

## **English medicine and surgery in the fourteenth century / by D'Arcy Power.**

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### **Publication/Creation**

London : Printed at The Lancet office, 1914.

### **Persistent URL**

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c. 8  
with the Aubrey cabinets.

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ENGLISH MEDICINE AND  
SURGERY IN THE  
FOURTEENTH CENTURY

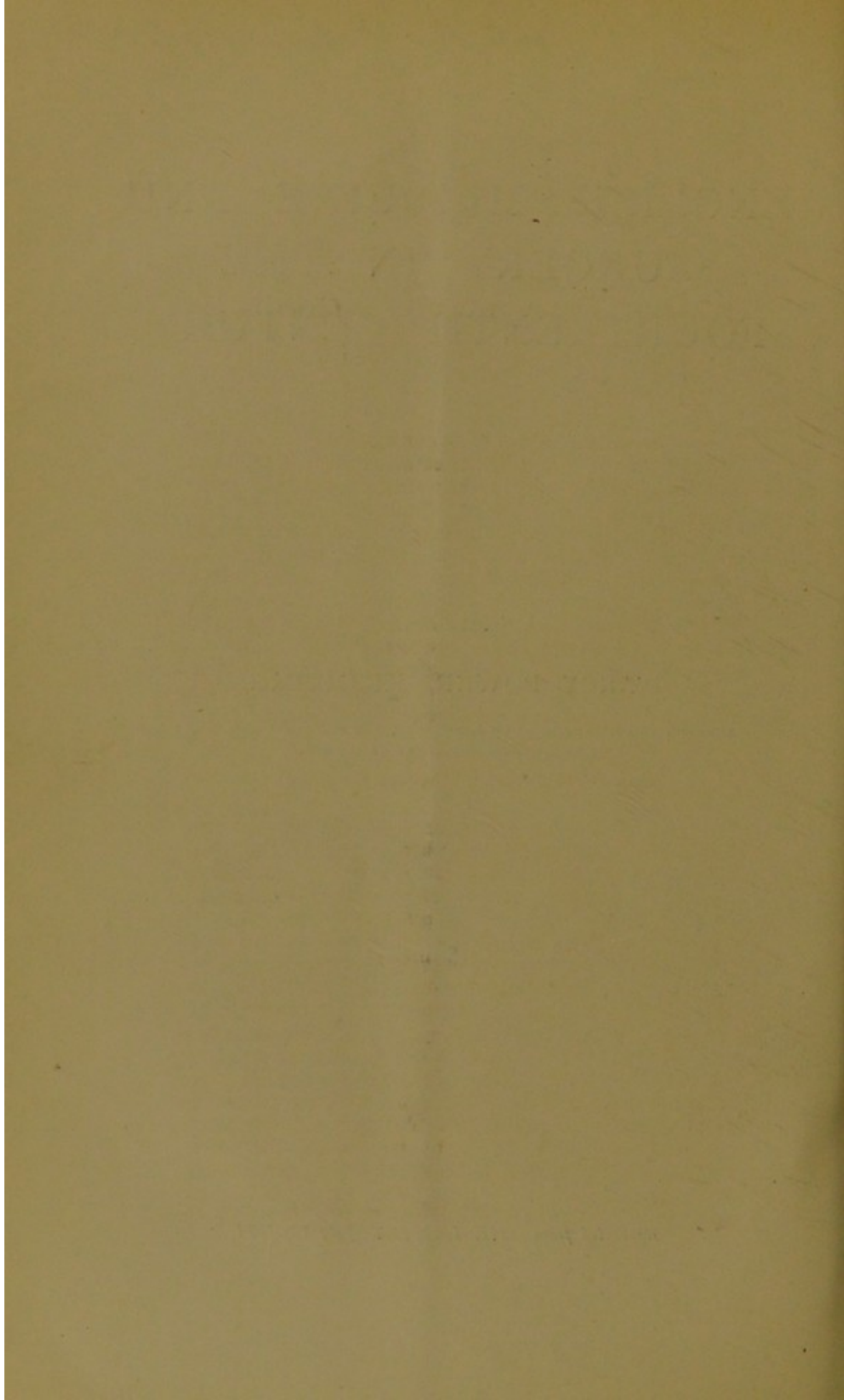
BY

D'ARCY POWER, F.R.C.S. ENG.,

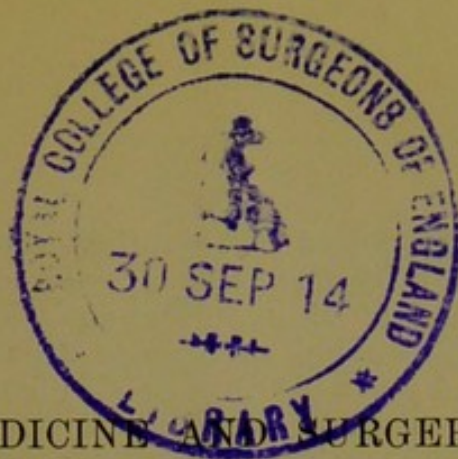
SURGEON TO ST. BARTHOLOMEW'S HOSPITAL, AND FORMERLY PRESIDENT  
OF THE HARVEIAN SOCIETY OF LONDON.



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Reprinted from *THE LANCET*, July 18, 1914







ENGLISH MEDICINE AND SURGERY IN  
THE FOURTEENTH CENTURY.<sup>1</sup>

THE Harveian lecture was established in 1875 to promote the diffusion of exact scientific knowledge, and the office has always been held by one who has done pioneer work in the subject upon which he has lectured. I felt it an especial honour, therefore, when your council not only asked me to lecture, but invited me to choose some topic connected with the history of medicine, a branch of knowledge which had not previously been selected by any lecturer. I accepted the invitation with pleasure, and the more so as it obliged me to carry out a piece of work which I had long been wanting to do and might not otherwise have undertaken.

