Reviews in History

Published on *Reviews in History* (http://www.history.ac.uk/reviews)

Religio Medici. Medicine and religion in seventeenth century England

Review Number:
41
Publish date:
Sunday, 1 June, 1997
Editor:
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ISBN:
9781859283394
Date of Publication:
1996
Pages:
327pp.
Publisher:
Scolar Press
Place of Publication:
London
Reviewer:
Justin Champion

This is a timely collection of essays that sets out to address a key relationship in early modern historiography. Over the last decade the histories of religion and of medicine in the early modern period have developed a more conceptually robust demeanour embracing the achievements and examples of works like Keith Thomas? *Religion and the Decline of Magic* (1971) and Charles Webster?s *The Great Instauration* (1975). The examination of religion as a system of institutions, cultures and practices has been one of the important legacies of a whole corpus of historical writings upon the impact, consequences and nature of the ?English reformations? between the sixteenth and eighteenth centuries. Whether exploring and interpreting the impact of diverse Protestant theologies and beliefs upon the universities, the parishes, or the popular mentalité, historians of religion have become comfortable with exploring the nature, meaning and function of ?religion? in early modern historiography. This does not imply that yet there is any sense of a shared language of interpretation. ?Religion? to a Christopher Haigh or a John Morrill, or a Jonathon Clark or a Christopher Hill, may invoke very different, contradictory and perhaps radically incommensurable understandings of ecclesiastical institutions, patterns of belief, articulations of meaning, processes of communal identity, or discourses of legitimation. For some historians ?religion? is to be most readily identified with a traditional understanding of Christian faith: a complex admixture of doctrinal, ceremonial, liturgical and pastoral propositions and activities. To practice the history of religion is then to note and explore the levels of religious commitment by analysing the proximity or deviance from a standard of

established orthodoxy. It is then possible to ask how ?Protestant? or how ?Catholic? a community or state might be at any given time. Similarly such an approach might focus upon the doctrinal thought of particular key individuals - Bishops, scholars, or dissidents - interrogating such sources (diaries, sermons, theses, commentaries) for theological coherence, influence or sources. Another strategy has concentrated upon ?popular? religion, the beliefs and activities of the common people performed in the parish or the environment of the family. Exploiting sources such as Churchwardens accounts, probate inventories and even material artefacts historians have attempted to reconstruct the patterns and processes of the religion of everyday life. Commendable and exciting as many of these studies have been *au fond* many of them have taken little time to examine the conceptual premises of their investigations: still, some form of doctrinal Christian orthodoxy is adopted as the template from which to read off the ?success?, ?depth?, ?diffusion? of particular theological categories.

More recently, developing from the writings of two Cambridge historians in the 1980s, the study of religion has become more political. That is to say that on top of the rather diluted anthropological approach to the function of religion within parish communities derived from the exemplar of Thomas? work, a sort of political sociology has been grafted. So in the work of J.C.D. Clark it is possible to describe the relationship between religion and politics under the rubric of the ?confessional state?. With a similar intent the collection of essays edited by M.A. Goldie, and others, invoked the phrase ?the politics of religion? to identify the importance of the ecclesiological nexus between Church and State. If the anthropological tradition was interested in exploring (very crudely) the meaning that religion had for early modern society, those who emphasized the political dimensions of religion ultimately stressed the connections between religion and power. Exploring how orthodoxy was not simply a doctrinal or propositional programme but a form of authority empowered with coercive discipline such historical writings adopted a cautious relativism towards the ?truth? of any particular religious confession and instead explored how different religious communities and interests attempted to establish political dominance by, and through, religious conformity. Religion then was as much a system of administration, a tool of state formation or legitimation, as a generator of meaning and cultural order. Pastoral care was also a social system for establishing structures of social power.

These two developments in the historiography of religion and society in the sixteenth and seventeenth century have been broadly comfortable with each other partially because of the periodicity of their explanations. Most of those who explore the contours of popular religion in the parishes or the development of national religious identities focus on the period before the crisis in religious and political authority that was the English revolution of the 1640s and 1650s. The historiographical questions that haunt the precincts of sixteenth and early seventeenth century history (for example the still hardy perennials such as ?the impact of the reformation in the parishes?, ?the rise/fall of Calvinism/Arminianism?, or ?Protestantism and literacy?) seem to hold little appeal for historian of post-Restoration society. Those historians who write about the confessional state tend in fact to concentrate upon the period (c1660-1820s) when the authority of that structure of social power was fractured if not fragmentary. The anthropological approach to the study of early modern religion has tended to ignore the study of change in favour of an account of process and structure. Any examination of change is that of the modulations of religious ?style? within a broadly theological culture (i.e. high church low church, Laudian or erastian). Although the more political account of the relationship between religion and society, by chronological necessity, has to embrace the study of the changing nature of the religious system, it takes as unproblematic the power of Christian faith and belief.

