454, being infected with the leprosy, notwithstanding his great wealth, submitted himself to a residence in this hospital, where he lived many years and finished his days, and was buried in the chancel of the chapel; his grave, with a mutilated inscription, is still remaining." *Jerkins' History of Exeter*, p. 384.

oping the view that I am inclined to take on the nature and prevalence of the disease, but will also tend to strengthen the remarks subsequently to be entered on.

It is very evident from what has been stated in the preceding pages,—that the leprosy was an established European disease anterior to the period of the crusades; and also, that institutions of refuge for those afflicted by it were numerous provided:—

That the lepers themselves were under the especial care of the church, and particularly subject to the legislation of the Holy See; and to such extent did the exhortations of the pope influence the people to charitable donations towards them, that, in the sixteenth century, we have seen it to be stated they had become a too wealthy and more powerful body, than was deemed right for their condition as the receivers of alms:—

That from their very first foundation these institutions were not established as “separating” houses, or houses of pestilential seclusion, such as are the lazarettos of Italy in

the present day, but that they were solely the charitable resorts of those afflicted with a peculiarly distressing and loathsome disease. This conclusion may fairly be assumed from the circumstance that in the earlier establishments, they received wanderers and pilgrims;—that subsequently, the appointed inmates consisted both of those so afflicted and of sound people; and from the foundation deeds, specifying them to be for the reception of indigent people and pilgrims, and for the relief of the poor and sick of leprosy;—from its being no where mentioned that the sound inmates of these houses became leprous, nor that those wanderers who were the tenants but for a night became, thereupon, firebrands of contagion to the country through which they subsequently passed; and this is further borne out by the fact, that the laws of seclusion against them were not more imperious, than towards those who were the inhabitants of other Augustine institutions, such as Monasteries, &c. In fact, from the bye laws of the Magdalen charity, but just quoted, the

breaking hospital appears but of very minor consideration, as it is visited but with one day's punishment, while other offences are much more severely provided against.

Moreover, the appointing the number of inmates, argues that they were not institutions of separation, for such limitation of the number, and such permanent appointment of the inhabitants, is opposed to the system upon which houses of pestilential resort are founded.

Nor do we find in the foundation deeds themselves of the hospital alluded to, the disease spoken of as other than disgusting to look at, incurable, and rendering those afflicted worthy the alms of the charitable.

From the wording of the charter of Bishop Bartholomew, and from the subsequent ratification of the Pope, I am fully induced to conclude that this institution, in particular, is not to be regarded as a pest house, or as having for its first object the separating from the healthy, those, whom this disease afflicted: but that it is rather to be regarded merely as one of those

kind and beneficent donations of the pious so frequent in these early ages :—that its origin is not owing to the “salus populi suprema lex,” but rather to the religious and superstitious observances of the times :—that as some charitable persons endowed “ten cells” for the reception of aged single women, and as others have endowed houses for the benefit of old widows, so the founders of this charity have endowed it for the benefit of thirteen brothers and sisters, specifying that the being blemished by the leprosy must be the qualification for the enjoyment of its benefits,—and which, I may suggest, proves merely that those borne down by old age or disease are esteemed alike worthy the fostering care of charity.

HISTORY OF THE LEPROSY.

We very early find, in tracing the history of Leprosy through the middle ages, that a different disease is described, by the earlier physicians, under the name of leprosy, to the disease which is thus called in the present day.

The European medical descriptions relating to this subject will, we fear, be found to be confused, crude, and unsatisfactory in the extreme; one fact however is very certain, that a disease is often alluded to, of so severe and disgusting a nature, and of such frequent occurrence, the like of which, if not totally unknown among us, is, at any rate, of such rare happening as to become a matter of almost antiquarian research.

In proof,—Immediately we enter on the discussion of this disease, we find ourselves involved in a sea of doubts, the character of the disease as given by one writer, is directly opposed to the description of another.

Nor is the contrariety of popular feeling towards these afflicted people at different times less worthy of remark.

This "most filthy disease," at one period deemed too disgusting for the sight of man, is at another made the qualification for a holy order of knighthood, and they, who at one time found themselves almost condemned to a perpetual imprisonment, at another found themselves elevated amongst the saints; such was the high privilege of those thus afflicted and returning from the mad exploits of crusadal warfare.

Pious persons of the highest rank deemed it honorable to pay attention to these Holy Sufferers. Priests, archbishops, and kings, are even stated to have performed the nauseous homage of washing, kissing, and licking their foul flesh.* We also find them so wealthy as to be a tempting prey to the rapacity of the sovereigns of their time, and so arrogant, as to have affixed to them the

* King Robert of France, and Louis IX. *Du Gange. Joinville, Hist. de Louis.*

charge of high treason: again, instead of homage and honor, we find their property seized and themselves burnt.*

The early descriptions, then, of the leprosy, lead us to infer, that Europe was the seat of a disease justly acquiring for itself the name of "*lepra horrendissima*;" and well deserving of those vast donations of the pious, dedicated to the maintenance and relief of such as were afflicted by it.†

That the occurrence of this disease is not to be attributed to contagion, resulting from the free communication with the East, during the crusades, is very evident, from the frequent mention of it three centuries prior to that period.

Are we to infer from hence, that a disease of the most alarming, contagious, and loathsome nature then prevailed, and which now no longer occurs; or are we to infer that the description was exaggerated and falsified. To this latter opinion I am inclined to lean.

* Phillip V. especially.

† Life of St. Antoninus, Fourth century.

Let us proceed however to some consideration of the disease itself. Dr. Mead says in his Medical Precepts and Cautions, that, of all the diseases which affect the surface of the body, the most filthy is the leprosy. This is of two kinds, the one is known commonly as the leprosy of the Greeks, the other that of the Arabians.

Another writer* states that "In investigating the History of the disease in the middle ages, we shall probably find it sufficiently clear that the Elephantiasis or Tubercular disease (the lepra of the translators of the Arabians), was the principal form against which the precautionary laws were framed, but that almost all cutaneous diseases were popularly considered as of a leprous nature."

The leprosy of the present day is defined as consisting of "CIRCULAR PATCHES OF SMOOTH LAMINATED SCALES, SURROUNDED BY A REDDISH AND PROMINENT CIRCLE. THE PATCHES OF DIFFERENT SIZES, AND DEPRESSED IN THE CENTRE." This de-

* Rees Cyclop.

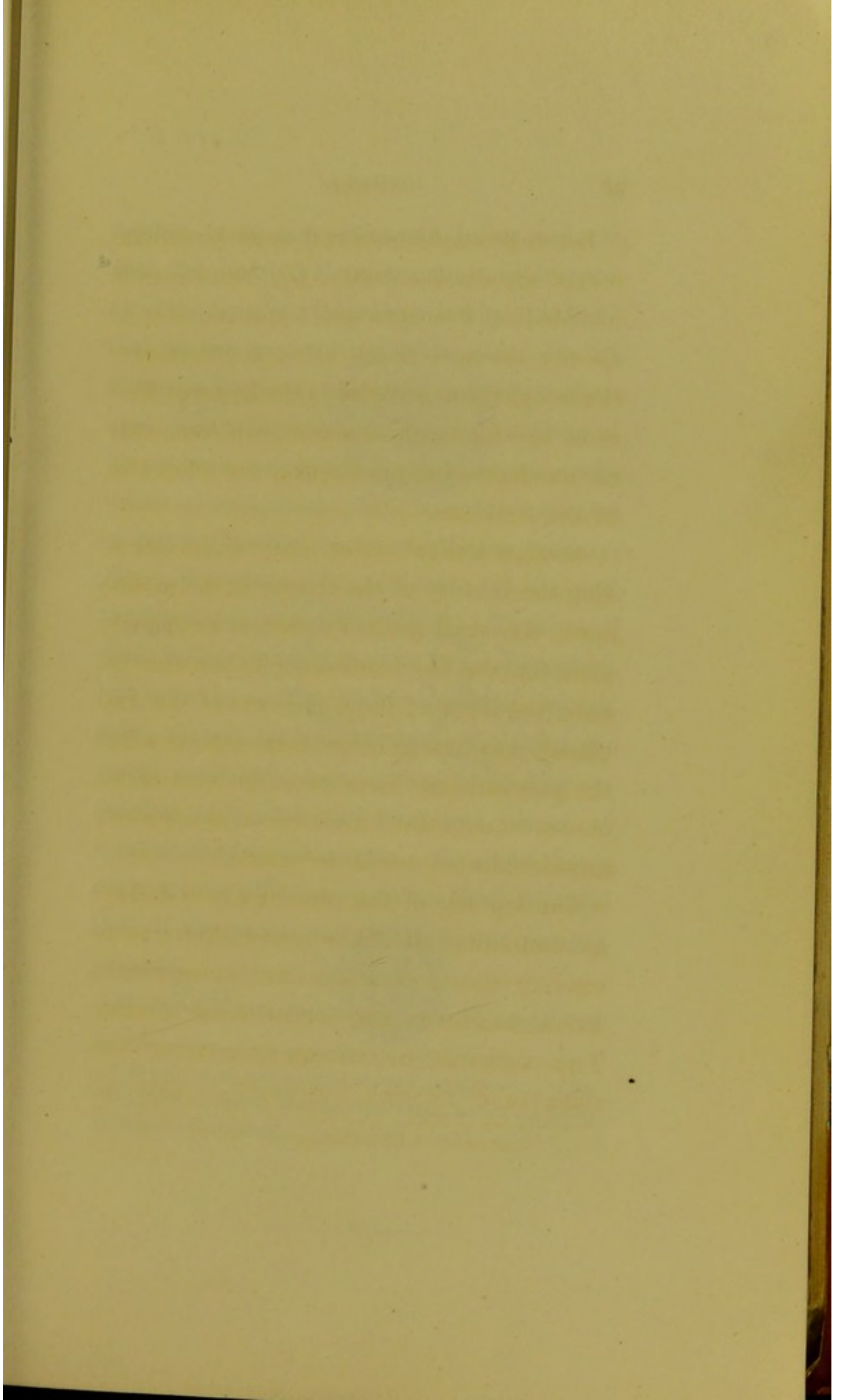


PLATE I.

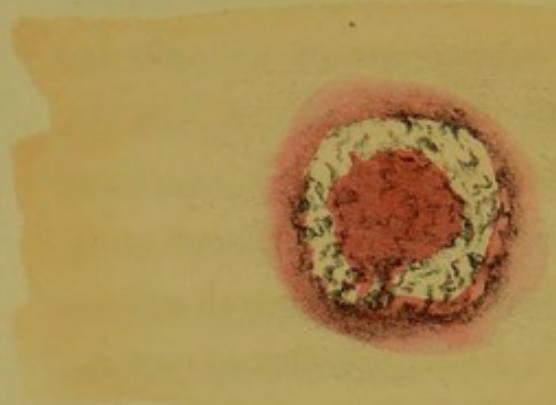


Fig. I.

