Early Vernacular Medical Advice Books and their popular appeal in early modern Italy¹

The advent of print triggered in Italy, as in many other European countries, an explosion of medical publications in vernacular languages which provided advice on a range of health related issue: how to live a healthy life, conceive and give birth safely, recognise medicinal herbs and make efficacious medicines. This paper focuses precisely on the appearance of these texts in Italy and on the phenomenon of vernacularisation of medical advice they set in motion and which lasted for about two centuries. I use the word 'vernacularisation' to refer not simply to the language in which these books were translated or written for the first time but to the accessible manner in which medical information was presented, both at textual and formal level, and therefore to the appeal these texts exercised on people who could not read Latin and had no familiarity with academic books, including the vast landscape of non Latinate medical practitioners. Indeed, not all the health-related books published in the vernacular were equally successful and widely read, the vernacular language per se was not, I shall argue, a sufficient element to make a book popular.³ Factors such as the quality of the prose and the complexity of the argument, the visual and physical features of the book, as well as the identity of its sponsors and of its real or alleged authors also played a role. Some of these variables are occasionally mentioned by scholars to explain the popularity of individual titles but this kind of analysis remains accidental and patchy. In this paper I propose instead to reflect more systematically on the relative significance of the various elements that might have had a bearing on making a medical advice book appealing to a large audience. The underlying assumption is that specific textual genres present distinctive characteristics and these also change over time in their own ways and at their own pace, rather than according to trends pertaining to book production as a whole.

¹ A first version of this paper was presented at the Max Planck Institute for the History of Science, Department 2 Seminar, in March 2018. My thanks to the participants for their comments.

² Mary Fissell's work in this field has been foundational. See her 'Readers, texts and contexts. Vernacular medical works in Early Modern England', in R. Porter (ed.), *The Popularisation of Medicine* 1650-1850 (London: Routledge, 1992), pp. 72-96; 'The marketplace of print', in Mark Jenner and Patrick Wallis, (eds), *Medicine and the Market in England and Its Colonies c.1450-1850* (Houndmills: Palgrave Macmillan, 2007), 108-32; 'Popular medical writing' in J. Raymond (ed.), *The Oxford History of Popular Print Culture*, vol 1: *Cheap Print in Britain and Ireland to 1660* (Oxford: Oxford University Press, 2011), pp. 418-31.

³ This expands the definition of the term offered by W.Crossgrove, 'Introduction' to the issue 'The Vernacularization of Science, Medicine, and Technology in Late Medieval Europe', *Early Science and Medicine*, 3:2 (1998), pp. 81-87, p.81.

Through this focused analysis I hope therefore to put forward a number of hypotheses concerning the distinctive elements and patterns of change that characterise the vernacular medical advice book, and provide a platform for further future research.

1. Typologies and novelty of the early medical advice literature.

What forms did the vernacularisation of medicine take in Italy and when did it begin? In the existing scholarship we encounter ingrained assumptions concerning the composition and chronology of these publications that are in need for revision. They concern in particular the alleged prominence of recipe books within this genre and the novelty they represented. Following the publication of the very influential *Science and the Secrets of Nature* by William Eamon (1993), disproportionate attention has been paid to the collections of recipes that, according to this author, started to be printed in Italy in the 1520s, to then acquire greater impetus in the second half of the century.⁴ Described as eminently practical, these texts allegedly granted non specialist readers access to previously exclusive medicinal knowledge, allowing them to manage their health more directly. In line with this view, the self-contained recipe book that enjoyed much fortune in the country from the 1550s onwards is unanimously seen as the most common form of medical advice literature printed in early modern Italy.⁵

In reality, this literature was much more varied: the distribution of titles by type demonstrates a prominent presence of other two groups of texts: regimens of health and herbals. The former are works which contain recommendations about how to live a healthy life through a correct management of the six Non-Natural things on which health was seen to depend (the air one breaths, food and drink, sleep, exercise, evacuations,

⁴ W. Eamon, Science and the Secrets of Nature. Books of Secrets in Medieval and Early Modern Culture (Princeton: Princeton University Press, 1994), p.127.