Since the 1970s the history of medicine has similarly undergone rapid and impressive sophistication. Echoing the patterns of more mainstream historiography much history of medicine as practised in the 1950s and 1960s was teleological and Whiggish. If political and constitutional historians made a narrative around the rise of parliamentary institutions and the origins of political liberty, so historians of medicine sought out the foundations of modern medical science in an unrestrained and triumphalist manner. Just as political historians turned away from the centre to explore the articulation of ideologies and process in the localities, so post-Webster and Thomas, historians of medicine set about exploring the mentalités of the marginal and common sort. The experience of illness, the perceptions and emotions of patients, the networks of informal and ?unprofessional? healers have all received expert and intelligent investigation. Examinations of the

institutional and cultural performances of medical practitioners have been made, contextualising their relationships with broader social and cultural traditions. As a consequence of such historiographical revision the larger narratives of the ?rise of medicine? have been replaced by a different series of intellectual maps co-ordinated around themes such as the creation of a medical market place, the eclecticism of consumption of medical therapies, and an increasing interest in the relationship between medical knowledge, gender and understandings of the body. In effect medical historians adopted and adapted many of the agendas and strategies of social historians. This collection of essays represents both the best and the worst of some of these developments in the historiography of medicine and religion.

Religio Medici contains a variety of different approaches, methods and subject matters ranging from Adrian John?s study of the medical dangers of bible reading to Mark Jenner?s impressive examination of the connections between enthusiasm and ?quackery? in his exploration of the meaning of the cleric John Hancock?s *Febrifugum Magnum* (1722). There are also case-studies of individual medics (Thomas Browne, Francis Glisson) exploring the homologies between medical method and religious perspectives. In some cases, although the subject matter and material discussed is interesting, the historical product is unadventurous. Thomas Browne is a seminal and intriguing figure. Although Cunningham writes with verve and engagement the reader is not left with a clear understanding either of his religious convictions or their relationship with his medical understandings or practices. Giglione?s exegesis of Glisson?s hylozoistic anatomy is impressive and intelligent, but profoundly internalist in the sense that it fails to contextualise the implicit and explicit dangers of Glisson?s account of matter and body with contemporary reactions or ideas. On the other hand, Michael Hunter?s examination of Robert Boyle?s religious motivations for the publication of - ?the communication of secrets and receits in physick? - is a much more valuable example of the use of the individual case-study to explore the inter-reactions of religious conviction and medical commitment commendable because the author takes care to locate his subject within the broader cultural systems of his time, rather than simply assume that the importance of the individual and their contribution is a given importance. Similarly Guerrini?s informative account of the impact of Newtonianism on the practice and understanding of medical science in the eighteenth century illustrates how a careful reconstruction of the context and reception of individual systems of thought can illuminate broader structures of belief and action.

The collection also offers a brace of useful institutional studies. Michael Macdonald executes an expert overview of the career of astrological medicine in England taking the account up to the eighteenth century. A richly textured and beautifully written piece of work it locates much of his more extensive work on Simon Forman and Richard Napier in a longer trajectory bring much evidence to indicate both the social extent and longevity of astrological medicine in early modern society. Cook?s study of the personal beliefs of medics in the London College of Physicians from the sixteenth century to the eighteenth is less successful. Although it provides some useful information on the religious complexion of the College it is overly systematic: the statement that ?reviewing the first two centuries of the College?s life, one is left with the distinct impression that its Fellows reflected the religious views of learned English people generally? is hardly an insight. Attempting to account for the importance and role of ?religion? by constructing a demography based upon a taxonomy of labels (Anglican, Catholic, pro-dissent, conservative) is overly essentialist and reductive. Many of the more sophisticated historians of religion in the period are now uncomfortable with the application of religious categories as an accurate and descriptive tool: identification of theological positions was more commonly part of a pejorative rhetorical strategy aimed at disabling the public authority of an intellectual opponent rather than an impartial recognition of a individual?s beliefs.