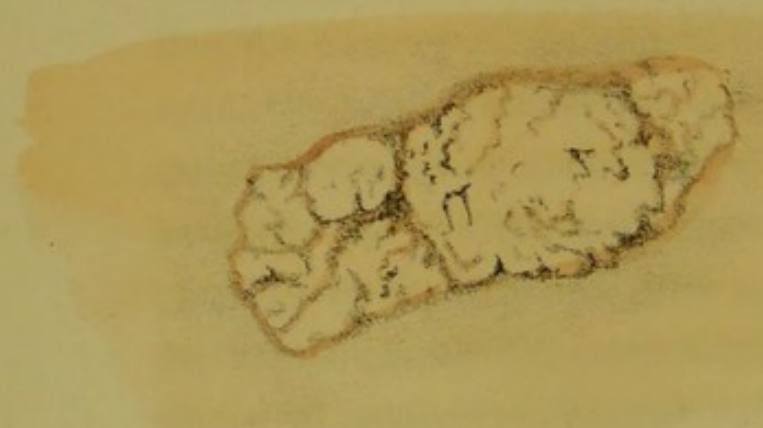


Fig. II.

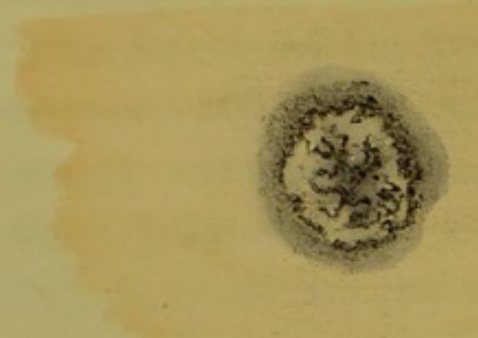


Fig. III.

Lepra.

definition is, in every respect, in accordance with the detailed characteristics of the leprosy of the Greeks; therefore we may conclude, that at this present time, the same disease occurs in England, as did, in the very earliest ages (and still continues to occur) in Greece. To proceed,—according to our modern established classification, there are three species of leprosy* ;—the common (*Lepra vulgaris* fig. 1), the white (*L. Alphoides* fig. 2), and the black (*L. Nigricans* fig. 3). The first of these differs from the second in its extending less over the surface, and in the scaly patches being rather less white; while the third variety, extremely rare, differs in having its patches of a dark and livid hue, which is most marked at the margin. So slight, however, are the differences, that a short description of the genus will suffice to our present purpose.

It commences under the form of small red

* It will be as well to bear in mind the etymology of the word lepra, it being derived from λέπρος, which has for its etymon λέπρος, squama.

points, which, though they be but slightly elevated above the surface of the skin, yet are sufficiently visible. These distinct glossy elevations are covered by extremely fine scales, which quickly fall off;—by little and little, the small red points extend themselves, always maintaining the circular form;—the scales are then renewed, become thickened, and superimposed, especially towards the elevated sides; as the disease encreases, a protuberant areola is formed, covered by scales; the cuticle of the centre of this circle then recovers its healthy character, excepting in some very rare cases in which are isolated plates, which occupy the centre as well as the sides. This orbicular development continues encreasing until it has arrived at the diameter, sometimes of a few inches, and even in some rare cases beyond this, but generally speaking they are of a much less extent;—commonly when the plates have arrived at a size intermediate between a shilling and a crown piece, any further encrease is arrested, the healthy centre becomes depressed, the sides elevated,

and covered by a number of greyish very adherent scales.

The circular form is not always altogether distinct and entire; for often the small elevations become united in their progress, the circumference becomes interlaced, thus giving place to agglomerated and confused masses. This disposition is very common, and even almost constant, in the neighbourhood of the articulations, especially at the elbows and knees.

During the period that this development of the individual circles is thus progressing, a general encrease of the eruption takes place. It extends itself gradually over the stomach, shoulders, back, and chest, sometimes over the scalp and forehead, more rarely on the face and hands.

While the disease continues, the scales constantly fall off, and are as constantly renewed. On the fall of the scale there is exposed a red and slightly inflamed surface; when the eruption is recent, this surface is smooth and glossy, but when the disease is of old stand-

ing, it becomes furrowed and impressed with the mark of the scales.

Though this scaly disease may be developed over any part of the body, yet its more usual seat, at its first commencement, is the articulations of the limbs, generally those of the knees, and then of the elbows, are the first affected, in the former case, the primary patch forms immediately below the patella: within a few weeks several other scaly circles appear along the fore parts of the leg and thigh, encreasing by degrees until they come nearly in contact. Should the disease still encrease, the hips, loins, body, and arms, become similarly affected. In severe cases, the hairy scalp is attacked, and the nails of the hands and feet become thickened and indented longitudinally. In these more inveterate cases the appearances become disgusting,—a torpor of feeling and difficulty of motion becomes established, the constitution is broken down, the eye-sight is impaired, the stomach disordered, feelings of danger and anxiety depress; in fact, the poor sufferer is burdensome to

himself, and presents a disagreeable appearance to those around him:—and to crown the whole, the misfortunes attendant on this history are not to be alleviated by any sanguine hopes of recovery,—for rare indeed is such relief obtained.*

There is one variety of this disease, though frequent in some parts of the world, is fortunately but of very rare occurrence in this country, it is that form which is peculiarly alluded to in the ninth, tenth, and eleventh verses of the thirteenth chapter of Leviticus,—“When the plague of Leprosy is in a man, then he shall be brought unto the priest; and the priest shall see him, and, behold, if the rising be white in the skin, and it have turned the hair white, and there be quick raw flesh, it is an old leprosy in the skin of his flesh;

* In the above description I have purposely avoided too much detail, merely confining myself to such short history as will illustrate the present enquiry. Those anxious to follow out the enquiry can not do better than refer to Dr. Thompson's edition of Bateman, to the article in the *Cyclopædia of Medicine* by Dr. Houghton, and to Biett's "*Abrégé pratique des maladies de la peau.*"

and the priest shall pronounce him unclean, and shall not shut him up; for he is unclean."

This is the leuce of old authors, (*λίπρα λευκή*, vitiligo) and is the variety of all others, which undermines the constitution, taking a hold so strong, as to leave but little hope of the sufferers' ever recovering from its devastating influence; though it have some characters in common with the *L. Vulgaris*, yet the scales are whiter, more horny, and glistening in appearance, as some have described them, to asbestos; it affects the skin deeper, and has one symptom which is very characteristic, for the hair becomes white and like wool. Dr. Mason Good makes this variety a separate species,* and defines it as "having scales on
" an elevated base, which are glossy, white,
" with a deep central depression, encircled
" with a red border; patches encreasing in
" size; hairs on the patches, white or hoary,
" diffused over the body, and contagious." It

* In the "*Medica Sacra*," I preferred the arrangement of Celsus, who also makes this a separate species, as it accorded better with the descriptions of Moses, but I have, in these pages, adhered to the classification of Dr. Bateman.

will be observed, that this eminent physician sums up its characteristics by stating it to be contagious, which is also his opinion of the black variety. Though I thus deem it right to call attention to this point, I shall not here enter into the discussion.

Of a certainty there are varieties of this disease constantly occurring, differing somewhat from those now detailed, but nevertheless, such are the general characteristics of leprosy in the present day,* and such they were before the time of the christian æra; and such are the symptoms which accord with the descriptions of the Greek writers.

Are we, then, immediately to conclude, that the much dreaded leprosy of the middle ages, that the disease of horror, "the loathsome plague of Europe," has been detailed? No!—on the contrary, as the investigation is pursued, we early find that the leprosy we have now delineated, is not that potent malady described and dreaded in earlier times.

* The inmates of the Magdalen Hospital of this city (Exeter), are, for the most part, afflicted with the varieties of the leprosy now described. Vid. Appendix, No. 1.

Of this we are convincingly assured, when it is recollected that the presence of scales forms the generic character of the leprosy, as the etymology of the word sufficiently proves, and which feature, as will presently be shewn in the subsequent part of this enquiry, is not the characteristic mark of that disease, which it is now our object to search out.

The disease, then, to which we shall direct our attention is the Elephantiasis, or as it is unfortunately often termed, the leprosy of the Arabians,* (*Lepra Arabum.*)

By many authors, however, this distinction is not even maintained, thus we have an article in the Medical Observations and Enquiries, entitled, an account of “the leprosy in the Canton of Martigues, in Provence,” &c., &c. which proves to be a description of the Elephantiasis:—as the account is curious, I have added it as an appendix.†

* In contradistinction to the true leprosy, which is termed the leprosy of the Greeks, (*Lepra Græcorum.*)

† Vid. Appendix, No. 2.

So great has been the confusion thus created by this same term, leprosy, being used for the two diseases, that we even find Dr. Frank falling into error, and Dr. Bateman professing himself perfectly embarrassed in his descriptions of them,—an embarrassment which he left to the patient research of Dr. Mason Good to relieve him from. This confusion, originally great, has been “worse confounded” by the translators of the Egyptian and Greek authors;—thus we find Elephantiasis properly so called, styled Elephantia* by the translator of Haly Abbas, in this way confusing the true tubercular disease with the Greek leprosy,—and then by the translators of Avicen, Rases, and Avir-Zoar, the tubercular elephantiasis is called lepra, which, as before pointed out, is a scaly disease, and in no respect tubercular.†

* Which properly refers to the Barbadoes leprosy, or large leg.

† Est lepræ species, Elephantiasisque vocatur
 Quæ cunctis morbis major sic esse videtur,
 Ut major cunctis elephas animanlibus extat.

Having in another place* particularly dwelt upon this confusion, and made the subject as clear as one well might, it shall now be my purpose to give some short account of the Elephantiasis, with which, according to the histories of early authors, the leprosy of the middle ages appears to be identical.