*England in the Fourteenth Century.*

I chose "English Medicine and Surgery in the Reign of Edward III." This king was born, as you know, in 1312, came to the throne in 1327, and died in 1377. He lived, therefore, practically through the fourteenth century—a century which closed mediæval history in Europe. It was heir to the wonderful advances in scientific knowledge which marked the twelfth and thirteenth centuries; it immediately preceded the equally wonderful revival in art and literature known to us as the Renaissance, a revival which took place at the expense of what is now called "research" and "original work" in favour of art and literature. The men of the fourteenth century were in touch with the older beliefs and traditions, whilst they were endowed with the knowledge of science which had been gained by

<sup>1</sup> The Harveian lecture, delivered before the Harveian Society of London.



Roger Bacon and Robert Grosteste. The King of England still flew the Wessex dragon, the old Saxon flag of England when he went to battle, and his wounded men were treated as often by spells and wort-cunning as by clean dressings and primary suture of the bowel.

The fourteenth century is thus worthy of careful study, and nothing in it is more worthy than the practice and the practitioners of medicine. The country was at war with France for 100 years, and the upper and lower classes were as familiar with the Netherlands, France, and Spain as our own men are with South Africa. Trade was active and large sums of money were constantly changing hands. The Black Death, too, in the middle of the century was followed by a long train of epidemic illnesses. All classes of the medical profession profited, and all had abundant opportunity of practising their calling, whilst foreign victories by raising the national blood pressure made them sanguine enough to experiment and advance upon the older methods. The younger generation, too, proved receptive. It watched the results of its teachers and was ready to adopt all means which had proved successful. Surgery, perhaps more than medicine, was in a fair way of becoming a science; then suddenly came the Wars of the Roses, chaos, and all was lost for very many years.

#### *John Arderne.*

The fourteenth century was an era of really great surgeons throughout Europe. Lanfrank, the most distinguished pupil of William de Salicet, died in 1306; Henri de Mondeville lived from 1260 until 1320; Gui de Chauliac, prince of the mediæval writers on surgery, died in 1368; Jan Yperman, the Flemish surgeon, died in 1350. These great surgeons were foreigners. We had in England at least one original surgeon—John Arderne—worthy to be classed with them. (Fig. 1.) Born in 1307 he practised for many years at Newark, then a centre for England and a meeting place for Parliament. He came to London in his old age and died at the end of the century. Typical of the fourteenth century



FIG. 1.



FIG. 2.

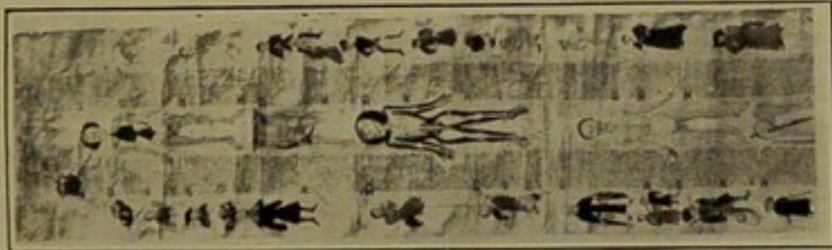


FIG. 3.







he was skilful in leechcraft, a believer in spells, as befitted one brought up in the older school of thought, and yet a skilful and original surgeon, owing no allegiance to authority, profiting by his experience, able to invent wholly new operations. I desire to speak of him for a short time because the kindness of Mr. Henry S. Wellcome and of Mr. C. J. S. Thompson enables me to show you a manuscript of his works which has not hitherto been thoroughly examined.

*Manuscript of Works of Arderne.*

The original manuscript is in the Royal Library at Stockholm. It is said to have been bought in London in 1759 for the sum of £15 by the Swedish Minister at St. James's, and it was presented by him to the king on his return home.

The manuscript (Fig. 2) is a roll of eight skins of vellum sewn together. It measures 17 ft. 8 in. in length by 15 in. The writing is arranged in two and sometimes in three columns which are separated by coloured figures illustrating the text. It is written in an early fifteenth century hand, and there is no reason to doubt the information added later that it was made in the year 1412. The roll has been exposed to considerable vicissitudes during the 502 years it has been in existence, and parts of it are quite illegible. I am, however, very greatly indebted to Mr. Eric Millar, of the Manuscript Department at the British Museum, for the great pains he has taken in transcribing all that can still be deciphered. It is clear from this transcript that the roll is a Latin version of a part of the works of John Arderne made a few years after his death by a copyist who had some knowledge of the "Lilium Medicinæ" written by Bernard Gordon in 1305. It is, in fact, what the publishers would now call a revised edition of the works of the late Master John Arderne with additions. Like so many revised editions it is completely spoilt. It has lost its savour. Many additions have been made which Master Arderne would have resented, whilst much is omitted upon which he justly prided himself. Fortunately so many manu-



scripts of Arderne's works still remain—I have myself seen about 60—that we need not be troubled because this one has been edited.

*Contents of the Manuscript.*

I do not propose to weary you with a detailed account of the roll, and I will only give a few short extracts that you may be able to gain some idea of its nature and contents. The work is an abstract of Arderne's "Liber Receptarum" arranged in the same order as the corresponding chapters in Bernard Gordon's "Lilium Medicinæ," which at the time was the ordinary manual of surgery throughout Europe; it cannot be called the text-book of surgery because it circulated in manuscript, as printing was not yet known. Arderne's roll deals with diseases of the head, throat, eye, ear, chest, lungs, digestive organs, liver, spleen, kidneys, and male organs of generation. There is a section on gout, details of cases treated by the author, and some midwifery. Like all Arderne's works it is remarkable in containing no account of fractures and dislocations, and its early character is shown by the very slight reference made to astrology. The religious character of the age is well shown in the short prayer to be said before giving any medicine. It runs—I give you merely the translation—"O Lord, who marvellously madest man and more marvellously reformed him, who hast given physic to regulate the health of men's bodies, pour down from heaven thy blessing upon this remedy or electuary or draught, &c., that into whosoever's body it shall enter they may be worthy to receive strength of mind and of body through Christ our Lord. Amen."