⁵ See for example, Miriam Rita Policardo, 'Segreti in piazza: la letteratura dei segreti in alcuni testi del XVI secolo', in *Lo scaffale della biblioteca scientifica in volgare (secoli XIII-XVI)*, ed. Rita Librandi and Rosa Piro (Firenze: Sismel - Edizioni del Galluzzo 2006), pp. 423-38; E.Renzetti and R. Taiani eds, *Provato e certo: rimedi secreti tra scienza e tradizione* (Fondazione Museo Storico del Trentino, Trento 2008); M.Ray, 'Impotence and corruption: sexual function and dysfunction in early modern Italian books of secrets', in S. Matthews-Grieco ed., *Cuckoldry, Impotence and Adultery in Europe (15th-17th century)* (London: Routledge, 2014), pp. 125-26; Massimiliano Celaschi and Antonella Gregori, *Da Girolamo Ruscelli a Alessio Piemontese. I Secreti dal Cinque al Settecento* (Manziana: Vecchiarelli, 2015).

and emotions). The latter group is represented by natural history books. Usually reductively called herbals, they often provide detailed information on the medicinal virtues not just of individual plants but of other *naturalia*, i.e. minerals and animals, as well as foods. These two genres match and often exceed the fortune enjoyed by the collections of recipes studied by Eamon, both in terms of number of editions and length of presence in the market: indeed, apart from the celebrated *Alessio Piemontese* (which was still reedited in the 18th century, having had around 40 editions in Italian between 1555 and 1683), no other recipe book was re-issued as many times as regimens such as Durante's or food guides such as Pisanelli's (36 and 30 editions respectively between the 1560s and the 1680s), and had such an enduring fortune. The often cited popularity of the other bestseller among recipe books, the *Dificio di Ricette* (1525), was in fact limited to the 30 years following its first publication, after which this title disappears from the market.

The health advice literature was therefore a much more composite textual genre than often assumed. Moreover, it presents noteworthy examples already in the first decades of the introduction of print. In this period, the sub-genres I have briefly described above often appeared collated in the same publication rather than as self-contained books. Indeed, the first printed health advice texts were often compendia that included, in different combinations: a health regimen; information about the medicinal virtues of plants and other natural elements; recipes to treat all sorts of specific ailments, as well as prognostic recipes. In addition, these compendia may contain sections on other aspects of medical knowledge, such as: urinoscopy, phlebotomy, conception and reproduction, anatomy and physiognomy. The majority of the titles that achieved the status of bestsellers already as incunabular editions or in the first years of the 16th century fall in this category. In some cases the text's publishing success continued well into the 17th century: the 23 re-editions of the *Libro de homine/Il Perché* - a substantial publication consisting of a detailed health regimen (Book 1) and an equally thorough examination of the human body and its ailments from head to toes (Book 2) - stretched from 1474 to 1678. Likewise, the 1482 pseudo-Albertus Magnus De le virtu de le herbe, & animali & pietre, a treatise on the virtues of natural elements and on astrological influences,

⁶ On this specific genre see S.Cavallo and T.Storey, *Healthy Living in Late Renaissance Italy* (Oxford: Oxford University Press, 2013) and our contributions to our edited volume *Conserving Health in early Modern Culture: Bodies and Environments in Italy and England* (Manchester: Manchester University Press 2017).

⁷ I have counted 16 editions between 1525 and 1553.

which also contains a range of medicinal and magical recipes, counted 11 incunabula editions, and then another 27 in the next two centuries (1502-1667).8 In other cases, the fortune of the title was significant but short-lived, as in the case of the anonymous *Cibaldone*, a slim pamphlet of just 16 carte largely centred on the value for health of various foodstuff (but containing also a short regimen and brief sections on medical therapy, bloodletting, sex and baths). Its 14 editions concentrated in the period 1472 to 1500.9 Likewise, the incredible popularity of the *Recetaro de Galieno* was largely limited to the 16th century (38 editions between 1508 and 1591 but only seven in the following century). This compendium contains separate sections on how to read urine and when it is better to perform phlebotomy, and a regimen by month; its bulk, however (24 out of 44 pages), is represented by medicinal recipes.