It may be thus defined, "SKIN THICK, LIVID, RUGOSE, TUBERCULATE, TUBERCLES CHIEFLY ON THE FACE (ESPECIALLY FOREHEAD) AND JOINTS, INSENSIBILITY OF FEELING, FALL OF HAIR EXCEPTING FROM THE SCALP, PERSPIRATIONS OFFENSIVE, EYES FIERCE AND STARING, VOICE HOARSE AND NASAL." (vide plate 2.) †

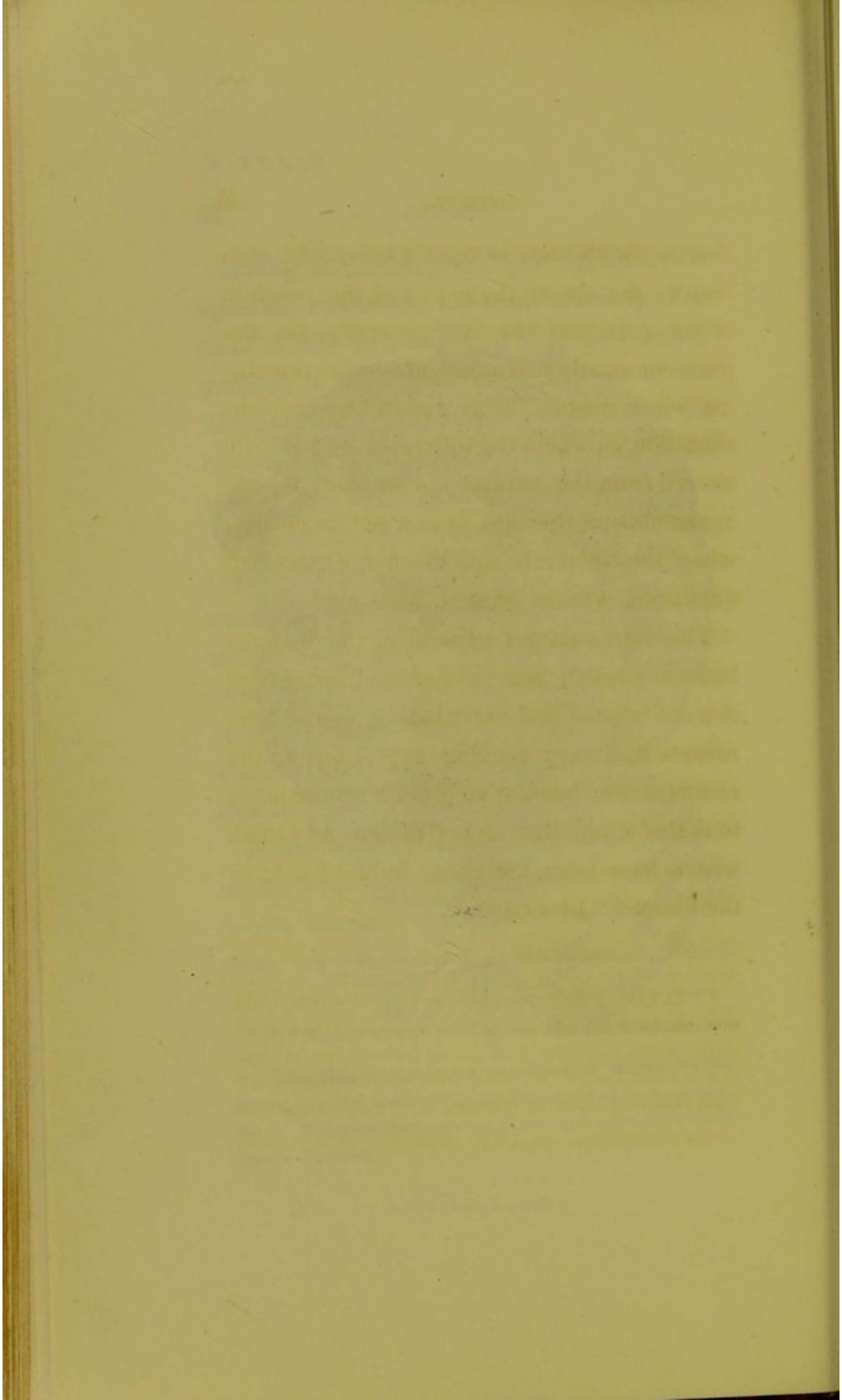
Its commencement is very gradual, occasionally even a few years elapse before the health becomes disordered; the first symptoms are generally a slight eruption, which

* "Medica Sacra," art. Leprosy and Elephantiasis.

† This plate is copied from the edition of Willan, by Dr. Bateman;—the history of the case is added in Appendix, No. 3. This man died some few years since in the Devon and Exeter Hospital.



Elephantiasis.



shortly shows itself to be of a tubercular character; the alæ of the nose and the pendula of the ears, and the face generally, are the parts commonly first attacked:—after remaining some months in an apparently indolent condition, in which the tubercles are but little altered from the natural colour and general appearance of the skin, a new action ensues, when they ulcerate and discharge, in small quantities, a fœtid ichorous humour.

The face enlarges generally, the features become swollen, and the forehead appears as it were inflated and overhanging, giving a ferocious and very peculiar expression to the countenance, bearing so great a resemblance to that of a lion, that some Arabian and Greek writers have been, therefrom, induced to term the disease “Leontiasis.”*

* “Et hæc ægritudo nominatur leonina; et dicitur, quod non nominatur ità, nisi cum plurimum accidit leonibus; et dicitur quum terribilem facit faciem patientis eam, et ponit eam in formâ leonum; et dicitur cum rapaciter tenet, quod capit rapacitate leonis.” *Avicenna.*

“In leonina citrinescit facies.” *Gilbert.*

“Gigna leoninæ manuum fissura pedumque,
Asperitas cutis, macies pruritus et ardor;
Vox est rauca, color citrinus, mobile lumen,
Fit gingivarum corruptio, naris acumen.”

Gadesden.

Others again have termed it “Satyriasis,” from some supposed resemblance to the face of a Satyr.*

Mr. Robinson,† whose account of this disease has often been referred to, says that “it usually commences with patches of the cuticle of the face becoming more florid, and, as Dr. Adams admirably expresses it, ‘appearing as if semitransparent, splendid, and as if the surface were smeared with oil.’ It then gradually becomes thickened in different parts irregularly, giving a bloated and disgusting appearance to the visage.

“The alæ of the nose are usually first attacked, then the integuments of the cheeks, temples, and lips, and lastly the ears, which I have often seen thrice the natural size, nor

* “*Σατυριασμος.*” *Galen.*

† Vide Account of the Elephantiasis as it appears in Hindostan, by James Robinson. *Med. Chir. Transactions*, Vol. x.

have I ever seen a case in which they were not afflicted." To this I shall add one other account,—that of Dr. Kinnis, who saw several cases of it in the Isle of France; Dr. Joy says that it is one of the most accurate descriptions of the disease we possess.

“The face was generally swollen, with large tubercles on the forehead, separated from each other by deep furrows; and smaller and more confluent ones on the cheeks, which occasionally hung down, so as to depress the angles of the mouth; the alæ of the nose were dilated, distorted, and covered with tubercles; the ears thickened, enlarged, and studded with similar substances, and the lips penetrated by hard whitish bodies, which looked somewhat like recent cicatrices. In mulattoes the tubercles were of a bright livid, or copper colour, and in blacks a shade deeper than the surrounding skin. The cuticular lines and folds were every where more distinct and larger than natural. The deeply-wrinkled forehead, the bare swollen eye-brows, the heavy pendulous cheeks, the irregular expan-

ded nose, the depressed mouth, and the thickened elongated ear-lobes, combined to render the whole visage singularly harsh and uncouth."

The hair of the eye-brows falls off, as also that of the beard and surface of the body generally, with the exception of the hair of the capilitium. Dr. Heberden, who gives a very circumstantial history of the disease, says he never saw one affected, who did not retain the hair of the head.

In the more advanced cases, the nostrils become patulous, and affected with ulcers, which involving the cartilages and alæ nasi, occasion the nose to fall. The lips are tumid, the voice is hoarse, which symptom has been observed when no ulcers have appeared in the throat, though this is sometimes the case both with the throat and gums. The nails grow scabrous and rugose, appearing somewhat like the rough bark of a tree; and the distemper advancing, corrodes the parts generally with a dry sordid scab, or gangreneous ulcer, so that the fingers and toes rot, and separate joint after joint.

Such then is the description of the Elephantiasis, and such description certainly agrees with the accounts of the leprosy of the middle ages, as may be gleaned from the writings of those times.

In the acts of the Saints* especially, many allusions are made to this disease; and even so early as the fourth century, in the life of St. Antoninus, it is described; and in the seventh century, Gregory the Great, alluding to the subject, mentions one leper, “quem densis vulneribus morbus Elephantinus defædaverat;” and the leprous knights of St. Lazarus are spoken of as afflicted with foul sores and running wounds—symptoms which may be, indeed are, identical with those of the Elephantiasis, and certainly are not so, with those of Leprosy properly so called, and which has been described a few pages previously, (vide pages 43 and seq.)

Supposing however that hitherto the iden-

* “The Acts of the Saints, compiled by the Bollandists, are replete with examples of this malady throughout Europe, in the middle ages.”

tity of the disease were doubtful, it yet becomes fully established from the records of those physicians, who held the office of examiners of the patients, fit to enjoy the benefits of leper establishments,—they, in fact, state in terms the most conclusive, that their enquiry was directed to the Elephantiasis, or tubercular leprosy.

The mode of examination for admission into the great lazaret establishment at Ulm has been transmitted to us by Gregorius Horst, one specially appointed by the magistrates for that purpose.

He says, “After the preliminary questions relative to the age and family of the person brought before them, they examined him respecting the existence of the disease, his parents and progenitors, his habits of life, and his associates, with a view to the probability of contagion; his peculiar temperament, and previous state of health, and particularly as to the suppression of customary evacuations; and then as to the climate, soil, habitation, and diet, to which he had previously been

accustomed. They then questioned him *seriatim*, as to the state of all the functions, mental and corporeal; and lastly, *denudatis partibus omnibus*, they examined the whole body, with a view to ascertain the presence or absence of the following external symptoms,—First, they inspected the head, to see whether the hair was beginning to fall off, whether that of the beard was becoming softer and thinner; and that of the eye-brows and eye-lashes was disappearing; and whether, when the hairs were pulled up by the roots, a part of the skin was brought away with them; whether the eyes were round and grim, the ears acuminated, the lips thick, the nose tumified externally, the nostrils internally stuffed and ulcerated, the face unequally swelled with tubercles, and of a livid red hue? Whether the veins under the tongue were enlarged with tubercles, as if varicose; whether the skin was unctuous, so that water ran off it, or there were under it tubercles nearly without sensibility, especially behind the ears, and on the extremities? Whether the skin was

rough, like that of an unfeathered goose, resembling the hide of an elephant, or covered with warts, like the *grandines* of swine, or affected with *morphæa*, *impetigo*, or a dry and incurable *scabies*? Whether there were any nodes about the joints? Whether the muscles of the extremities, especially about the thumbs were emaciated? Whether the nails were incurvated? Whether the skin was sensible to the puncture of the surgeon's needle? Whether there were offensive ulcers with a bad habit of body, especially ulcerations and fissures in the fingers and toes? and whether the voice was hoarse and obtuse? They then drew some blood for the purpose of examining it. "These symptoms being present," says the author, "we deem the disease ELEPHANTIASIS, and decree that the patient, inasmuch as he is affected with an incurable and contagious leprosy, is to be separated from all communion with the healthy."

Forrestus, who practised as physician at Delft and Alcmaer in the middle of the sixteenth century, details at great length a

case, in which a certain person applied to him, requesting to know if he were a true leper (*numquid lepra vera afficeretur nec ne.*) He goes on to say, that after informing himself, from a number of authors, (*Avicenna, Gordonius, Gherardus, Viaticus, and Gilbertus,*) of the peculiar symptoms of the disease, he questioned him thereupon. This examination is amply detailed, with the addition of much historical and medical observation.

As, however, it contains much that is similar to what has been above brought under consideration, I shall not add it to these pages, being content to append those portions which are curious of illustration.*

In *Ryder's Fœdera*, the examination of *Johanna Nightingale*, in reference to her being a leper, (during the reign of *Edward* in 1468) is preserved, in which *Leonina* and *Elephantia* are termed species of leprosy, “*docemur equi-*

* *Vid. Appendix, No. 4.*

dem ex scientia medicinali Morbus Lepræ in communi per plurima signa, item, unamquamque ejus morbi speciem quæ quatuor sunt alopecia (videlicet) Tiria, Leonina, et Elefantia.” There is every reason to suppose that the examination of this person was conducted much as those already detailed. The document itself will be found at the conclusion of these pages.*

Assuming that the above direct testimony is sufficient to show that the disease, usually understood, and legislated for, in this country and throughout Europe, under the name of leprosy, is the Elephantiasis,—are we not therefore to infer that the Elephantiasis was of frequent occurrence? It might at first sight appear ridiculous to suppose the contrary, but nevertheless there is that evidence within our reach, which permits us reasonably to conclude that it was not of frequent occurrence, but that the common leprosy of the

* Vid. Appendix, No. 5.