A single example will show the use made of charms or spells. It is recommended in epilepsy that the words Jasper, Melchior, and Balthazar be written with blood drawn from the auricular or little finger of the patient. The paper bearing the words should be worn by the patient, who was to say daily for a month three Pater Nosters and three Ave Marias for the souls of the fathers and mothers of these three kings. He was also to



drink the juice of peony in beer or wine for a month. There is no doubt that Arderne had to treat the equivalent of panel patients, for he says, in speaking of constipation, "Let the man drink 'de brodio,'" which was the equivalent of beef-tea, "if he be rich, but if he is a pauper he may just drink his own urine."

These, however, are mere sidelights, for the manuscript contains a record of valuable experience. Arderne says that the following are fatal signs in quinsy: "If the patient foams at the mouth, if the corners of the eyes become black or green, if the pulse cannot be felt, if the extremities become cold, and if a cold stinking sweat exudes from the armpits; because in these cases the patient will die on the same day." He adds in another manuscript that he had treated very many cases of sore throat where the patient died suffocated in three or four days, so that he had probably seen some unrecorded epidemic of diphtheria.

#### *Arderne's Skill as a Surgeon.*

The following case shows his surgical ability in a case of stone impacted in the urethra. He says:—

I saw a young man with a stone as big as a bean so lodged in his penis that it could not escape through its eye, neither could it be pushed back, but it remained in the middle of the organ as it is here shown. I cured him easily with an incision, for I put him on his back and tied his member with linen threads on each side of the stone to prevent it shifting, and after making a small cut with a lancet over the stone I squeezed it out. I then sutured the skin with a needle and thread over the hole, and dressed it with white of egg and finely ground flour, and having wrapped up the penis in a piece of old and thin linen I let him go in peace for three days. I cut and removed the thread at the next dressing, and in less than a fortnight I had cured him completely. There is no need for alarm in these cases, even though the urine escapes from the wound for three or four days after such an operation, for the patient will certainly be cured.

In like manner his treatment of a case of serious primary hæmorrhage was equally surgical, and was



far in advance of his time, for he used cleanliness and sponge pressure when most of his contemporaries would have employed astringent ointments because ligatures and forceps to stop bleeding had not been thought of. Speaking of fistula in ano, Arderne says :—

I cured a man from Northampton who had three holes in the left buttock and three in his scrotum, as is here shown. The blood escaped very freely after the rectum was divided, because the fistula had tracked deeply. I put a sponge into cold water and stopped the bleeding with it. I then stuffed a good-sized sponge into the bowel and made him sit on a chair. The bleeding stopped directly, and as soon as the patient had eaten a meal and had been put to bed he slept well all night without any farther hæmorrhage.

Another manuscript gives the name of this patient as John Colyer, mayor of Northampton, and the records of the city show that he was mayor in 1327, and again in 1339-40.

The roll also contains a very interesting section on midwifery which is well worthy of more careful study. It gives a series of "birth figures" like those found in Rösslin's "Byrth of Mankind." Each figure is accompanied by a short description which in many instances takes the form of question and answer, as if it had been designed for the oral instruction of midwives. The usual formula runs :—

Quartus partus est si ambas manus foras ei invenerit. Quid facere debet obstetrix ? duobus humeris ejus manus suas ex utraque infgens retrorsum eum revocet, sicut superius dixi, manibus compositum et apprehenso capite paulatim et leviter eum adducat. Si infans caput habet et si duas manus ejicit, oportet obstetricem prius missa manu sua caput ad orificium corrigere ~~et~~ comprehensis manibus infantis conari debet ne caput orificium vulve non obstipet, sed facillime omne corpus infantis exire possit quo priores manus exierant.

(The fourth birth or position is when both hands present. What should the midwife do ? Grasping the hands with the arms on either side let her push back the child arranged with its hands as I have said above, and having seized the head, let her draw it down slowly and gently, &c.)

And so I could go on with extracts for a long time, but as it would be at the risk of wearying you I shall pass on to more general matters.



*Medical Practitioners in the Fourteenth Century.*

The treatment of the sick in England during the fourteenth century was in the hands of the same classes of practitioner as it is at the present time. It was shared by the physician, the surgeon, the family medical attendant, and the quack. The apothecary, then as now, was a tradesman. In country places the ladies did what they could to relieve the illnesses of their poorer neighbours.

*The English Mediæval Physician.*

The physician was usually, but not necessarily, a churchman. He learnt abstract science in the monastery schools and the scientific side of medicine in a university. He then returned to his monastery, where he either remained as physician or received preferment, becoming attached to the household of some great man. Dr. Norman Moore<sup>2</sup> gives the names of eight physicians practising in or near London during the reign of Henry III. (1216-72). Two were physicians to the Queen—it is not stated whether or not they were in orders; two were canons of St. Paul's. Two were priests resident at St. Alban's, and it is to be noted that one of these priests was the son of "Adam the Physician," who was not therefore a priest. The last of the eight was a doctor of medicine, a doctor of laws, and a doctor of theology, a professor at Paris and Oxford, physician to the King of France and to the Bishop of Lincoln.

We know that no great change had taken place in the status of the English physician in the next hundred years, because John of Gaunt had two physicians in his retinue, John Bray and William Appulton. John Bray was John the Minorite, "Johannes de ordine Minorum, in armis bellicis strenuus, in physicâ peritissimus, domino Johanni duci Lancastriæ familiarissimus" ("John of the order of the Minorites, courageous in war, most skilful in physic, most acceptable to My Lord, John

<sup>2</sup> The History of the Study of Medicine in the British Isles, 1903, p. 16.



Duke of Lancaster"). It was precisely because he was such a friend of the duke that the London mob beheaded him on Tower Hill after the Savoy was burnt in 1381. His colleague was Frère William de Appulton, "physician and surgeon," who received xl marks in time of peace from the honour of Pomfret; in war time other xl marks and ranked as a gentleman, clerk, esquire, or a chamberlain, having four horses and two grooms allotted to him. Bray had received £10 a year, with 3s. a day travelling allowance. He ranked as a chamberlain with an allowance of two horses and the wage of one groom.