Already in the early decades of print, therefore, early modern people could acquire considerable medical information in a widely accessible language through this new medium. And recipe collections, far from being a new genre first emerging in the 1520s, were already a component of some of these texts. Moreover, the medical notions conveyed by this litertature did not consist solely of practical instructions. The shortest compendia were inevitably eminently prescriptive and devoid of explicit theoretical elements. Others, however, like the already mentioned *Libro de homine/Il Perché*, offered readers considerable insights into human anatomy and humoural physiology, as well as a wealth of physiognomical observations. Reminiscent of the learned tradition of the quaestio but expressed in a non-academic, matter of fact style, this intriguing text provides a rationale for the different somatic characteristics of humans, for the functioning and various pathologies of the body and for the effects of the environment upon health and physical appearance. These contents suggest that the early vernacular medical literature did not simply serve utilitarian purposes, as often assumed. 10 It also satisfied the intellectual demand of ordinary readers who wished to know the why as well as the how, as we will also see later. Such guest for knowledge was stimulated by the growing thirst for natural curiosities and for insights into the mysteries of the human body that characterises

⁸ These editions greatly varied in composition, I.Draelants, *Le Liber de virtutibus herbarum*, *lapidum et animalium (Liber aggregationis) Un texte a success attribué a Albert Le Grand*, *Micrologus Library* 22 (Florence: Sismel, Edizioni del Galuzzo, 2007) lists all the variants.

⁹ For a full discussion of this text see the article by Minuzzi in this issue.

¹⁰ Eamon insists repeatedly on the practical, technical character of the scientific/medical vernacular literature. See his *Science and the Secrets of Nature*, esp. pp.95, 116, 126-132.

the period.¹¹ And indeed texts like *Il Perché*, articulated around 586 curious questions, might also have acted as a tool supporting forms of entertainment and witty conversation that affected people's medical culture in a broad sense.¹²

Worth noting is also the presence, in many of these early texts, of health matters that will soon become the realm of the expert, such as those pertaining to the sphere of conception and reproduction. The early vernacular medical literature was in fact quite open about sexual life and generation. One telling example is represented by the treatise 'The secrets of women and men' that, from 1537 to 1570, we find collated with the pseudo Albertus Magnus' *De le virtu de le herbe*, & animali & pietre. Made up of 14 chapters, the treatise contains explanations of the reproductive physiology of both men and women, as well as recommendations on how to favour conception and how to predict the sex of the child.¹³

Interestingly, this section was suppressed after 1570, i.e. at a time when the first Italian books entirely devoted to fertility and obstetrical matters were making their appearance in print.¹⁴ The new texts address these issues in a much more technical and detailed way than the earlier medical advice literature and were authored by medical men. They are lengthy treatises, expressed in a language not easily accessible by the non professional, and in spite of the declared intention to speak to ordinary women, they appear ostensibly directed to the expert, i.e. the educated midwife, the surgeon or, more likely, the physician, rather than the general public.

Interestingly, therefore, we witness towards the end of the 16th century, a process of purging by which references to conception, reproduction and sexual life disappear from the health advice literature. Another long-lived early text, *Il Perché*, was subjected, from 1588, to similar mutilations: circa twenty questions about sexual life were removed

¹¹ L. Daston and K. Park, Wonders of the Order of Nature, 1150-1750 (New York: Zone Books, 2001); Giuseppe Olmi, L'inventario del mondo. Catalogazione della natura e luoghi del sapere nella prima età moderna (Bologna: FBKPress, 1992).

¹² It is interesting in this respect that the fictive conversations between Florentine learned men collected in Antonio Francesco Doni's *I marmi* borrowed heavily on Manfredi's *II perché*. See P. Cherchi, 'La selva de I Marmi Doniani', *Esperienze Letterarie*, 26 (2001), pp.3-40.

¹³ On this text see E. Rodnite Lemay, Women's Secrets: A Translation of Pseudo-Albertus Magnus' 'De Secretis Mulierum' with Commentaries (New York: State Univ. of New York Press, 1992).

¹⁴ G. Marinello, *Delle Malattie partinenti alle Infermità delle Donne* (Venice: G.Bonadio 1563) and *La commare o ricognitrice di Scipione Mercurio* (Venezia: G.B.Ciotti, 1595-96). Both the authors were physicians: Marinello in Venice, Mercurio in Milan (where he was also a friar for a number of years) and in other Northern Italian centres. See the entries by F.Cirilli and L.Roscioni in *Dizionario Biografico degli Italiani* (henceforth *DBI*) (Rome: Istituto dell'Enciclopedia Italiana, online), 70 (2008) and 73 (2009).