Greeks (to which we first paid attention) and other foul cutaneous* disorders were misjudged for it.—This can only be accounted for by supposing that they termed these diseases “Leprosy,” (of which some truly were,) and then attached to them all the horrors characteristic of the Elephantiasis, which the authors, to whom they referred, called Leprosy, and therefore subjected the lepers of these climates to the discipline of the East.

That this may not be thought improbable, we find independently of the instance quoted a few pages since from the medical observations, that the learned Dr. Hillary, whose observations on the diseases of Barbadoes are so justly esteemed, makes a similar mistake: but the probability becomes more evident, when we reflect upon the unvarying adherence to ancient authority, which characterized the profession, for centuries, after the revival of learning, and when we consider that the

* I have not alluded particularly to these, as it would rather encumber the subject without adding interest to the enquiry.

measles and small-pox, for instance, were deemed the same disease, including also scarlet fever, so late as the time of Diemerbroeck, we shall readily conceive how slow the early physicians would be, in acknowledging a disease differing from the descriptions of the Arabian Physicians, and with what facility they might confound the cutaneous diseases of their country with those of Arabia. In truth, so evident have been the errors in the names of these diseases, that some writers have been induced to suppose, and with whom I am fully prepared to coincide, that the changes, both as to frequency and character of the disease, described as taking place from the close of the fifteenth century downwards, "were rather changes of name than an actual disappearance or diminution of Leprosy" properly so called.

Acknowledging, then, that the disease particularly alluded to, in the early European descriptions, and especially legislated for, was the Elephantiasis, yet there is nothing thereby proved that this lepra of the Arabians

really did frequently exist in this country as a disease of common occurrence.

It appears obvious that our endeavours should be directed to the producing English testimony to the nature of the disease, before we can well form a decided opinion on this subject. Perhaps here it might be said that the founding of the Lazar Institutions, together with the deeds thereunto relating, are, in themselves, sufficient to satisfy the enquirer; but in the former pages of this work I have shewn that the evidence, thus to be derived, does not prove the nature of the disease: and let me here impress upon the mind of the reader of these pages the just observation of one, who, when speaking of the vast donations of the pious to the maintenance and relief of those afflicted with leprosy, says “That these immense charities were at length administered under great abuses, and afford no accurate ground upon which to calculate the extent of the prevalence of the disease.”

Nor does the following passage from the Report of the “Commissioners concerning

Charities" fail to leave a like inference to be drawn. The report says, when speaking of certain alms given to the Magdalen Hospital, payable in respect of lands, that the rent appears to have been withheld in the time of Hooker, (A. D. 1560.) and which, perhaps, may be accounted for by the lands having been originally granted by Robert Suckspitch for superstitious uses.

It is very evident, however, from all that has been stated, that a cutaneous disease prevailed in these times; but the enquiry now resolves itself into the questions:—was the prevailing cutaneous disease of the middle ages the Elephantiasis, or not?

It is to be regretted that direct English medical history is crudely inconclusive and unsatisfactory; therefore, whatever judgment we may form, must be grounded upon general European testimony, and upon such collateral evidence as may be obtained.

It appears certain, as has been before observed, that the early European physicians transcribed their descriptions of these dis-

eases from the works of the Arabians, and it will also appear certain, from the most direct and positive evidence, that the leper houses of Europe were not filled with diseases in accordance with such description. This apparent contradiction is easily explained, when we bear in mind the confusion caused by the early writers attaching the characteristics of the more severe disease of Elephantiasis, to the milder forms of Greek or European leprosy, and such other cutaneous affections, as somewhat resembled it.

It must here be understood, that it is not wished to establish that Elephantiasis *never* did occur in this country, but only that it was a disease not frequently to be met with. Gregorius Horst, and Forrestus, to whom we have previously referred, and whose opinions are especially valuable, speak of it in their day as of very rare occurrence, and that the persons, appointed to the lazar houses, were rarely those who answered to such description as was required by the recorded tests and examinations, and grounded upon the

accounts of the Arabian writers. The former says, that at Ulm, in Bavaria, where he resided, and elsewhere, that most of the inmates of these hospitals were afflicted only by the itch and Greek leprosy, and that but very few instances of Elephantiasis were to be met with: for that such patients as were affected only with a dry and foul scabies, with pustular eruptions, fissures, and branny exfoliations, which constitute the psora of the Greeks, or even with great itching, emaciation, ulceration, and exfoliations of thicker scales, afflicting also the head and face, which are the leprosy of the Greeks, are sent to the lazaretto, provided they be poor, for the means of subsistence.

Van Forrest, after specifying what he believes to have been the causes of the Elephantiasis in Batavia, adds "*plurimi simili elephantiaë malo corripuntur simili inquam,*" that he cannot believe them to have been afflicted by the true Elephantiasis, but that those wandering about and calling themselves lepers, were affected by some cutaneous foulness

or bad scabies, and that, scarcely more than one out of ten of them were truly leprous or afflicted with Elephantiasis; and that this opinion may be confirmed, he adds the testimony of Henricus Vergerius, an illustrious physician of the Hague, who laments with him, that, from the carelessness and ignorance of the physician residing at Haerlem, whose business it was to examine the lepers of Batavia, many were esteemed by him afflicted by Elephantiasis or leprosy, who laboured under the slighter cutaneous diseases, “*vel vitiligine, leucis, alho, vel morphea, aut impetigine, lichene, psora, quæ Græcorum lepra est.*”*

Riedlin, who was physician to the leper house at Augsburg, affirms, that out of fifty-nine cases, he saw but one which was Elephantiasis, and that only in a slight degree, all the rest were instances of the psora and lepra of the Greeks.†

* Forrestus *Observat. Chirurgicarum*, lib. iv. p. 106.

† Vid. Hensler.

And it further appears that in Italy, when the physicians threw off the trammels of ancient authority, and made observations upon diseases for themselves, that they arrived at the conclusion there was no prevalence of Elephantiasis;—thus Beniveni says that it is an almost unknown disease, and that he had seen but one case, occurring in a stranger, and that was of a very mild character; and Benedetti and Joh. de Vego, though accurately describing the leprous diseases with which we are acquainted, do not make mention of the tubercular leprosy.

Having previously proved that the disease, specifically understood in the early ages under the term of leprosy, was the Elephantiasis, surely the above is sufficient to establish that this disease was not of frequent occurrence on the continent of Europe, nor, by analogy, we may assume in Britain; but, that the adjudged lepers, though supposed to have been afflicted in the very early ages with Elephantiasis, were no otherwise afflicted than those “lepers” were, when the Elephantiasis was

discovered not to be an European disease; and we may further assume, that the appointed inmates to the lazar houses were those who "vel vitiligine, leucis, alho, vel morphea, aut impetigine, lichene, psora, quæ Græcorum lepra est, laborabant," notwithstanding the charge of ignorance and inattention against the Haerlem physician.

Beside this almost positive testimony, it is well worthy of remark, that in those parts of the globe where the ancient writers have described the tubercular disease to occur, that, to the present time, in these same places, it exists; nor is it less remarkable, that where the true (Greek) leprosy occurred in former times, so there does it still happen.

Why these diseases do exist exclusively in particular spots, many authors have found reasons, in situation, climate, &c., but these causes it is not my part here to discuss; suffice it to say, that in Arabia, in Egypt, in Siam, in the Isle of France, &c., where the Elephantiasis was formerly described to exist, there it still prevails, and that in Greece, and

Europe generally, where the leprosy (of the Greeks) was formerly described to exist, so does it also now afflict the people, though, doubtless, the individual cases are modified, and milder in their form; which may be accounted for, in the improved state of the country, in the better feeding, clothing, and cleanliness of the people, and in the advance of civilisation.

Much of the horror entertained of the leprosy in this country in former times is to be attributed to the mistakes formerly alluded to, as also to the general alarming notions that were entertained of diseases in general; to the general deficiency of medical skill in alleviating the pains of the sufferers; and to the supposed highly contagious nature of the complaint; to the superstitious ignorance of the times, as well as from the applications of the scriptural code to our slighter disease, and also to the exaggerated histories of the returning Crusaders, filling the ears of greedy listeners with tales of dread.

After the fifteenth century, however, when

the dawn of medical knowledge dispelled many of the previous overwhelming mists of ignorance and superstition, this horror in great part subsided.

As any discussion on the origin, or contagiousness, of leprosy, would only uselessly prolong this paper without, in effect, illustrating the points of the enquiry, I shall not enter upon these subjects here, but satisfy myself by stating the conclusions to which the previous statements tend, viz;—

That, from the ignorance and superstition of the middle ages, and from the European authors of these early times owing their medical knowledge to the writings of the Arabian physicians, and not to their own observations, the common leprosy and cutaneous defædations were invested with the horrors of the Elephantiasis;—

That in former days, in England, the term of leprosy included many cutaneous diseases which are of common occurrence in the present day;—

And, that the objects, filling the leper houses in the middle ages, were such as were afflicted by diseases similar in character to the cutaneous diseases now occurring.

APPENDIX.

APPENDIX

APPENDIX

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No. I.

ABOUT the latter end of November, 1834, I visited the Magdalen Hospital of this city (Exeter), and found the appointed inmates to be as follows :

ELIZABETH PHILLIPS, æt. 55, (appointed nineteen years since.) Is afflicted with an elevated white eruption, occurring in frequent circular patches over the arms, legs, shoulders, and stomach. She has been thus afflicted for the last twenty-five years. Her health generally is bad, attended with occasional sickness and spasms of the stomach ;—certainly incapable of the ordinary occupations of the poor.

JANE WEIR, æt. 32, (appointed three months since.) Has a thick scaly eruption over both arms, back, knees, and face. The character of this young woman's eruption is exceedingly virulent, the flesh occasionally becoming raw. Her health generally is undermined, and her sight is nearly destroyed. She has been a leper for the last twenty years. The condition she is reduced to, from the aggravated form of her disease, totally disables her from work.

SARAH JOSLIN, æt. 59, (appointed eleven years since.) Slight scaly eruption of arms and knees: reports the eruption to be better now than generally is the case: says that it frequently becomes virulent and irritable, leaving the flesh raw. Has been thus afflicted for the last twenty years. Her sight is

much impaired, which, together with the very ill state of her general health, renders her incapable of labour. Reports her sister to have been similarly afflicted.

SARAH SANDERS, æt. 70, (appointed two years since.) Scaly eruptions (Psoriasis) on the bend of arms, neck, thighs, legs, under the breasts, and generally over the body. This eruption is of a very irritable character, and apt to create a rawness of the flesh. She has been thus afflicted for the last seven years. Her sight fails her. General health good.