The physicians attached to John of Gaunt, therefore, held a good position in his household. They were men of affairs and took an active part in counsels of war. It is clear from the description of Frère William that he was prepared to act as a physician or as a surgeon,<sup>3</sup> so that the line of division between the two branches of the profession was not so absolute as is usually described. The popular idea of a physician as he is represented in Fig. 3 was generally accurate. He was a learned man who taught pupils, gave advice, prescribed drugs, and ordered active treatment when

<sup>3</sup> The indenture appointing him is dated at the Savoy, March 15th, 1373, and runs: Ceste endenture faite parentre nostre seigneur Johan Roy &c d'une part et frere William de Appilton physicien et surgien d'autre part tesmoigne que le dit frere William est retenuz et demourrez envers nostre dit seigneur pour peas et pour guerre a terme de sa vie en manere qu'ensuit: c'estassavoir le dit nostre seigneur ad done et grante a ly par an a terme de sa vie par le bon et agreable service q'il ly ad fait et ferra xl marcs d'esterlinges a avoir et prendre tant en temps de peas come de guerre de les issues de l'onour de Pountfreit, par les maines de le receyvour illoeqes qi pour le temps serra, as termes de Pasques et de Saint Michel par oveles porcions. Et si le dit rent soit a derlier par un moys apres aucunes des termes avantditz voet et grant nostre dit seigneur que bien lise au dit frere William de destreyndre en la dite seigneurie et chescune parcelle d'ycelle et les destresses retenir tanque gree ly ent soit fait. Et outre ci nostre dit seigneur ad grante au dit frere William en temps de guerre autres xl marcs par an a terme de sa vie, apprendre par les mains del tresorer de guerre qi pur le temps serra (ainsi qu'il soit) tenu dez travailler ovesque nostre dit seigneur tant en temps de peas come de guerre es quelles parties q'il plerra a nostre dit seigneur et de faire ses ditz offices. Et serra le dit frere William a bouche en courte ovesque un gentil homme clerc ou esquier et un chamberleyn, et prendra livre pur liij. chivaux et gages pur deux garceons pur le temps q'il serra en courte, et a quelle temps q'il serra hors de courte as busoignes de nostre dit seigneur par son commandement il avera gages pur chescun jour solonc son estat est condicion par les maines del tresorer del houstel qi pur le temps serra. En tesmoignance, &c. Donnee etc a la Sauvoye le xv. jour de Mars l'an xlvii. [John of Gaunt's Register, Camd. Soc. ed., 1911, Part i., No. 836.]



he considered it necessary. In this particular case<sup>4</sup> the physician is represented in an ecclesiastical dress with a biretta (Fig. 3). He is watching a patient who has been ordered to take a dose of medicine. The stool with the basin beneath it shows the primitive sanitary arrangements of the time. It was not even a close stool, the first mention of which is in 1410, or more than 50 years after the time we are considering.

My friend Dr. H. P. Cholmeley has recently issued an admirable account of the English mediæval physician in his book on John of Gaddesden, who lived from 1280 to 1361, and as the book is easily accessible I need say no more about him except that on the two occasions when Arderne, his contemporary, refers to him it is in connexion with the diseases of women, so that he was evidently held in estimation as a gynæcologist.

### *The Operating Surgeon.*

The operating surgeon—as a class—was in a lower position than the physician, and during the fourteenth century he was in a transition state. He was still itinerant because he went from house to house to do his cure—that is to say, he undertook for a certain fee to operate and attend the patient until he was well. This involved personal service, occasionally for long periods of time, and the fees charged were relatively large because it was impossible to have more than one case in hand at a time. The fee was paid partly in cash, partly in kind, and partly in the form of an annuity which the surgeon received so long as the patient lived. The operating surgeon travelled extensively, lived with the moneyed classes, and if he was a good fellow was received by his patients on a friendly footing. He also gained a large income.

Most of the operating surgeons in this century had seen war service, I imagine, and although there were a few in the provincial towns, the majority congregated in London where they became members

<sup>4</sup> Le Livre de Santé, par Aldebardus de Sienne, Sloane MS. 2435.



of the Guild or Fraternity of Surgeons. Membership of this Guild gave them the right to call themselves "Master" or "Magister" with a special cap and robe, as seen in the picture (FIG. 1), and for a few years they arrogated to themselves the prefix "de," so that John Arderne when he was elected into the Guild became Magister Johannes de Arderne. Many operating surgeons had taken orders and were consequently unmarried, but they do not seem to have held Church preferment, as was the case with physicians. The attitude of mind of the lay surgeons was, however, sincerely religious when they belonged to the better class, and their religion was certainly not a pose. Arderne, writing in 1376, used to say, "I did my cure to him and the Lord being mene (Deo favente) he was helid perfectly," in exactly the same humble-minded spirit as Ambroise Paré—200 years later—said, "I dressed him, God cured him."

The Master Surgeons as a guild exercised control over the practice of surgery in London. Isolated notices of them occur as early as 1312, and the record of 1354 shows definitely the use to which the authorities put their knowledge. It says:—

Be it remembered that on Monday next after the feast of St. Matthias the Apostle (24th Feb. N.S.) in the 28th year of the reign of King Edward iird, the Prior of Hogges, Master Paschal, Master Adam de la Poleterie, and Master David de Westmerland, surgeons, were sworn before the Mayor, Aldermen and Sheriffs, to certify them as to a certain enormous and horrible hurt on the right side of the jaw of Thomas de Shene; whether or not such injury was curable at the time when John le Spicer of Cornhulle took the same Thomas under his care to heal the wound aforesaid. Who say upon their oath, that if the aforesaid John le Spicer at the time when he took the said Thomas under his care had been expert in his craft or art or had called in counsel and assistance to his aid, he might have cured the injury aforesaid; and they farther say that, through want of skill on the part of the aforesaid John le Spicer the said injury under his care has become apparently incurable.

I am inclined to think that John le Spicer was an apothecary seeking to practise surgery and that he was a member of the Fraternity of Spicerers.