from the new editions of this work, according to Carré and Cifuentes because they could incur the censorship of the post-Tridentine Church.¹⁵ Themes related to sexuality and reproduction will also no longer be present in the newly authored vernacular advice works published in the late 16th century. The more puritanical climate of the Counter Reformation now assigned to the specialist responsibility for the control of these spheres.¹⁶ Remedies to treat impotence and some obstetrical ailments still featured in the recipe books newly published after 1550, but even there not in large numbers.¹⁷

In the previous period, by contrast, the 'secrets of men and women' were a theme addressed in many publications. Often these topics were covered in a more succinct form than in the pseudo-Albertus Magnus' text: the *Cibaldone*, *Il Perchè* and the *Recetario de Galieno*, and even another text of wide appeal newly published in 1545, the *Opere utilissime in medicina di Polibio*, all include brief sections on coitus, menstruations and other sexual and gynaecological topics. The *Thesaurus Pauperum*, however, a recipe collection first published in 1492, contained a particularly extended range of obstetrical recipes (on inducing and easing childbirth, preventing abortion, relieving postpartum pain and the swelling of the bosom in the new mother), along with remedies against male impotence and to control lust. ¹⁸

Curiously, therefore, we witness in the second half of the 16th century a process of suppression of medical information previously widely available in these matters. This trend contrasts sharply with the supposed disclosure of medical arcana frequently attributed to the recipe books newly published in the same period -an interpretation that has earned them the now common definition of 'books of secrets'. Indeed Eamon has described the surge in this genre of vernacular medical printing as heralding a new positive approach to the popularisation of medicine and representing a sharp break with a much more elitist tradition. According to this view, the self-contained recipe books published in Italy after 1550 introduced new attitudes to knowledge, as notions that were previously jealously monopolised by a handful of Latinate scholars, were now divulged,

¹⁵ H.A.T, Carré and L. Cifuentes, 'Girolamo Manfredi's *Il perché*: II', *Medicina e Storia*, 19-20 (2010), 39-58, 46-7.

¹⁶ On the lack of specific recommendations about sexual life in regimens of health see Cavallo and Storey, *Healthy Living*, pp. 268-69.

¹⁷ The super popular *De' secreti del reverendo Donno Alessio Piemontese*, for example, includes only 8 recipes of this kind. I have consulted the 1558 edition, published in Lyon by Pagano.

¹⁸ Overall 8 chapters are devoted to these problems. Jean XXI, *Thesaurus Pauperum* (Florence: Antonio di Bartolommeo Miscomini, about 1492).

thanks to print and the use of vernacular languages, to much broader non-academic and non-Latinate audiences.¹⁹

In reality, if we expand the scope of the analysis to the texts published prior to this alleged watershed, that is to the first decades of the introduction of print, we observe considerable continuity with the late Middle Ages. All the bestsellers considered in the previous pages and published between the 1470s and 1508 were attributed to medical authorities of the medieval or ancient past with whom ordinary readers, at the beginning of the early modern period, were already familiar since their works had circulated both in Latin and vernacular manuscript versions in the last two centuries. The Cibaldone was allegedly based on book three of the Liber ad Almansorem sive Tractatus medicinae I-IX of the Persian physician Mohammed Rhasis (9th century AD) and drew on a Florentine manuscript rendition in vernacular.²⁰ The compendium *De le virtù de le herbe* et animali et pietre was attributed to the 14th century author Albertus Magnus and had enjoyed a vast diffusion in 15th century manuscript culture. 21 The Libro de Homine/II Perché, albeit compiled by the doctor and astrologer Girolamo Manfredi, was presented as a translation of Aristotle's *Problemata*. ²² Another successful early text, the *Herbolario* Volgare (ten editions between 1522 and 1566, after which date its fortune evaporated), was the vernacular version of a Latin herbal attributed to the ancient Roman author Apuleio, a figure immensely popular in the Middle Ages.²³ This phenomenon concerns also the recipe collection, a type of text which was already published independently well before the 1520s, date set by Eamon as marking the first, timid appearance in print of this genre. The Thesaurus Pauperum (first printed ed. 1492), attributed to the leg-

¹⁹ This view was put forward in Eamon, *Secrets* and then repeated in his subsequent works on the topic, e.g. 'On the skins of goats and sheep. (Un)masking the secrets of nature in early modern popular culture', in Timothy McCall, