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Ancient medicine, humanistic medicine: the Renaissance commentaries of Galen, transmission and transformation of knowledge

The sixteenth century was a period of “rediscovery” of the Greek language, philosophy, literature, science and medicine in Western Europe. Learning Greek was first of all intended for shifting the focus of religious conceptions through a personal approach to the original text of the Bible in accordance with the principles of the Reformation, but all Greek texts, first of all the scientific and medical ones, took advantage of this new situation. Galen’s treatises, regarded as a fundamental part of medical education, had already been translated into Latin, commented and included in the university curricula of the Middle Ages. Yet there were new translations and commentaries by Renaissance humanists, who knew Greek and were able to read Galen “in the original”, and who regarded themselves as heirs of the ancient Greek medicine: transmission through translation and commentary became a part of a “continuum”. The purpose was to facilitate the study of these treatises by students whose knowledge of Greek remained inadequate.

Our study will focus on two commented editions of Galen’s De morborum differentiis/causis, De symptomatum differentiis/causis. The first one (Lyon, 1540) contains the Latin translation by Guillaume Cop and the commentary by François Valleriole, a French physician of Arles. The second one (Paris, 1550) contains the Latin translation and commentary by the German humanist Leonhart Fuchs. Our first purpose is to compare the two translations, the one of Cop and the one of Fuchs, in order to study the relationship of each translator with the Greek language. The second purpose is to compare the two editorial projects, including the attitude of Valleriole and Fuchs toward Medieval, mostly Arabic, tradition. The third purpose is, by using passages about for example birth and young children, the role of women, or the excretion process (evacuation of “superfluous” substances), as well as passages relating the personal experience (practice of medicine), to point out how those humanists, who were medical teachers, physicians and learned men as well, (re)shaped and adapted ancient medical knowledge, continuing and renewing the doctrine of Galen. Also to point out how they switched code from medical to social or moral concerns.

1. Let me introduce the three characters of my story, in chronological order

The first one, Guillaume Cop (or Copus), 1450-1532, was born in Basel, but he spent almost all his life in France and took an active part in the French humanistic movement: as a teacher, teaching medicine in French in Paris, to “barbers-surgeons” included, and thus being in rivalry with the Sorbonne authorities who forced him to cease this activity; as a court physician; as a friend of leading figures of the French humanism, such as Guillaume Budé or Lefèvre d’Étapes; as an active contributor to the foundation of the Collège Royal (nowadays Collège de France; e.g. when he tried to convince Erasmus to come to Paris and join the team), founded in 1530 by François 1er, in order to minimize the influence of the conservative Sorbonne and promote new languages such as Greek and Hebrew. Copus’ translation of Galen and of other medical treatises (Hippocrates, Paulus of Aegina) is a faithful one, but also a Latin text emancipated from its Greek original, a regenerated language.

The second one, François Valleriole (1504-1580) is a commentator using the translation of Cop. He was born in Montpellier, where he studied medicine, and he spent almost all his life in Arles, a city in the south of France, as a practicing physician. At the age of 70,
he became a professor of medicine in Torino. Studying medicine in Montpellier undoubtedly played an important role concerning his interest in Galen, as well as in Arabic treatises which he seems to know fairly well: Galenism has been developed since the Middle Ages, thanks to Arnaldus de Villanova\(^1\) (1240-1311) who, as a university rector, introduced the concept of “the new Galen”, a rationalistic and scientific approach to medicine through the study of some 35 works either written by Galen or attributed to him, and an Arabic medical corpus (Avicenna, Rhazi, Al-Kindi, Averroes). Valleriole is a man deeply rooted in his region, without being a “regionalist”. It is one of the characteristics he shares with Leonhart Fuchs.

The German Leonhart Fuchs (1501-1566), born in Tübingen where he spent almost all his life teaching medicine in the university, is a Hellenist and a Hebraist, taking an active part in the Lutheran Reformation where ancient languages had to be a part of the theological education, of the new religious ideas. He is well known as a botanist, being regarded as the father of the modern botany, as an anatomist, introducing the anatomy of Vesalius in Germany (1551 Epitome de Humani corporis fabrica ex Galeni et Andreae Vesalii libris), and as a polemist, like Galen: vehement against his fellow humanists (e.g. Cornarius furens 1538), but above all against Arabs.