THIRZA TOUT, æt. 11, (appointed six months since.) The body generally covered with scaly irritable eruption, occurring in circular patches. The eruption in this girl I have seen occasionally to assume a very malignant form. Has been thus afflicted for the past three years, previous to which time her general health was good, which has since much altered for the worse. Sight, very weak, and imperfect.

HENRY DOWNING, æt. 60, (appointed six months since.) Scaly eruption of back, breast, and legs; at present but slight, but reports it generally to be much worse. Has been a leper for the last twenty years. His sight and general health very much impaired. For the last two years has been palsied in both legs. Reports that his health was exceedingly good before he was thus afflicted with the leprous eruption.

N. B. his wife, æt. 57, (now living with him—has been married thirty-three years,) is also afflicted with leprosy, which she states to have first made its appearance about seven years since. None of her own relatives are thus afflicted; thinks she has contracted it from her husband. Her health and sight are very bad. Reports that her daughter is also similarly afflicted.

CAROLINE HADLEY, æt. 14, (appointed six months since.) Scaly eruption of skin. Her ordinary health good, except when the eruptions encrease, which they occasionally do.

N. B. Her Mother (now dead) was also similarly afflicted, and enjoyed, on that account, the benefit of this charity.

SALLY SOUTHARD, æt. 53, (appointed three years since.) A

case of most inveterate and malignant disease, by which the nose and features generally are corroded, together with the left arm, by an irritable and spreading sore; she has been thus afflicted 45 years.

ANN PUNCHARD, æt. 58, (appointed twenty four years since.) Has been for the last seventeen years afflicted with a malignant cancerous affection of the nose, which is thus being gradually destroyed. Her ordinary health is much impaired.

SARAH GAY, æt. 74, (appointed six years since.) Is disabled by a seizure from assisting herself in any of the ordinary occupations of life, as dressing, washing, feeding herself, &c.

ELIZABETH SQUIRE, æt. 75, (appointed twelve years since.) Has been a cripple for the last twenty years, incapable of labour, from having been injured by a waggon. Her general health is good.

N. B. Since the date of the above report, another female afflicted by a general leprous condition of the skin, has been appointed to this charity.

No. II.

An account of the Leprosy, in the Canton of Martigues in Provence, extracted from a French letter to Dr. Clephane, from Dr. Joannis, a Physician at Aix, Dated October 15th, 1755.

In a town called le Martigues, situated on the coast of Provence, betwixt the sea and the lake Barra, there is an hospital called St. Lazare, which has been established time immemorial. Nothing is found in the archives of that town relating to its origin. In this hospital are shut up all such persons as are attacked with the Leprosy, of which the following is an exact account.

It has been a constant observation that all those who have the leaven of this disease in the mass of blood, begin to perceive a swelling in the calves of their legs, reaching as far as the *tendo achillis*, when the disease, from any external cause whatsoever, is disposed to shew itself. Soon after which these parts become insensible, and the swelling more considerable; but the fingers, tho' applied with force, leave no marks, as in the common *œdema*.

This swelling, inflation or tumour increases insensibly, and extends itself through the whole leg from the toes to the knee. The veins are enlarged and become varicose; the skin appears covered with thick scales, which render it hard and unequal; and at length, when the legs have acquired a considerable bulk, there come on, above these scales, knobs or schirrous tubercles, about the bigness of nuts, the skin preserv'ng still its natural colour.

It is not long before all these symptoms appear on the face where the skin grows thick, and forms large wrinkles full of the like schirrous tubercles, which make these poor wretches look frightful. Neither the arms nor hands are always exempt

from the terrible effects of this malady. Also, the skin gradually grows thicker, and tumors appear on it principally about the joints.

These people continue in this condition sometimes for years, without suffering much, and discharging very well all their functions: but after this first stage of the disease, their voice grows hoarse, and an ulcer is always perceived in the throat, which sometimes eats away the palate, and ravages the inward parts of the nose. Their breath is insupportable, their gums quite ulcered, their teeth carious, and the whole countenance of a livid hue. The schirrous tumors above mentioned, after having acquired their utmost degree of extension, crack and degenerate into ulcers, which furnish a very ill conditioned pus, of an ash colour, serous and very fœtid; the surgeons, who have the care of dressing them, have assured me, that they have sometimes found worms in them; perhaps this might happen because they were too seldom dressed. The bones beneath the ulcers were carious, and large scales were taken from them. Some of these wretches have at length lost their fingers and toes by the *pus*, which insinuated itself among the joints, and, corroding the ligaments, obliged the *phalanges* to separate: but there have happened very few such cases. They are seized with a fever, and then from the suppuration of the tumors, the smell of their perspiration and sweats is intolerable. They insensibly fall into a *marasmus*, and at length, after about three or four years of suffering, they quit a life, the continuance of which is no ways desirable.

This may suffice for the general history of this distemper, which passes from the parents to the children and grand children, and, in the fourth generation, seems to be wearing out. There then remain only a stinking breath, carious teeth, swelled gums, and a livid countenance. At the same time there are some who have none of these symptoms, but seem to enjoy perfect health.

The lepers of those parts are very susceptible to the injuries

of the weather, but they bear the cold better than heat, for they dare not approach the fire in winter, on account of the violent itching it occasions in the diseased parts.

It is rarely seen that the husband communicates the disease to his wife born of healthy parents, tho' she may bring into the world children that in time die of the leprosy. We even find persons attacked by this disease, tho' born of parents who appeared to enjoy perfect health, and owed their death to a quite different cause.

Our lepers have a great propensity to venery, even more than before the disease appeared upon them.

The inhabitants of le Martigues think that a fright is one of the causes that produce the leprosy, which they prove from such examples as I am about to relate. For my part, I believe this may be a means of bringing the disease forth, when the seeds of it are already in the constitution, but cannot be the original cause of it. To this cause they join another, derived from the practice of eating fish immediately upon its being taken out of the sea, after boiling it for a very short time in the salt water. They even soak bread in this water in which their fish has been boiled, eating it with much pleasure, and like it better than the fish itself.

As I do not intend to meddle with the causes which produce this disease in general, nor to examine what it is that infects the mass of blood, I shall not enlarge on that head: but shall content myself with pointing out the remedies which have been employed to assuage it; no body having hitherto entertained any hopes of a radical cure. In this the moderns have not been more successful than the antients: touched with compassion at the sight of such miserable objects, they have been induced to try if they could moderate the violence of this cruel malady; for which purpose they have had recourse to sweetners, diluents, attenuants, sudorifics, antiscorbutics, mercurials, sulphur both internally and externally, viper broths and whey, sometimes joined with sudorifics, and sometimes with antiscorbutics,

but all these remedies have had but little or no effect. At present they content themselves with prescribing a mild and moist diet, and leave them to wait the last moment, which is to free them from their sufferings.

Such were the remedies formerly used at le Martigues, and which are still sometimes employed to encounter this disease; those who are attacked by it, live a longer or a shorter time, according to the force of their constitutions. I will now relate you some cases which may serve to confirm and illustrate what I have already advanced.

A sailor of about 30 years of age, that he might be exempt from serving the king, told the commissary of the navy, that he had the misfortune of being attacked by the leprosy. The physician, on examining him, found no symptom of the disease, but the total loss of sensation in his legs and feet. They pricked and pinched violently his legs, and pulled off the hairs, which grew there in great plenty, without his shewing the least sensibility. He was declared a leper from these proofs alone. Six months after, his legs and his feet swelled; at length came on many tubercles or schirrous tumors, which sometime after appeared on the face, the arms, the hands, and the fingers; ulcerations of the gums soon followed, with a stinking breath and a hoarse voice. At length cracks appeared in the tumors, in which ulcers were formed with a large suppuration, and the patient became consumptive and died. During the course of the disease, he complained of a difficulty of breathing, occasioned by the bloody plugs which stopped up his nostrils, and he was very much relieved when his wife pulled them out. Six months before his death, he felt a heavy pain at the crown of his head, and weight in the epigastric region, which fatigued him very much. Twenty four hours before he drew his last breath, he obliged his wife to lie with him, and had knowledge of her more than once, in spite of all the representations she could make to the contrary. She acknowledged that her husband was more disposed to confer his favours since his illness

than before. The health of both this woman and her daughters is such, that they have no manner of complaint. She ascribes the cause of her husband's disease to a fright occasioned by a storm during the time of his fishing on the Lake of Barra. It was with difficulty that he got home, the repeated flashes of lightning enabled him to find his way thither. On his arrival, it was a matter of fresh concern to him to find that his brother was not returned, who had been a fishing with him, but in another boat. He fancied, that not being able to weather the storm, he had been drowned; the thoughts whereof drove him to despair, and he remained a long time in this situation, as it was very late before his brother arrived. His wife observed the concern he was in, and had him bled the next morning: his blood had a buff size, with a greenish *serum*. It has even been remarked, that all the blood, that is drawn from lepers in this country, is of the same nature. A little time after this, the symptoms appeared: but his wife imagined he had feigned them to avoid being forced into the king's service; because none of the family had ever been attacked by this disease.

There is a woman at Martigues, who has some symptoms of the leprosy, but which do not yet show themselves upon her face. Tho' her brother and sister are dead of this disease in the hospital of St. Lazare; yet I was assured that their father and mother, and even their grandfathers, had never had it; or lay under any suspicion of that kind: and that what occasioned it in their children, was, that their father being much addicted to drink wine immoderately, and being of a violent temper, and not master of his passions, had pursued them, with a gun in his hand, to the top of the house; where they had taken refuge, being in fear of their lives; and that this fright, and their continual apprehensions, had been the cause of their becoming leprous.

We have here two instances which seem to prove that terror is capable of producing the leprosy; but, as I said before, I cannot be of this opinion: tho' I think it may make the disease

shew itself, yet it can never produce it: for if that was the case, it would be common in all other countries.

The leprous infection is of a different nature from that of the pox. It is not so easily communicated; nor will it yield to the same remedies. On the contrary, its virulence is increased by them, they make it break out with more violence. This has been particularly experienced when, after due preparations, mercurial frictions have been used." *Med. Obs. and Enq. Vol. I. 1757.*

No. III.

Charles Uncle, aged 14, of a dark complexion, with brown hair and dark iris, was admitted into St. Bartholomew's Hospital on the 1st of April, 1814. From himself and his grandmother I learned the following circumstances of his history. His father and the whole of his father's family were English: his mother was born in America, of English parents. They married in England very young, went to settle in America, and had three children born in Augusta, in the United States. The eldest boy and a girl were sent to England young; neither of them ever had any cutaneous complaint. The boy is now alive and in good health; the girl died at the age of sixteen, of consumption after measles. Charles, the youngest child, having lost his father, was removed in early infancy to New Providence in the Bahama Islands, where he lived till the year 1813. He was obliged by his father-in-law to work hard in the open air, exposed to the weather and particularly to the heat of the sun, receiving a sufficient quantity of food, which he described as being of a coarse kind, the same that was given to the negroes. Among the latter, or among the white inhabitants of New Providence (which is a sea-port) he never remembers having seen any complaint like his own. In the autumn of 1813 he left New Providence, in perfect health, for England. Being obliged to work in the ship during his passage, he became on one occasion extremely wet, and took a violent cold. He felt himself ill and very drowsy, but his appetite did not fail. In a short time his head and face swelled prodigiously: this swelling gradually subsided, he felt himself better, and tubercles of the skin began to appear in the ears and face; a stiffness of the limbs came on at the same time, and has continued ever since. He arrived in England in the autumn of

1813. The disease, which began in the head, had appeared in various parts of the upper and lower limbs by the month of April, 1814, when he was received into St. Bartholomew's Hospital; but the trunk has always been completely free.