The duties of the officers of the Guild had become stereotyped into an oath as early as 1369, but I quote the oath of 1390 because it states that women as well as men practised surgery in the City of London. It runs:—

On Monday, 10th April in the thirteenth year of King Richard the Second Master John Hynstock, Master Geoffrey Grace, Master John Bradmore and Master Henry Suttone, surgeons were admitted in the Court of Guildhall in London before William Venour, Mayor, and the Aldermen. They were sworn as Masters Surgical of the aforesaid city well and truly to serve the people in working their cures, taking of them reasonable recompence, &c. To practise truly their trade and to make faithful oversight of all others both men and women, occupied in cures or using the art of surgery, presenting their lack both in practice and medicine so often as needs be to the aforesaid Mayor and Aldermen. They shall be ready when warned thereto to take charge of the hurt or wounded and to give faithful information to the servants of the City of such hurt or wounded as are in danger of death or not.

The Master Surgeons themselves were held in some estimation and consorted on fairly equal terms with the physicians, but the reputation of operating surgeons as a whole was not good. Their wandering life very often made them literally vagrants, and if a case was not doing well they had an unpleasant habit of slipping away and leaving the patient to Providence. In the popular estimation they were drunken, lascivious, boastful, and quarrelsome thieves. William de Salicet, writing for surgeons at the end of the thirteenth century, says gravely enough that a wise surgeon will refrain from stealing whilst he is actually in attendance upon a patient, and that he should not employ assistants with notoriously bad characters, not because it is morally wrong, but because such actions are likely to prejudice the patient against his surgeon and so spoil an otherwise good operation.

The best of the operating surgeons, however, did good work in the fourteenth century, and they almost succeeded in making surgery a profession. Their skill and boldness may be judged from this extract from the manuscript of an unknown surgeon whose work still lies unprinted at the



British Museum.<sup>5</sup> The section treats "of wounds of the gut and liver." It says:—

Yf a gutte passe out of the wounde and it be not wounded reduce him in again, and yf you may not reduce him procede in this manner. first chaufe ye guttes that ben oute and mollifie hem with a gret sponge (wetted) in water of ye decoccion of camomulle & anys & enoynte hem with hoothe oile of camomulle & when they be chaufed with the aforeseid sponge putte hem in agen as well as you may & yff you may not reduce hem by this weye open ze wound a litell more liztly & widely & then reduce hem & sewe ye wounde & yf the gutte that passe out be wounded then that wounde ben dedlye but yet leve not the resonable cure of the wound.

An ye guttes be kutte all otmest so that ther leve nothyng hoole thane natheless the wound is mortal and may not receive no curacion; but yf ze guttes be kutte on lengthe other in partie on breadth but not fully cut in sonder hardily conduce ye parties of ye gutte that is kutte, whether that it be kutte ye lengthe other brede, & sewe hem in ye manner as skynners sewen ther furroures [furs], for in this case it is ye best maner; & anone as it is sewed lay on a poudir that mo cleve together to the guttes & the sewing the weche is made in this manner: Take Mastic, draganth & gum arabick, &c.

In the same manner it is recommended that a ruptured liver should be treated by suture.

#### *The Barbers.*

The term "leech" was used familiarly as the term "doctor" is at present, and was applied to all members of the medical profession. The general or family practitioner, at any rate in London, was obliged to be a member of the guild or fraternity of Barbers. He was a Barber and was called a Barber or, at the best, a Barber practising surgery, for there were no Barber Surgeons, since the Barbers and Surgeons did not unite until 1540. Some jealousy existed between the operating surgeon and the barber who practised surgery, for Arderne says, in speaking of the treatment of thrombosed piles by incision: "And be the lech ware that non

<sup>5</sup> Galien's Book of Operacions, Sloane MS. 2463, Fol. 116.



of tham that standeth ny about perceiue when he openeth the lancet for if barbours know this doing they would usurp this cure, appropriating it to themselves unto unworschip and no little harm of the Master (surgeons)." It is clear, too, that the barbers held a somewhat lower position, for it is told of a fishmonger, who spiked his arm on the swingdoor of the Carmelite Church in Whitefriars, that "he was almost dead what with the aching, swelling, burning and improper treatment of a barber that put into the wound irritating tents of linen and had covered them with diachylon. All thes dressings I took away and about evensong replaced them with a simple dressing of oil. And before cockcrow the patient was relieved and in the morning he slept well and I cured him finally and thereby I got much honour."

Here is a case showing the ordinary course of surgical routine and the relationship between women, barbers, and surgeons in the fourteenth century. The priest had a cancer of his breast. John Arderne tells the story in one of his minor works. He says:—

To a preest of Colstone faste by Bynghuame (Colston Bassett in Notts) ther felle a sore in the ryghte pappe withinne the skyne uppone the heed of the pappe as it were a litill knotte & in manner of a pese with ycchyng & so the forseyd knotte bi contynywaunse grew foorth tyll it was of the gretnesse of ane henne egge & that it came to the foorme & lyknesse of a topp. The colour of this sore was lyvyd medlyd with rednesse & waterynesse & hard in felyng & whane ii yere were passyd he was tawghte of a lady to leye ane emplastre therto & to drynke of the drynke of Antioche and whane he perceyved that the forseyde medicines prevayled hyme nowgth he went uneto the towne of Notynghuame to be leten blood & whane the barbour perceyved the forseyd knotte he asked of hyme whether that he wolde be holpen therof & tolde hyme that he hadde a cure therefore & coowde hele hyme therof. The preest seyde he wolde fayne be holpen but nevertheless he seyde to him he wolde aske counsell yf it myghte be done as he seyde unto him. And in the same towne ther was a wyse sirurgyane of the weche the seyde preest hadde wetyng & wente to hyme to aske counsell yf that he were curable or if that he myghte suffre ony kuttinge or corrosyne or ony suche other medicines. And the seyde leche warned him that he schulde in no manere wyse putte no corrosyve ne non other violent medicines ne lete no kuttinges come ther-ny for yf he dyde



he promysed that yt wolde brynge hyme to the deeth withouten ony rekevere.

The barbers acted in their public capacity as health officers of the City of London. They had charge of the gates of the City and were formally appointed gatekeepers. They knew who came in and who went out, and their medical knowledge enabled them to segregate the lepers who were so fruitful a source of anxiety to every community throughout the Middle Ages. The barbers also had the superintendence of the Bagnios, which were little else than licensed brothels, and it is for this reason that in 1308 Richard the Barber, on his presentation to the Court of Aldermen as Supervisor of the Barbers, made "oath that every month he would make scrutiny throughout the whole of his trade and if he should find any among them keeping brothels or acting unseemly in any way and to the scandal of the trade he was to distrain upon them."

These duties interfered to a certain extent with the duties required of every citizen—the serving on juries and keeping of watch and ward. Both were irksome, and the early records of the Barbers are full of attempts to gain exemption. The City watch was especially onerous, for in times of unrest, and they were frequent throughout the thirteenth and fourteenth centuries, the streets of London were patrolled at night by a guard which the chroniclers tell us was as many as 10,000 men armed and grouped into bands under the different aldermen. In ordinary times a dozen men from each ward sufficed, but they had to be properly armed and accoutred so that they were a source of continual expense. The barbers obtained exemption both from serving on juries and from watch and ward, and the exemption, as you know, still holds good for us so long as we are in the actual practice of our profession.

The barbers took no responsibility with their patients. Every person under their care who was "in danger of death or maim"—that is to say, who was seriously ill or likely to suffer from permanent disablement—had to be seen by the Master or Wardens of the Barbers' Guild within three days of



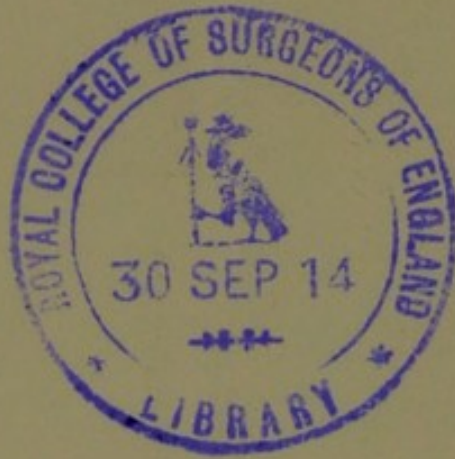
FIG. 5.



FIG. 4.









the first attendance. Any barber who neglected this rule of "the presentation" of patients was fined and might be imprisoned, whereas if he obeyed it he was held blameless—except in very gross cases of malpraxis—whatever happened. The rule worked well, and for 300 or 400 years there is no record of the attending barber being supplanted by the Master and Wardens whom he had called in to assist him. The women members of the Barbers' Guild and Company did not exercise their art and mystery, but were the wives, widows, and daughters of members who kept on the apprentices or received what would now be called a pension.

#### *Subordinate Grades.*

In the subordinate ranks of the profession were many different grades. They chiefly flourished in country places and travelled from town to town. The dentist, as is seen in Fig. 4, was known by the belt which he carried to display the number of successful extractions he had performed, but it is evident that his tools were of the rudest, even if allowance be made for inaccurate drawing. The coucher for cataract, the cutter for stone, and the curer of ruptures were well recognised itinerant occupations, whilst cupping, or "garsing" as it was called, was left to a special class, of whom the last survivor disappeared from the Blackfriars-road well within our own recollection. It seems, however, that only the operative part was left to these practitioners, for the surgical manuals of the time deal with the treatment of diseases of the eye, with the signs and symptoms of stone in the bladder and kidneys, as well as with hernia. The method of leeching seems to have been simple if Fig. 5 may be trusted, for the patient is sitting with her feet in the pond until the leeches fasten upon her legs.

Bathing in like manner was reduced to its simplest form, as is here shown. (Fig. 6.)

#### *The Apothecary.*

Very little is known of the apothecary in the fourteenth century. He practised a separate trade



in London as a member of the Spicers' Guild—for the Guild of Grocers was not yet formed—and in all probability he was an offshoot of the confectioners. The Ward Robe Rolls show him as a court official who in the reign of Edward II., in 1313, received  $7\frac{1}{2}d.$  a day. His name was Odin the Spicer, and when Madame the Queen was ill at Westminster in the November of that year, he bought things for her. He is called definitely "Odinus Apothecarius Reginae." In 1345 Coursus de Gangeland, an apothecary of London, was granted  $6d.$  a day by Edward III. for taking care of and attending his majesty during his illness in Scotland, so that by this time he was definitely engaged in medical practice. In 1360 Peter of Montpellier was apothecary to Edward III., and Freind says in his History of Physic (vol. ii., p. 292) that J. Falcand de Luca in 1357 was the first apothecary to sell medicines in England.

The apothecary held a well recognised position as the "physician's cook," and Chaucer says in his prologue, when speaking of a Doctour of Phisike:—

Ful redy hadde he his apothecaries,  
To send him drugges, and his letuaries,  
For ech of hem made other for to winne;  
Her frendship was not newe to begynne.

John Arderne makes several references to "the potecary." Writing in 1372-6 he says: "Euforbium is a gumme that potecaryes sellen," and in another place: "Agryppa is ane oyntment that potecaryes sellen, and it is whyte of coloure"; and yet again: "Thou mayest put to a wounde common unguentum album that apothecaries make."

The spicers and the pepperers were nearly all Italians in the fourteenth century, and the apothecary was necessarily a member of one of these guilds, or he could not ply his trade. There is a curious passage in one of Arderne's works which shows that these Italians were already assuming to themselves certain humble medical duties, for he says in speaking of clysters and their uses, "I have gotten an hundred times gret honour with lucre in diverse places. ffor why, at London when Lumbardez oft-times ministered clisteries on



FIG. 6.