2. Comparison of the two translations, Cop and Fuchs

Despite the fact that the image of a “universal” European culture, across the borders of countries, sounds like a fairly idealistic concept, it cannot be denied that the Renaissance humanists in France, Germany or Italy shared similar cultural and scientific concerns, traveled all over the continent in order to communicate with other scholars or teach in the universities, and thus developed a more “open” concept of science and culture. They shared two languages as well: Greek, which they wanted to “bring back to life”, and Latin as a lingua franca in order to facilitate exchanges. What is interesting to examine here is the evolution of the relationship between those two languages in the course of time: in the beginning and until the middle of the 16\(^{th}\) cent., there was hope of a potential generalization of Greek, which was supposed to become a common scholar language; Latin was regarded as “inevitable”, because the majority of students (and even scholars) did not yet know Greek, and therefore translations from Greek to Latin were necessary; as the time went by, things changed partly because the influence of vernacular languages increased, and partly because there was no generalization of the influence of Greek. All students were not able to study Greek texts “in the original”. Greek remained a “learned” language, and Latin did not disappear.

Both translations are faithful to the Galenic Greek text, but each translator has his own way to transmit text and therefore ideas.

Cop is producing a really new text, which does not remind us of the Greek original, which is the case with Fuchs’ translation. This can be noticed firstly by examining syntax: Cop makes frequent use of subordinate clauses, of what is called, according to the Aristotelian rhetoric term, a “periodic” style, κατεστραμμένη λέξις, while Fuchs remains close to the Greek parataxis, εἰρομένη λέξις. Secondly, their stylistic particularities shed light on their different approach (or appropriation) of the Greek

text: stylistic devices such as litotes or periphrasis make the text of Cop more “literary” and less austere, more pleasant for the reader, even if the result is somewhat far from the original Galenic text. Fuchs’ style is extremely simple, unadorned, perhaps because he is more interested in correcting the Greek text of the Aldine edition, or because his milieu is less concerned about reflections on language.

On the one hand the result concerning Cop is an autonomous Latin text, which adapts Galen without betraying him, and which, according to my experience as a translator, would be more helpful if we want to translate Galen into French. The translation of Cop can also be regarded as a part of a broader humanistic concern about the transition from Greek to Latin and from Latin to vernacular languages, a reflection prompted mostly by the French poets of the Pléiade. On the other hand, Fuchs’ translation, even if his Latin can be read independently without being a “carbon copy” of the Greek text, shows less linguistic and more textual concern, and tends to stress medical education: translation as a tool for doctrine and practice, Galen as the authority medical students must lean on. Some examples:

(Tables 1 and 2)

3. Two editorial projects

The examination of Valleriole’s and Fuchs’ dedicatory epistles and prologues, as well as some of their intertextual references in the commentary, sheds light on their aims as translators and commentators, as humanists and learned men, in the framework of the Western Renaissance.

A more or less exhaustive survey of their statements produces first of all the traditional humanistic topics as common ground between the two editorial projects.

Both humanists are looking for “truth”, veritas, and want to stimulate all the veri studiosi in this search. “Truth” stems from ancient texts, literature, philosophy, medicine, that is why the continuity of learning is so important, and the role of Galen instrumental. Translating and commenting has also a pedagogical goal: Galen must be within reach of anyone who wants to study medicine; students ought to regard his treatises as a major part of their education. It is important to make the right choice: the one of study instead of social whirl, power and glory.

Their principal differences:

According to Valleriole, new, improved commented editions of Galen are needed, the existing ones being insufficient in quantity and quality. Fuchs insists on the Greek sources: he encourages his reader to collate Greek manuscripts and editions. Valleriole wants to turn his own spare time to advantage for the community: as the past winter was fairly clement, he spent less time healing patients than studying ancient medicine. It is time to share his learning with his readers. Fuchs warns scholars and students against the “noxious” influence of Arabic medicine, and the errors of Arabic translations and commentaries. “Arabic” means “Latin” translations, made “in the past” by scholars who did not know Greek. “At the present time”, according to Fuchs, “Arabic” texts must be rejected, as Greek ones are available. Fuchs thus prepares his reader for a personal approach to the Galenic text: the translator is a mere “mediator” or “facilitator”. Valleriole puts forward his pleasure as a commentator and a scholar. Sharing pleasure is as important for him as sharing learning.
3. 1. How does the editorial project work in the field of words?

Both commentators provide a lot of terminological explanations, which is fairly common for any commentary. As they address readers who were supposed to be less familiar with Greek than with Latin medical terminology, they both explain Greek terms, frequently printed in Greek in the commentary, by giving the Latin equivalent (word or periphrastic explanation). Valleriole systematically appeals to Arabic terminology (*Latin Arabic*), in some cases Averroes, but mostly Avicenna whom he seems to know very well: he makes precise and sometimes detailed references to his treatises. Valleriole had studied in Montpellier, where those treatises were a part of the medical *curriculum* and continued to be studied for a long time after their introduction by Arnaldus of Villanova in the 13th cent.

Instead of trilingual terminology, Fuchs leans on lexicographical or encyclopedic authorities in order to give useful details about words: he frequently refers to the *Souda* or to what he calls “Phavorinus”, the Greek lexicon (1523) by the Italian Hellenist Favorino Varino (or Guarinus Camers, 1450-1537). But the most important point for him is the emendation of the Greek text. He corrects some errors discovered in the *Basileensis*, the Aldine edition of 1538 in which he took part. A parallel can be drawn between Fuchs and Niccolò Leoniceno, the first Latin translator of those four Galenic treatises: they are both interested in philological issues.

The peculiarity of Valleriole in discussing Greek and Latin is that he regards as “ridiculous” a preference for the Latin term, when the Greek one is available even in Latin: he gives advice to the reader/student/scholar in order to make the accurate choice, e.g. in the case of “trembling” (*rigor, not horror*), “mania” (*mania, not furor*), “symptom” (*symptomα, not accidens*).

3. 2. How does the editorial project work in the field of ideas?

3.2.1. Attitude towards tradition

Valleriole refers frequently to the Arabic tradition, not only through terminology, but also in order to comment on doctrinal points. He does not reject this medical or philosophical tradition; he sometimes considers it to be instrumental in comprehension. After a survey of those references, too many to be cited here, we notice that the Arabs are complimented when they agree with Galen: they share the same logical method, the same doctrine about the mix of the four elements, they condemn drunkenness etc. In case of disagreement, the Arabs are criticized more or less severely; the advantage goes to Galen: Avicenna makes an error concerning the attraction of the healthy part of the body by the weak one (the right Galenic statement is the opposite one); Averroes misjudges Galen, pretending that he does not refer to cases of dangerous menstrual flow; Rhazi “is not ashamed” to claim that Galen’s doctrine about the decrease of the pupil (provoked by both dryness and moistness) is false.

Fuchs’ anti-Arabic statements are fairly well known. Yet he scarcely refers to Arabic terminology or doctrine in his commentary, criticizing it, but with less vehemence than in his epistle and prologue. Arabs are “noxious” not only because of their bad translations and erroneous doctrine, but also because they represent the Medieval “past” and the “Oriental” threat. The continuum from Greece to Renaissance excludes Arabs, as
if their translation movement never existed, as if they were completely ignorant of Greek manuscripts and texts. The linguistic and doctrinal errors of the Arabs are detailed in his Paradoxa medicinae (ed. 1535 and 1555).

3.2.2. Medicine and society, medicine and morality

Valleriole has been an active physician all his life. Therefore, it is rather frustrating to have so scarce references in his book concerning medical practice. Perhaps he does not want to "glorify" himself: glory, medical skill, achievements belong to Galen. Perhaps this scarcity matches with the nature of the treatises he is commenting on: the principal theme is nosology, not method of healing. There are, however, at least three relations of personal experience worth noticing: Galen thinks that there are some very rare occasions of healing fatal wounds of the head, and Valleriole refers to an old woman of Avignon healed by him; Galen explains “hot” diseases such as sunstroke or fever, and Valleriole refers to the Tullensis episcopus he healed; the relation about diseases of the “authoritative functions” (τῶν ἡγεμονικῶν) gives Valleriole the opportunity to remind us the “handsome and kind young girl of good morals” he healed.

What is not personal medical experience but personal interpretation of the Galenic text and code switching from medical to moral pertains first of all to women, who are “naturally” to be kept under surveillance. We notice that Valleriole, but also Fuchs, switch the tone of the commentary according to what is at stake. Children, women and maternity are serious concerns that need attention.

Galen (7, 27-29) warns against malformations of infants and young children, and gives advice on how to avoid them. He points out the responsibility of midwives and wet nurses whose duty is to take care of those “fragile” and “moist” little human beings. As medical (or paramedical) professionals, midwives must acquire skill in order to correctly receive the newborn child at the very moment of birth. Nurses and wet nurses must learn how to swaddle carefully, especially girls. Valleriole’s recommendations are not about professional skill: he addresses parents and gives them a list of criteria for the “good wet nurse” (a healthy and a virtuous one), but he contradicts himself, because he first of all recommends maternal breast feeding, considered to be a moral obligation for all women of good physical condition. A “bad” wet nurse (morally reprehensible) transmits “bad” morals by means of her milk. Concerning swaddling, Valleriole gives no advice, but makes some references to Christian authors (Prudentius, Jerome, Augustine) who criticize women’s appearance, artificial beauty: it is a plea in favor of female simplicity. Fuchs also criticizes ridiculous feminine appearance due to bad swaddling by wet nurses: he refers to Roman comedy (Terence), in order to mock women’s lack of femininity (a young girl who is like a pugilist).