The disease has every where begun with flattened tubercular elevations of the skin, not larger than half a small pea at first, but increasing afterwards, in some parts to a much more considerable size. Their colour and consistence hardly differed at their first production, from those of the sound skin; but they soon became red, and acquired in some instances a deep tint of that colour, with a rather livid cast. In some parts they remained in this state: in others an abundance of white and small scales was formed. Some of the tubercles cracked and ulcerated; but the ulcerations were not in general deep or extensive; they furnished a matter which concreted into hard crusts, and caused the dressings to stick very firmly.

The progress of the complaint was not attended with pain, except from these fissures and ulcerations.

At the time of his admission into the hospital, this boy's ears, forehead, eyebrows, and eyelids, and indeed the whole face, were completely occupied by the disease. (*) The ears and other features were greatly deformed: the former exhibited some of the largest and reddest tubercles, and had suffered the greatest alteration of figure. The nose was flattened and expanded laterally; the lips and cheeks swollen; the hair of the eyebrows dropped off; but although the eyelids were tuberculated, even on their edges, the cilia have not been lost. The hairy scalp was never affected, nor has its hair fallen off. The membrane of the palate and the velum palati were tuberculated, but never, I believe, ulcerated; nor was swallowing impeded. There was no reason to suppose that the bones or membranous lining of the nose participated in the disease. The voice was rather rough and hoarse. The fingers, hands, and wrists, par-

* Vide plate 2. page 52.

ticularly the backs of them, were occupied by numerous tubercles, which reached for a short distance on the fore-arms. A small crop occupied the anterior convexity of the shoulder on each side. The toes and feet were swelled altogether; the under surface red and tubercular. The back of the foot and ankle were affected, and a few scattered tubercles appeared on the thighs.

Whether there was any unnatural fulness in the upper and anterior part of the thigh might be doubted; but certainly there was no decided swelling in the situation of the "femoral tumour," described by Dr. Adams, in the cases of Elephantiasis, observed by him on the island of Madeira. The boy was not aware that any change had occurred in this part, or that it was at all enlarged: and at present there is not the slightest appearance of any swelling. An inguinal gland on each side was rather more distinct than usual.

The condition of the generative organs corresponded with the description of Dr. Adams just alluded to. Not only had their development been arrested from the time when the disease broke out, but they had actually undergone diminution and decay. The scrotum was shrivelled and seemed empty: the testes could with difficulty be felt; they were soft and about the size of small horse beans.

His general health was hardly affected, the appetite being good, the tongue clean, the functions of the bowels regularly performed; and he slept well.

During the first part of his residence in the hospital the disease advanced. New tubercles appeared on the ears, face, and hands; the two former parts became greatly swollen, and occupied by painful ulcerations. The incrustations of the discharge occasioned difficulty and pain in the motions of speaking and eating. The ulcerations in the face were never deep: they healed in one part and broke out in another. A few deeper ulcers formed at one time on the wrist; they appeared as if a piece of the skin had been dug out, leaving a smooth red surface.

Of local applications, mild ointments and emolient poultices were the most beneficial, particularly when there was any irritation or inflammation. By loosening the crusts, and softening the parts, they gave ease.

Various internal means were employed, as mercury, antimony, and arsenic. They disturbed his health, which seemed to aggravate the complaint: this was particularly the case with arsenic. When he left it off, and took sulphuric and nitric acids, he was evidently relieved. Medicines were so obviously inefficacious, to say the least, that attempts at cure by means of the *Materia Medica* were not continued; and there is no ground for ascribing the modification which the complaint afterwards underwent to its agency. He took acids and tonics for some time, and such occasional remedies as circumstances required. He was allowed a full diet of meat, porter, and wine.

He had a very well marked attack of shingles, (*herpes zoster*) accompanied by the usual feverish symptoms, which confined him to bed for a few days. The vesicles extended from the *linea alba* to the spine, on one side of the abdomen, and were numerous and confluent. He also went through the measles, which he contracted from a patient in the same ward; the disorder was mild.

The Elephantiasis having been for some time stationary, began to decline about the end of December; the ulcerations healed, all the tubercles lessened, and at last disappeared, and the patient was discharged from the hospital on the 2nd of February, 1815. There was at this time no trace of tubercles in the face; but it presented cicatrices, the remains of the ulcerations. The skin had become smooth and soft, excepting so far as its surface was irregular from the scars, and had recovered its natural colour. The features are of course permanently deformed, the lips in particular contracted and turned in, so as to narrow the opening of the mouth; and the cuticle continues

to separate from them in dry flakes. Vestiges of the tubercles are visible on the palate and throat, but the uvula is entire. The ears are still thickened and swollen, though much reduced from their former size. The tubercles have disappeared from the extremities, leaving however some cicatrices and roughness of the skin. The toes and soles of the feet are still unnaturally red and swollen, and the legs are altogether tumid, and œdematous towards the lower parts; some indurations are felt in them under the skin.

When this amendment has proceeded on the outside, there is reason to fear that some internal organs have become affected. As the tubercles have disappeared, a cough has arisen, which is now troublesome.

The boy is short breasted and weak, and his pulse is from 110 to 120. He is also much emaciated. The generative organs continue in the state described.

February 15, 1834.

Charles Uncle went from St. Bartholomew's Hospital to Brompton, where I saw him, after a short interval, labouring under the symptoms of pulmonary affection already mentioned to a considerable degree, and indulging freely in the use of porter, meat, &c. with the view of restoring his strength. I recommended a change of diet, and that he should immediately go into Devonshire, where some of his relations resided. The following is part of a letter from him, dated the 9th of May. "My bodily health is much improved with respect to strength and eye-sight; but I have within a week broken out in three or four places about my face, which I think is merely change of climate. It does not bear the same appearance with the old complaint, as it looks raw when the scabs fall off. I am, according to your advice, placed at a farm-house, where I am comfortable. I amuse myself with shooting, and fishing, and reading." By a letter from his mother, of the 22nd of

June, I understand that his face continued very bad at that time, and I was informed at the end of August that it was still broken out, although his health and strength were considerably mended. His brother died of consumption about this time.' *Lawrence in the Med. Chir. Trans. Vol. VI.*

N. B. This boy subsequently died in the Devon and Exeter Hospital.

No. IV.

De elephantiasi et lepra Arabum.

Cum in Gallia adhuc praxin exerceremus, vir quidam ad me et chirurgum quendam in ciuitate Pithueriensi experiendi causa accessit, vt à nobis sciret, numquid lepra vera afficeretur nec ne. Imprimis colligentes signa tam ex principe Auicenna, Gordonio, Gherardo, Viatico, quam Gilberto, iuxta ordinem satis facilem, hoc modo processimus: *Primo* dando verba consolatoria: *denide* auxilio Domini Altissimi inuocato spem ægrotanti adiecimus *quod ista ægritudo procul dubio futura esset ad salutem animæ: et ideo de ea re non dubitaret, et propterea nobis veritatem diceret de omnibus, quæ eundem interrogaremus: nam esto quod leprosus reperiretur, id sine controuersia, in animæ salutem sempiternam accessurum; modo id sibi à manu Domini contigisse sine vlla querela aut murmuratione fateretur: nam quantumuis exosi sint leprosi à mundo, à Deo tamen minime, vt certo constat de Lazaro, quem plus cæteris dilexit Deus (ita vt Christi ipsius historia habet) qui eum in sinu Abrahamæ excepit: Diuitem vero, qui Lazarum spreuerat, ad tartara demiserit.* Deinde proposuimus eidem vt nobis iuraret dicere veritatem de interrogandis. Postea interrogare cœpimus de iis, quæ hominem ad elephantiasim seu lepram disponere possunt, *numquid parentes leprosos habuisset, aut num cum leprosis vnquam conuersatus fuisset, vel etiam aliquando hæmorrhoides habuerit, quæ nunc forte restrictæ sint: vtrum vsus esset cibus melancholicis, iam quoque quales ægritudines in vita aliquando passus esset; num quartanam habuisset, aut variolas, vel morbillos passus esset. Aut si in hepate vel splene debilitatem vel caliditatem pati solitus fuerit, vel somnia grauia, ponderosa, prementia, terrentia, melancholica, subtristia, qualia sunt busones videre, serpentes, incubum pati. Vel si sentiat acui-*

tatem, ardorem, punctarum in carne, ut ex verticis aut spinis fieri assolet. Hæc enim signa mala sunt. Cum enim elephantia seu elephantiasis Græcorum seu Arabum lepra, de qua nunc agimus, sit morbus venenatus, in terrena substantia totius corporis naturam (*ut recte annotavit Fernellius doctissimus*) immutat. Quum enim terrenus ac melancholicus humor venenatam qualitatem asciverit, eam mox tum visceribus, tum partibus omnibus impartitur, quæ de inquinata, terrenum quendam ac melancholicum succum vel ex purissimis alimentis gignunt eiusdem veneni participem: quo partes imbutæ ac nutritæ paulatim ac longo tempore similem nanciscuntur naturam, sitque in eis elephantia totius substantiæ morbus. Neque vero huic morbus (*quod plerisque visum est*) cutem solam aut corporis summa, sed et intima quæque, ossaque ipsa inuadit et obtulit, quod omnia impuro fruatur succo. Quamquam autem ipsa morbi qualitas, ad totum corpus pertineat, præcipua tamen vis in iecore atque liene residet, quæ sua dein vitia corpori toti impartunt. Ideo et de moribus hepatis ac lienis inquirendum. *Præterea* elephantiam alij ab ortu, alij contagione, alij sponte proprioque vitio contrahunt. Ab ortu qui ex elephantico parentum semine procreati sunt: atqui si parentum alter quum genuit elephanticus erat, fœtus quoque nascetur elephanticus: tanta est diuinæ illius procreaticis facultatis energia, ut in semine intemperato ac prorsus impuro consistens corporis partes fingat vel ex impura materia. Si nondum elephantia parens, quum genuit, tenebatur, sed in eam duntaxat erat propensus filius eadem ætate qua parens elephanticus euadet. Quorundam etiam literis proditum est, *mulierem quæ instantibus aut profluentibus mensibus conceperit, fœtum edere in elephantiam procliuem.* Ideo recte in Lege prohibitum erat, *ne quis cum menstrosa muliere concurberet.* Contagione vero siue concubitu, siue accubitu, siue assidua vitæ consuetudine, lues hæc hominem adoritur, quod ex elephantico perniciose qualitas pariter cum humore transferatur in aliud corpus, sensimque irrepit in omnes partes. Proprio corporis vitio inducitur, cum bilis atra plurimum

exsuperat, quæ sensim, ac tempore venenata labe inficitur. Nam veneni species in nobis gigni potest, vt de peste alias demonstrauiamus. Exsuperat autem, quum vel sanguis, vel melancholia, vel bilis flaua supra modum torretur. Quocirca eos adoriri solet, quibus vel *menses suppressi*, vel *varices*, vel *diuturnæ hæmorrhoides curatæ sunt*: et eos qui *bubula*, *ceruina*, *asininaue carne vescuntur*, *cæterisque cibis glutinosis atq; crassis*: eos denique, quibus vel *iecoris ardor*, vel *victus calidior* bilem flauam cumulauit, quæ diu cohibita degenerauit in atram. Quæ mala quum non nisi florentes aut etiam prouectionis sint ætatis, elephantia, nec pueros, nec adolescentes sponte inuadet. Cæterum vt redeamus eo vnde digressi sumus: postea ad vrinam eius deueni: *numquid ipsa liuida, an alba, subtilis, pilosa, an trumbosa et cinerosa esset*. Dicit tamen ipse Fernelius, quod quæ ex vrinis aut ex sanguine tradi notæ solent, incertæ omnino sunt atque fallaces. Postea ad pulsum deuenimus; *numquid is debilis, occultus, et paruus esset*. Postea diligenter totum corpus inspeximus; atque id acu pungi iussimus per chirurgum, vt experiremur, *numquid sentiret*, cute leniter perforata. Caput quoque diligenter animaduertimus: similiter et faciem: ea tamen cautione, ne ex eiusdem anhelitu inficeremur. Propterea vidimus, *numquid pili capitis leniter decidere inciperent, et numquid subtiliarentur, et æger tam in superciliis, quam palpebris, et barba depilaretur, ac pili ex iisdem locis extracti carnem in radice haberent, vt in porcinis pilis apparere solet*. Deinde spectauimus *numquid tuberositas, vel tumor, instatio, crassitiesve in palpebris aut superciliis conspicerentur: numquid et in facie sentiretur formicatio, tamquam formicæ irreperent per faciem, aut punctura acuum siue spinarum etiam in fronte, et aliis partibus corporis: numquid etiam motus titubationis, seu iectigationis, vt vocant, et distorsio in partibus faciei, et aliis membris fieret*. Prepterea et totum corpus nudauimus, *num aspersa aqua tanquam guttæ pluviæ caderent super faciem aut alia corporis loca, rugositatesque in fronte apparerent, et contractio palpebrarum adesset, numquid furfures cum vinctuositate cutis capitis, et totius corporis haberet; et ideo,*

vt chirurgus eum vnguibus fricaret, mandauimus. Nam incipiente morbo viuidus ille coloris flos perit, cutis decoloratio apparet, aliis quidem nigricans, aliis flauescens, aliis albicans: vnde nonnulli tres elephantiaë statuerunt pro coloris varietate differentias: hinc densior, durior, asperiorque redditur, quum scilicet iam multo est humore perfusa. Talis vero præcipue conspicitur aut in facie aut in manibus aut in pedibus, natura, quoad licet vitia propellente in corporis extrema. In his sensus torpescit, frigusque perpetuum inest, maximeque in pedibus: licet enim horum initio integer seruetur motus, stuporis tamen et frigoris sensus inest. Tum temporis verrucæ plurimæ succrescunt, non in manibus solum, sed et in facie et in reliquo corpore: peculiare vero in linguæ radice. Pedes manus et facies tument, in hisque varia prominent tubercula, maxime vero in malis quæ extuberant liuido tumore: labra inuertuntur, nares resimæ obstruuntur crassitie alarum, et rimis discerptæ crustulas nigras atque cruentas excutiunt: oculi candidum flauescit, mira que crassitie quasi vngue obtegatur: supercilia prædura ac fere callosa, atque etiam glabra. Ex his enim, quemadmodum et ex palpebris, et ex mento, pili venenata qualitate imbuti defluunt, dum tandem horrenda euadat partium omnium deformitas. Manuum pedumque digiti siccitate dehiscunt, vnguesque sinduntur ac dilacerantur: totius etiam corporis cutis arescit, atque fæda siccaque scabie exasperatur, eaque interdum cum pruritu, ipsa quinetiam musculorum caro absumitur ac sensim liquescit. Malo autem ingrauescente, pro stupore cutis sensus perit, manente motu, vt ne infixæ quidem acicula dolorem moueat, neque inspersione feruidior aqua exurat: vox in gutture rauescit, respiratio difficilior euadit, spiritus totiusque corporis exhalatio fœtet, sordida virulentaque vlcera in manibus, pedibus et plerisque locis excuantur, grauisque putredo omnia contaminat. Est autem eo stæuior elephantia, quo signa grauiora apparent: maxime vero quum non in summo duntaxat corpore, sed et in ipsis quoque visceribus, in ossibus cæterisque interioribus partibus firmiter inhærescunt.

Non omnia tamen in omnibus, sed alia in aliis comparere solent. Istis consideratis, oculos quoque eius inspicere cœpimus, cum in iis signa certiora (*iuxta quoque Neotericos*) reperiantur, *an eorum color esset lividus aut fuscus, tenebrosus in albedine ipsorum: et numquid rotundiores fierent circa angulos, et liuescerent cum intuitu, aspectu fixo et horribili: et num circulos haberent rubeos, et ex se præberent horrorem videndi eos, vel quod in eis appareant distorsio, iectigatio, lachrymæ, et sit aquositas multa, quamquam tales non reuera plorent.* Iam et oculi quibusdam videntur exire à locis suis, et facies est multum terribilis in aspectu; quæ signa sunt cæteris potentiora. Nec satis esse putauimus quod conspiceremus, *numquid pili totius corporis graciles, rari et pauci essent, cum tales fiant ob materiæ crassitem et compactionem (vt vocant) non petentis exhalare per poros, ex quibus pili generari debent, ideo et capillos conspeximus ad solem, vtrum graciles essent decliues, vel relictæ admodum, more setarum porci; nam hoc signum est lepræ, ob materiam terrestrem ex qua orti sunt, et ideo diligenter ægrum conspeximus, numquid supercilia et etiam cilia pilis nudata haberet:* nam leprosi in superciliis pilos non habent potissimum; nec apud oculi angulos. Post hæc considerauimus nares, quæ solent augmentari, incrassari (*vt diximus*) et extrinsecus dilatari, interius vero coarctari et oppilari, ita vt anhelitus eorum, tum efflatio, fiat eis difficilis et fœtidus; et loquantur per nares *quemadmodum et quidem nunc lue gallica infecti* et cartilago nasi corroditur, vlceratur, et tandem nasus cadit, et est naufrigium manifestum, nam vt ablato frontispicio domus, ipsa domus deformatur; ita et ablato naso, tota facies deturpatur. Ab istis signis descendimus ad partis oris; et cum oris speculo chirurgo imperauimus, vt animaduerneret depressa lingua, *numquid grana ad modum porcorum leprosorum in lingua seu radice eius conspiceret:* ad hæc extracta lingua cum panno, diligenter conspeximus, *numquid in eius radice corpuscula quædam ad modum granorum milij albi inueniremus,* hæc enim perfecta signa lepræ existere solent. Interim obseruabamus, *numquid lingua extra propenderet, tum*

labia emitterentur, vel sanguinem funderent, ac vlcerarentur, vel fœtida forent, simul labra incrassarentur, denigrarentur, conuellerentur, aut distorquerentur. A lingua ac labiis seu labris ad aures accessimus, numquid rotundiores fierent incuruarentur, et pulpæ earundem contraherentur, graciliores fierent atque acutiores. Mox ad musculos qui intra pollicem et indicem digitum erant, deuenimus, conspicientes, num aliqua ægritudine consumpti forent. Similiter faciem quam diligentissime iterum conspeximus secundo, num eius color rubicundus foret liuidusve, aut ad plumbeum colorem tendens vel maximam nigredinem, vtrum guttæ rosacæ in ea conspicerentur, vel tuberositas, pustulæ ac ionthi adessent, simulque inflata foret, et aspectus eiusdem turpis esset, leoni similes et horribilis, tum diuersæ formæ ac fluxus. Interim quoque iussimus vt cantaret, vt ex illo perciperemus, numquid vox eius rauca ferox et aspera foret: quod etiam signum lepræ est. Postremo eum vestibus detractis nudum conspeximus, vt diligenter consideraremus, an macilentus esset, niger, ac num asperitas in ipso corpore aut cute cum lenitate vnctuosa, quod etiam est signum lepræ, quare et chirurgus paratum habuit aquam in pelui, et sal in vase, et baculum: aquam autem spargebat, et quasi irrorabat super ipsius spatulas, vt periculum faceret, num aqua cuti adhæreret, nam si manerent guttæ, et vesicæ minutæ quasi in loco vnito, hoc est pessimu, eo quod significat nctuositatem in carne ægri, quo minus guttæ aquosæ dissoluantur, sed inhæreant, propterea et cutem quoque iussu nostro aqua confricabat, numquid eidem adhæreret, vel facile ab eadem dissoluta caderet, aut non appareret, ideo et cutim digitis comprimendo diligentes attigimus, vt cognosceremus, numquid caro eius vnctuosa esset, salem deinde proiecit in cutem eiusdem: nam si adhæreat, signum est quoque vnctuositatis, deinde cum baculo per perticam, vt saltaret imperauimus, ad probandam virtutem motiuam; maxime musculorum, numquid post saltum inciperet calere vel tremere. Post hoc considerauimus totius corporis cutem, numquid color eius mutatus foret, aut morphea infecta, vel scabiosa, pruriginosa, impetiginosa, aut pediculosa vel

verminosa, itemque num. ad aërem aut aliud crispetur aut rugas habeat, vt anser deplumatus: num in cute oriantur nodi exerescentiæ pustulæ seu eminentiæ: num adsit asperitas, tuberositas, circa iuncturas et extrema. Imperauimus quoque vt facies eidem cooperiretur, ne videre posset, et vt Chirurgus diceret, *Caue, quia ego pungam te in pede*: et ipsum tamen non pungeret, sed postea pungens illum in pede, peteret, num punxisset, nam si diceret non punxisse, signum est lepræ. Oportet vero vt pungantur stilo aut acu in spatulis, tibiis, et in talo, vel in minimo digito, et vicinis locis vsque ad genu: vel à minimo digito manus, vsque ad cubitum: et si sentit punctionem bonum signum est. Sed quare magis in istis locis pungendi sint, et cur minus in iisdem sentiant, ratio est, quia debiliores sunt, et ideo citius à natura spiritibus destituuntur. Postea quoque spectanda sunt crura (vt fecimus) numquid pulpæ eorum decurtentur, et numquid adsit sensibilitas in puncturis factis in eis: et num sint crura scabiosa, squalida. De hinc quoque circumspeimus, num pulpa manuum ac pedum macilentiores essent ac decurtatæ, et numquid in eis foret insensibilitas mansura: frigus, dormitatio, stupor præcipue in extremis digitis, et præcipue minimi digiti et illi propinqui: quæ omnia in manu extenduntur aliquando vsque ad humerum, et in pedibus à digitis ipsis pedum vsque ad genu vel anchas: et expertissimum signum est lepræ. Interim et periculum fecimus, num manus essent nodosæ, pedes contracti, pustulis fædis, duris, maculis pannosis infecti: et num essent impotentes ad ambulandum, vt vel ad opera solita peragenda: facta quoque, vt supra diximus, examinatione, numquid saltare vltra porticam aut lapidem posset, periculum quoque facientes, numquid separatio in manibus tum pedibus adesset: num vngues scabri forent, inspissati, liuidi: et num in illis aut vicinis partib. Fissuræ, seu scissuræ tam in pedibus quam manibus apparerent: nam solet in istis et fieri mutatio coloris cum sanguinis mutatione, si premantur, et incipit in iisdem fieri forma fæda. Deinde considerauimus sudorem eius, num corruptus esset, et ad factorem decliuis; idem quoque experimentum facientes de superfluitatibus eius, quæ non

solum foetere solent, sed et totum corpus hirci instar foetet. Non minus, si fieri potest, perquirendi sunt mores eorundem à notis et amicis aut astantibus: quia sunt ut plurimum malorum morum, dolosi, suspiciosi; habentes quasi quemlibet suspectum: sunt astuti, facile irascuntur, et magis solito in furorem et iram concitantur: ardent in coitu, et sentiunt se debiliores ex coitu. Quamquam autem diximus, quod signa in sanguine (*teste Fernelio*) sint incerta: iuxta tamen alios Neotericos ea volumus indagare, quare extraximus sanguinem per chirurgum à vena communi mediana dicta, in tres scutellas eum partientes in prima scutella, cum sanguinis prope esset congelatus, *grana salis grossi* ad quantitatem pisorum imposuimus, ut videremus, *num sal liquefieret et dissolueretur*: id enim dispositionem lepræ præsignat, et magnam sanguinis adustionem, ut ferunt: in secundam scutellam iniecimus acetum vini acerrimum, ut videremus *num mutaret colorem sanguinis, vel ibidem faceret edullitionem quandam*, quemadmodum si proiciatur super terram; nam hoc est malum, significat enim terrestritatem: Tertiam partem sanguinis, quæ erat in tertia scutella, posuimus in panno lineo clauso, et duximus in aquam (potest et contineri in ripa fluminis aut torrentis currentis) donec substantia sanguinis ablueretur; et tunc periculum fecimus, *numquid in panno arenositas stridens inter digitos confricata maneret, aut sanguis vinctuosus reperiretur*. Id enim malum præsignat, ubi etiam remaneat caro in panno, strideatque et foetorem habeat, aut nigrescat, significat ariditatem, adustionem, vel lepram: at cum apparet caro alba in sanguine est bonum signum. Addunt alij, *si sanguis positus in aqua clarissima supernatauerit, tunc eum esse aut corruptioni proximum, ut saltem, aut loquantur, in via corruptionis: si vero petat fundum, non esse ita: si autem sanguine conseruato in panno lineo, et in aqua, ut dictum est, expresso, videantur aliqua corpora carnea liuida, ad modum milij vel panici signum est lepræ, si super sanguinem quoque adiecto liquore ponatur vrina ægri, et ea si non misceatur sed submergatur, signum est lepræ: sin secus, pro optimo signo habetur.*

Sed cur magis de vrina quam humore dicant, ratio est, quia eius corpus magis subtile, magisque penetrans est quam alius humor; et propter maiorem conuenientiam quam habet cum sanguine, cum sit eius colamentum: et quanquam de vrina quoque signum falli possit, *vt diximus* ex Ferneilo; quatuor tamen modis alij hoc indagari posse admittunt. *Primo* quod vrina leprosum debet esse alba, cum quandam limpitudine, et clara ac tenuis: *secundus* debet esse, quantum ad eius contenta, umbrosa, et debent intus apparere corpuscula ad modum farinæ vel furfuris bene triti. *Item* si matula moueatur, debet facere sonum, et ratio est, sicut in hecticis debet carere sono propter oleaginitatem resolutam à corpore, sic in istis debet facere sonum, propter terrestreitatem (*vt loquantur*) et siccitatem corporis. Istis signis omnibus consideratis, vt examen debite fieret, accepimus tabulam, in qua scripsimus partim bona signa, partim mala, vt non deficeremus in iudicio, et tandem conclusionem facientes, quod mala à bonis superarentur, lepram nondum confirmatam esse pronunciauimus, sed facile in lepram eundem casurum, si non bona victus ratione, tum medicamentis vteretur. At hic discendens cum se denuò reuersurum diceret, sed ante cum amicis suis se communicaturum, *vt*rum medicamentis per nos præscriptis *vti* necessarium æstimarent, postea non rediit, et sic nulla medicamenta præscripta sunt. At alios in quibus suspicio eiusdem morbi æque euidens erat, ob plurima et manifestissima indicia, quæ in illis apparebant, Dei Opt. max. auxilio, debitis accommodisque remediis præscriptis (*quali in sequentibus Scholiis memorabuntur*) a fœdissimo hoc malo liberauimus, aut saltem imminens malum auertimus et præcauimus, summi Dei nutu, cuius nomen in omnibus morbis inuocandum.

Forrestus. lib. IV. p. 103.

No. V.

Medicorum Regis, super morbo lepræ, certificatio.

Excellentissimo et Serenissimo in Christi Principi et Domino, Domino *Edwardo*, Dei Gratia, *Regi Angliæ et Franciæ, et Domino Hiberniæ*, Nos, humilimi Fratores vestri, *Willielmus Hatticyff, Rogerus Marchall, et Dominus de Serego*. Artium et Medicinæ Doctores, vestri Medici, et ad Personæ vestræ tutelam jurati, debitam Reverentiam cum humilitate et honore.

Cum nuper in Cancellaria vestra vobis supplicaretur de amovendo a communi hominum Consortio *Johannam Nightyngale* de Brentwode in Comitatu Essexiæ, eo quod præsumeretur per quosdam ex Vicinis suis ipsam fæda lepræ contagione infectam et de facto leprosam existere.

Propter quod quoddam Breve vestrum tunc ibidem confectum, et super inde vice comiti comitatûs prædicti directum fuit in hæc verba.

Edwardus, Dei Gratia, *Rex Angliæ et Franciæ, et Dominus Hiberniæ*, Vicecomiti Essexiæ, Salutem. Quia accepimus quoad *Johanna Nightyngale* leprosa existit, et inter Homines Comitatus prædicti communiter conversatur, et cum eis tam in locis publicis quam privatis communicat, et se ad locum Solitarium, prout moris est, et ad ipsam pertineret, transferre recusat, ad grave Dampnum Hominum prædictorum et, propter contagionem morbi prædicti, Periculum manifestum.

Nos,

Hujusmodi Periculum, prout ad Nos pertinet præcavendum, et super præmissis quod justum est et usitatum, fieri volentes.

Tibi præcipimus quod, assumptis tecum aliquibus discretis et legalibus Hominibus de Comitatu *prædictæ Johannæ*, et de hujusmodi Morbo notitiam habent meliorem et ad ipsam

Johannam accedas, et ipsam in Præsentia prædictorum Hominum facias dilig(i)enter videri et examinari.

Et in ipsam leprosam esse inveneris, ut prædictum est, tunc ipsam, honestiori modo quo poteris, a communicatione Hominum prædictorum amoveri, et se ad locum solitarium, ad Habitandum ibidem prout moris est, transferre facias inditate, ne per hujusmodi communem conversationem suam Hominibus prædictis Dampnum vel periculum eveniat quovis modo.

Teste meipso apud *Westmonasterium*, diu die Julii, Anno Regni nostri octavo.

Super quo præfata *Johanna*, antiquam præfatus vicecomes Executionem Brevis prædicti fecerat, Notitiam inde habens, in cancellariam vestram prædictam, pro Remedio et Relevio suo in hac parte habendo veniebat.

Quo Prætextu Reverendus in Christo Pater et Dominus, Dominus *Robertus*, Dei Gratia, *Bathoniensis* et *Wellensis* *Episcopus*, Cancellarius vester Angliæ, Nos super inde consulit, eandemque *Johannam* Nobis decerevit debere Præsentare, ea potissimum intentione ut, juxta id quod ex scientia medicinæ percepimus, vestram celsitudinem in cancellariam prædictam redderemus certiolem an ipsa eadem *Johanna* de facto leprosa esse necne.

Nos itaque, vestræ celsitudini morem gerere cupientes, ut super isto clarissima veritas eidem patefieri posset et deberet, in hunc modum processimus.

Primum de Persona sua consideravimus, et juxta quod Antiquiores et sapientissimi Medicinæ auctores in hujusmodi casibus faciendum docuerant, ipsam tractavimus et palpavimus, per signa, hujusmodi morbi declarativa, discursum fecimus, si in ea reperirentur mature diligenter et prout oportuit inquisivimus.

Inspectisque et consideratis singulis, quæ nobis pro elicienda vera notitia hujus ambigui, inspicienda et consideranda videbantur, debebantque videri, invenimus ipsam mulierem nequaquam fuisse aut esse leprosam, neque ex ea causa a communi hominum consortio segregandam.

Docemur equidem ex scientia Medicinali Morbus Lepræ in communi per plurima, signa, item, unamquamque ejus Morbi speciem (quæ quatuor sunt Alopecia (videlicet) Tiria, Leonina, et Elefantia per aliqua signa debere cognosci et discerni, unamque ab alia specificè distingui.

Itaque, in hoc casu, Mulieris nobis oblatae per viginti quinque, et ultra signa lepræ in communi famosiora discurrentes, non invenimus ipsam ex illis aut eorundem sufficienti numero posse convinci leprosam.

Et hoc quidem generaliter pro liberando ipsam a dicta præsumptione sufficeret, cum non sit possibile Lepræ Morbo quempiam lobarare an quo non multa pars hujusmodi signorum reperiatur.

Cæterum et, ut de singulis speciebus feramus sententiam, per quadraginta et ultra specierum lepræ signa distinctiva transeuntis, non reperimus ipsam mulierem ex aliqua quatuor specierum lepræ notandam, sed ab omni specie lepræ liberam prorsus et immunem, quemadmodum et vestrae celsitudini vocibus in cancellariam vestram prædictam significavimus paratique sumus idem per processum scientificum si et quando erit opus, eidem vestrae celsitudini plenius declarare.

Certificavimus itaque vobis, in cancellariam vestram prædictam, quod mulice sæpe dicta Johanna Nightingale, nobis præsentata, per nos inspecta visitata et in hoc casu, juxta sic exigentiam, in omnibus, ut congruum erat, tractata, inventa est sana, libera, nulla penitus specie leprosa contagionis infecta.

In quorum omnium fidem et testimonium nos dicti, *Willielmus Hatticlyff, Rogerus Marchall, et Dominus de Serego*, manibus nostris propriis nos ipsos præsentibus inscripsimus, et sigilla nostra alternatim apposuimus.

Dat. primo die Novembris, anno Regni Regis Edwardii Quarti post conquestum Angliæ octavo.