A much more successful exploration of the intimate connections between the religious convictions of a group of individuals and their attitude to the role of medicine and the purpose of therapy can be found in David Harley?s typically learned and robust examination of the ?theology of affliction? in the late seventeenth century Godly families of the Henrys and Newcomes. Exploring the literary remains (diaries, sermons, commonplace books) of Henry Newcome and Philip Henry, both Presbyterian ministers, in the north of England, Harley delivers a forensic examination of the relationships between providential theology in the latter part of the seventeenth century and godly attitudes towards sickness and medicine. Introducing his study with brief but commendably thoughtful remarks about the methodological problems of establishing

homologies between belief systems and practices, Harley is careful to point out that careful and close case-studies are critical in such matters because, as he correctly indicates, ?there is no reason to suppose that religious groups were perfectly homogeneous since many factors other than theology? shaped attitudes to God and medicine. Harley shows how the Godly were, because of their ideas of general providence, able to exploit learned medical therapy to cure their ills. Although disease and death was a time for careful casuistical examination, remedies might also be provided by divine means. The key thing for the Godly was to avoid the ?sins of Asa?: the cures of cunning folk and magical medicine (those therapies, as Macdonald shows, which were keenly consumed by many in the period) were to be avoided. Harley?s contribution engages with the critical moments in the life cycle where sickness and religion might conjoin - birth and death - giving especially sensitive accounts of attitudes to the respective roles of sin and medicine in the understandings of deaths amongst children and the aged.

As Harley is aware the Godly were only one component of a religious culture, an alternative response to the problems of illness and affliction is discussed in Sarah Hutton?s elegant study of Anne Conway?s search for a therapy to cure her the headaches that had pained her since her adolescence. As Hutton explains, Anne Conway in turning to her doctor, Francis Von Helmont, and his pharmacopoeia also embraced his religious and philosophical beliefs. It was Conway?s experience of pain that prompted the development of her mature philosophy. Exploiting the two sources for the history of Conway?s illness (Thomas Willis *De anima brutorum* 1672, and her correspondence with Henry More) Hutton shows how her subject adopted an eclectic approach to her sickness. As Hutton puts it ?being a high class patient, [she] was treated by the top doctors of her age?. She also consulted healers like Matthew Coker and Valentine Greatrakes. The *Letters* give us ample evidence of the sort of cures she took: again the emphasis is upon diversity - tobacco, coffee, blue and red ?powders?, all sorts of ?oyntment?, baths, bloodletting, mercury, and a variety of amulets and stones. Conway?s encounter with Van Helmont led to a revision of commonplace ideas of Christian providentialism to a more cabalistic accommodation of the suffering of the Godly with the goodness and justice of God.

As well as exploring individuals and institutions the collection also includes essays on the nexus of religion and medicine in moments of crisis and contestation. Ole Grell takes the opportunity to examine the debates and battles between Helmontian and Galentistic therapies in the crisis year of 1665 when plague struck London with a ?dreaded vistation?. Although Grell gives an informed and engaged account of the pamphlet battles between men like Nathaniel Hodges and George Thomson, teasing out the different therapeutic and philosophical debates, he does not locate these disputes within the context of the politics of religion that convulsed early Restoration London. Grell undertakes a detailed and acute account of George Thomson?s dissection of a plague victim discussing the connections between Helmontian physic and Christian piety, but this is not anchored in any discussion of religio-political meaning of the work. Grell, focusing upon Thomson?s dedication of his work to Gilbert Sheldon, Archbishop of Canterbury, mis-characterises the eirenic thrust of his subject?s polemic. It is not possible to characterise Sheldon as patron of an ?eirenic, non-dogmatic Protestantism which sought to unite the sects within the Church of England, espousing a ?liberal? Arminian theology?. Recent work upon the Restored Church of England, and particularly the study of Gilbert Sheldon and the London Vestries made by Paul Seaward, argues that Anglicanism in general, and Sheldon in particular, was far from eirenic in its almost brutal pursuit of religious conformity. Although the Arminian theology of the Church of England may have been ?liberal? in theological terms (say compared with the supralapsarian stance of some Calvinist confessions) it was a assiduous persecutor of non-conformity whether Catholic, Protestant or Enthusiastic. Thomson?s concern with excluding deviant medical therapies was intimately bound up with his theological orthodoxy.

The exemplary essay in the collection is Simon Schaffer?s ?Piety, Physic and Prodigious Abstinence?, a study of the spectacular fasting and pious conversion of a young Derbyshire woman, Martha Taylor between 1667-69. Addressing the bigger themes of the relationship between testimony, natural knowledge and religious power, Schaffer locates the case of Martha Taylor in the wider context of the epistemological foundations of social power, critically the relationship between priests, physicians and the laity. Contemporary accounts of Martha Taylor?s ?prodigious abstinence? were issued in a range of forms by