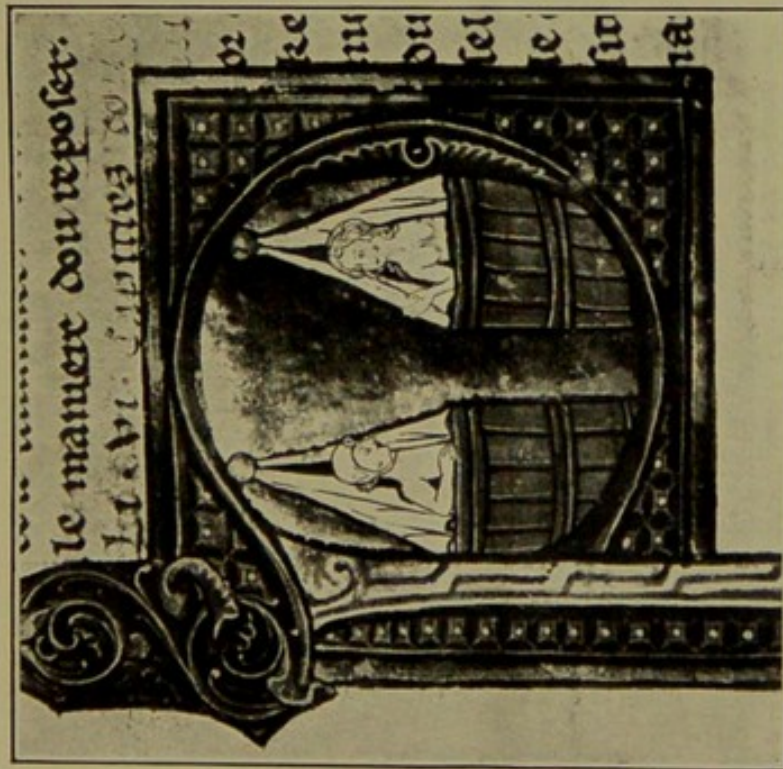
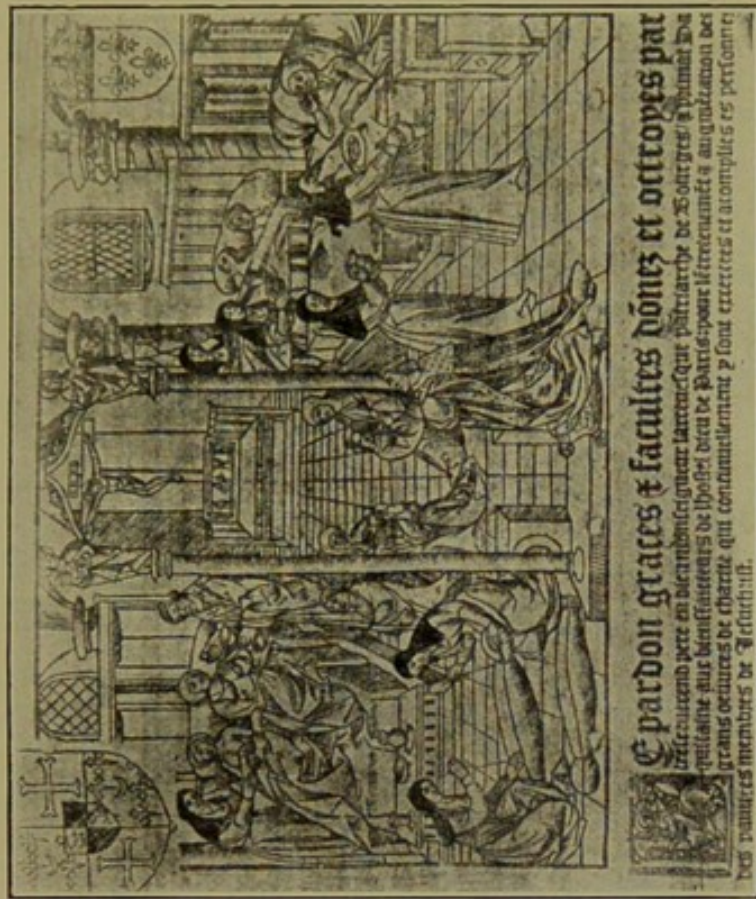
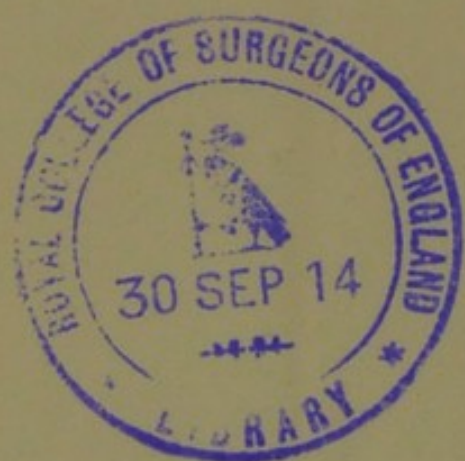


FIG. 7.







their manner to colic men and other men constipate, ne might not availe, I forsooth, with the aforesaid manner of clystering at the first time within the space of a forlong or two I delivered the patient for certayne, our Lord being mene." The passage is interesting apart from the reference to the Lombards as specialists in the administration of enemata, because it shows how prevalent constipation must have been when living was high, people were sedentary, and purgatives were few. The estimation of the action of clysters in terms of distance rather than of time seems to be wholly original. So far as I remember, however, the apothecaries never came into serious conflict with the surgeons or with the barbers of London in the exercise of their occupation. They were soon merged into the great Company of Grocers and developed into ordinary shopkeepers as retail sellers of drugs and spices. It was only when they were formed into a separate body as the Society of Apothecaries that they became a thorn in the side of the physicians, but this was more than 250 years later.

#### *The Hospitals.*

The hospitals in the fourteenth century formed a special branch of charitable work, just as they do at the present time. In London they had already existed for nearly 200 years. They were religious institutions nursed by members of the Augustinian order, and provided food, rest, nursing, and religious consolation for those who were acutely ill. There was no separate medical or surgical staff until the sixteenth century, and we have no knowledge as to the nature of the treatment followed. The patients were sick persons found in the streets of the City and all the wounded or injured who chose to apply for relief. Everyone was received freely and without question. Special servants of the hospital—the beadles—clothed in a distinctive livery and wearing a badge, were appointed to bring patients into the hospital. At St. Bartholomew's Hospital they still exist, and their sixteenth century charge ran:—

Ye shall separate and divide yourselves into sundry parts of the city and the liberties thereof, every man taking his



several walk. And if in any of your walks ye shall happen to espy any person infected with any lothely grief or disease, which shall fortune to lie in any notable place in the City to the noyance and infection of the passers by and slander of this house ye shall then give knowledge thereof unto the Almoners of this hospital that they may take such order as to them shall be thought meet.