Galen’s issue is about how to avoid women’s “bad humors”, especially in the period of pregnancy when they suffer from deprived appetite (the disease called pica, κίττα/κίσσα, 7, 133), his advice to be careful about what to eat, and his explanation about how to prevent the embryo’s dyscrasia resulting from the deposit of “superfluities” (περιττώματα) in two membranes and from “abnormal” maternal food drawn into its veins. Valleriole’s issue is a caveat (cum Galeno duce cavendum): according to him, pica is an exclusively feminine disease; women affected are compared to chattering birds “pica, garulissima aves” or to the parasite plant called κισσός (ivy). Women do not seem to be aware that their bad nutritional habits (when they chose food according to their pleasure) compromise the health of the embryo, “an innocent creature which cannot
imploring help". Women are suspected of yielding to their own desire and pleasure, and not accomplishing their maternal duty.

Galen’s issue about “nature” and “causes of symptoms that are contrary to nature” (7, 148) is a typical medical one. Later on (7, 208-209) he examines troubles of digestion due to “excessive amount of food and drink, or abnormal quality, or inappropriate time or improper order”, and explains the term “improper order” by giving some examples of food taken “in disorder”, and “inappropriate time”: “apples and pomegranates first, and vegetables with olive and fish oil last”, breakfast taken in the early morning “before the previous food had been properly passed on”. Valleriole insists on damage caused by an excessive way of life. He comments on the Greek aphorisms “know thyself” (γνῶθι σεαυτόν) and “nothing in excess” (μηδὲν ἄγαν), and addresses directly the reader, tu, who must be conscious of the “fragility” of the human body, whose health can only be preserved by means of a healthy life. He switches again to moralizing remarks against laziness, greed, and vice that provoke diseases. His vehement criticism of gluttony and intemperance targets all those people who spend their time in ientaculis, compostationibus, prandiis, merendis, coenis, antecoenis, et comissionationibus. Such behavior not only causes diseases, but also divine hatred, regarded as a transgression of (an infringement on?) the rules of Christian temperance.

Two Galenic issues give the commentators the opportunity to refer to juridical and everyday life. The first is the discussion of hernias (of the omentum, intestinal: ἔππλοκήλη, ἐντεροκήλη). Fuchs, like Galen, explains the term vinculum (hindrance), the vinculum of the genitals as trouble of fertility (men are “unable to send forth the sperm directly”). But he does not limit himself to the merely medical aspect: his concern is about adoption as a juridical process. He distinguishes spadones, who are allowed to adopt because they can have children if healed, and castrati who are not allowed. The Latin jurists (Ulpian) use the term spado for all, castrati, thilbiae and eunuchs, which is an evidence of their ignorance, because, from a medical point of view, the cases are different. Greek juridical texts are of great help in order to re-establish adoption rules. Adoption is not the point in Galen.

The excretion process (evacuation of the superfluities, περίττωματα) produces different kinds of wind (7, 241-242). If the physician is “perspicacious” and is well practiced in hearing, the sound produced by the wind shows the way of the περίττωμα through the body, which is useful for diagnosis: the sound can be a gurgling; it can also be “impure”, like the one of the τυμβαῦξα, the funeral musicians. Valleriole comments on those sounds, both of them connected with everyday people, everyday life: gurgling has a comic effect, underlined by the reference to Plautus’ Olympio (called “Parasitus” by Valleriole), whose “inside is grumbling with emptiness”. The “impure sound” is also produced by “our music instruments with the Greek name tymbala” (sic for cymbals). Their sound is “obscure but loud”; the plebeians in Valleriole’s native city, Montpellier (plebei apud Monspessulum) play this music, accompanied by flute, when they perform (street) choral songs and dances (choreas et saltationes). There is no criticism against those performances, only a slightly condescending connotation of the word plebei.

**Conclusion**

The translations and commentaries of Galen in the Renaissance are first of all pieces of erudition, witnesses of a period of linguistic and educational concerns not only in the field of medicine, but also in the field of ideas. The translators and commentators
rediscovered and adapted Galen, acting as mediators, as *amatores* of the *veritas*, aiming for a development of critical thinking in reading ancient sources. They are conscious that personal approach of those sources is indispensable for further reading and comprehension, and encourage students and learners not to limit themselves to the mere role of followers. Their criticism (somewhat vehement) of the Medieval, including the Arabic, tradition evidences that studying ancient knowledge was also an effort for or a process of emancipation.

However, translations and commentaries are not merely witnesses of an epoch or of learned milieus. Tone switching from medical to social and moral concerns shows that the Renaissance humanists wanted to take part in debates, beyond diagnosis, prognosis, and therapy. Reading those commentaries shows that medical “art” is not neutral, it can be controversial: medical precepts promote ideas, concepts, and practices. As far as I am concerned, it would not be anachronistic to consider that those precepts put forward by humanists can be regarded as current nowadays. Medicine and society are always in dialogue. That is why I think that the physician-learned man of yesterday and the physician-technician of the present day have much to exchange, and to benefit from each other.

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