various publishers: the precise meaning of her case as a spiritual and physical event was contested by a variety of religious and medical interests. For some Taylor?s fasting was angelic, for others fraud, for still further interpretations it was simply a medical condition. As Schaffer shows a range of different medical and religious perspectives attempted to capture the public meaning of Taylor?s experience. Quakers, a sect experienced in the demonstrative strength of regenerative bodies to endure fasting, attempted to interpret Taylor as a sign of the remarkable workings of the inner light. Presbyterian publicists like Thomas Parkhurst and Thomas Robins tried to shape her story ?in favour of reformed religion and against extreme spiritual illumination?. John Reynolds, presbyterian minister and medic, attempted to disable rival claimants to Taylor?s meaning by arguing that her abstinence was neither supernatural nor physical but chemical and providential. Other medical men demanded access to Taylor?s body, even Thomas Hobbes insisted that the matter could only be explained by forensic examination to know ?the certainty?. It is Schaffer?s point that each of these different perspectives attempted to use Taylor?s body and its meaning to legitimate or disable rival authorities: such processes of cultural legitimation, although ultimately textual, were intimately connected with matters of political order and power.

It is surely part of Shaffer?s wider intention to indicate not which interpretation of Taylor?s abstinence was more effective or accurate but to highlight the culture of contestation and testimony in Restoration society. These are lessons that historians of medicine and religion in this period might usefully adopt in future studies. The claim to true religion, like the claim to powerful medical therapies, was a critical cultural process for generating social authority. Treating the rival truth claims of particular religious confessions in a purely epistemological manner, eschewing a sociological understanding, might confine the historian to treating ?religion? or ?medicine? as real phenomenon rather than made resources of authority. Writing about ?Calvinism? without exploring the public and institutional consequences of such theologies might result in an acute understanding of theological positions but does not enable the historian to an understanding of the historical meaning of such claims. Similarly with medicine, researching the history of anatomy, or chemical medicine without locating the discourses within the broader infrastructures of cultural and political authority, will result in scholastic but ultimately uninstructive (historically at least) studies. Many of the essays contained in this collection have taken as unproblematic the categories of religion and medicine and simply tried to read off, or match up, different aspects of individual or institutional expressions of either of these forms. Thus religious expressions might be considered as epiphenomenal expressions of a more determinative medical system; or *vice versa*. Similarly embedded in many of the essays lies an unarticulated teleology: that somehow religion was being replaced by medicine, that soteriology was displaced by welfare (providentialism supplanted by understandings of risk). Many of the conceptual problems that underpin the collection also bedevil the wider historiography. Medicine, science, politics, religion, state, society are very commonly treated as discreet discourses that structure historical enquiry. Each discreet discourse has its own narrative, epistemology and intellectual agenda. Perhaps a more fruitful and profound enquiry might attempt to breach these discursive fences and explore the histories of conviction, beliefs and bodies in a more flexible way. Perhaps an example might illustrate these suggestions. One place where religion and politics, medicine and bodies, authority and therapy neatly converge and converse is in the performance of the Royal Touch. The divine authority of Kingship melded with the apostolic rights of the orthodox true religion in the form of the Church of England. Scrofula was an illness that required therapy. Men and women other than monarchs claimed to cure the disease. Medical treatises described and explained both the disease and the cure. An historical enquiry that attempted to explore the history of the royal touch from a variety of competing and converging perspectives (for example, as a matter of ritual and religious conviction; as a representation and performance of authority; as a medical therapy; as a contested form of healing; as a process of civil and religious discipline) might be able to bring the histories of medicine and religion together in an exciting and intellectually coherent way.

1 See for example, a different ends of the chronological period, C. Haigh English Reformations. Religion Politics and Society under the Tudors (Oxford, 1993) and J. Spurr
The Restoration Church of England 1646-1689 (Yale, 1991)
2 See for example the essays in J. Morrill The Nature of the English Revolution (London, 1993)
3 See for example J.C.D. Clark English Society 1688-1832 (Cambridge, 1985)

4 The works are too manifold to single out any particular volume.
5 See footnote 3 above.
6 See T. Harris, P. Seaward, M.Goldie (eds.) The Politics of Religion in Restoration England (1990).
7 For some suggestions towards these understandings see
the work of Michael Braddick The Nerves of State
(Manchester, 1996) and his forthcoming synthetic account
of social power in the early modern period.
8 For an accomplished survey of the more recent contributions to medical history see D. Harley `Anglo-American perspectives on Early Modern Medicine: society, religion and science' Perspectives on Science 4 (1996) 346-386.
9 See his essay contribution to The Politics of Religion in Restoration England.
10 The research student Mark Gosbee (Royal Holloway College, University of London) is currently undertaking the groundwork for such a project under the joint supervision of Professor Roy Porter and myself.

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[2]

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