We also know how such patients were received, for the order runs:—

When the patient arrives he shall be received thus : First, having confessed his sins to the priest he shall be communicated religiously and afterwards be carried to bed and treated there as Our Lord, according to the resources of the house ; each day before the repast of the brethren he shall be given food with charity, and each Sunday the epistle and the gospel shall be read with aspersion.

The patient was looked upon as the direct representative of Christ, and was spoken of as Master or Lord, "*Domini nostri pauperes*," "*Les Signors malades*," "*Our Lords the Sick*," a very different form of address from the brutal terms of the eighteenth century, when they were spoken of officially as "*the miserable objects*."

The hospital consisted of a large hall (Fig. 7) ornamented with a high-pitched roof, a central louvre, beds in rows down the sides and in the centre, rather overcrowded to our ideas, with an altar raised a few steps at one end so that the patients could see the celebrant. The beds clean and neat, for there is a special order that they should be of sufficient breadth and length, and that the coverlets and sheets should be clean, separated perhaps by curtains, occupied certainly by two patients. This, however, was no hardship, because the proverb that "*Travel makes us acquainted with strange bedfellows*" is a remembrance of the time when it was usual for a person to share his bed with a stranger, and readers of literature even as late as the eighteenth century will recall many instances where the hero or the heroine has suffered loss at the inn where they have slept with a stranger who rose early and took the purse or the clothes of the heavier sleeper. Indeed, Sir



Sidney Waterlow used to tell us when we were house surgeons and complained of the inadequacy of the accommodation offered us by the hospital, that when he was an apprentice he shared his bed with two others and that he slept in the middle because he was the smallest. The use of wooden bedsteads which was universal at the time made the bugcatcher an important and useful person at every hospital. The services of the Church compelled the constant attendance of the religious by night as well as by day, and the sick were therefore never left without supervision.

The food was as good as could be obtained and seems to have been liberally supplied, whilst extras were allowed on a somewhat lavish scale. Of the food and the extras these two stories have come down to us. The first was a miracle wrought by Alfun, the builder of St. Giles, Cripplegate, whom Rahere, the founder of St. Bartholomew's Hospital had associated with himself when he felt age creeping on.

It was the manner and custom of this Alfun [says the narrator] with servants of the church to compass and go about the nigh places of the church busily to seek and provide necessaries to the need of poor men that lay in the hospital and what was committed to him truly to bring home and to sundry men as it was need to divide. And there was a certain butcher Goderyke by name, a man of great sharpness and he was a mean man, the which not only to the asker would not give but was wont with scorning words to insult them. It fell upon a certain day that Alfun went about the butchers man by man and after other when he came to this Goderyke and moved him after the apostle with good and honest words importunately, because he was not willing to give, and when the old man beheld that not for dread, neither for love of God nor also for shame he might not temper the hardness of that indurate heart he broke out in these words, "O thou ungentle and unkind man! I beseech thee wretch put away a little and swage the hardness of that unfaithful soul and take in experience the vertue of the glorious apostle, in whom if thou trust I promise thee that every piece of thy meat that thou givest me a portion of shall the sooner be sold to other and nothing to the minishing or lessening of the price." He, not moved with the instinct or inward stirring of charity but overcome with the importunity of the asker, drew out a piece of the vilest and cast it into his vessell calling them truants and bade them lightly go from



him ; to whom Alfun answered " I shall not go from thee, till my word and promise be fulfilled." And without tarrying there was a citizen coveting to buy flesh for him and his household and of that heap of the which Alfun spoke before he bought at the will of the seller and bare it with him. And when this was divulged through all the butchery it was taken for a worthy miracle. And from that time they began to be more prompt to give their alms and also fervent in devotion.

The story is a pretty one, and is so graphically told that one has no doubt of its truth. The old priest, with the hospital servants behind him carrying a large wooden begging bowl, going from stall to stall in the meat market ; the surly butcher, with the rest of the market looking on to see how Alfun would fare, the twinkle in the old man's eye as he knew that he had bested him ; and the breathless citizen, who wanted to buy the worst meat at the highest price, bring back the whole scene and makes one wonder whether a part of it had not been rehearsed by Rahere and Alfun, who must have retained some sparks of that spirit which in youth had made them court favourites.

The story about the "extras" is told of the Knights Hospitalers of St. John of Jerusalem. It is said that Saladin desiring to prove for himself the indulgence of the knights to their patients disguised himself as a pilgrim and was received among the sick at the hospital in Jerusalem. He refused all food, declaring there was only one thing he fancied, and that he knew they would not give him. On being pressed, he confessed that it was one of the feet of the Grand Master's horse. The Grand Master was told, and at once ordered the noble animal to be killed and the sick stranger's desire satisfied. But Saladin thinking the experiment had gone far enough declared himself taken with a repugnance to meat, and the animal was spared.

#### *Conclusion.*

And thus ends a very short account of an interesting period of medicine in England. It is impossible in the scope of a single lecture to give



more than a bare outline of the subject, but it has been my intention to show that there was a blending of the old and new during the fourteenth century. Wort-cunning, which still lingers amongst us at the herbalists, was the older Saxon leechcraft; spells were a reminiscence of the Danish rule; classical medicine was coming into vogue through the Arabic translations, and was brought to England from the schools of Salernum and Montpellier. Side by side with this knowledge, altering, modifying, and even creating, was the sturdy originality of the English mind. I shall have effected a part of my purpose this evening if this lecture induces some of you to go to the British Museum, to the university libraries, and to the cathedral libraries in search of the writings of our early predecessors which have escaped destruction but have never yet been printed. Such writings I believe to be numerous—some in Latin, some in racy translations, some in the original English in which they were written.



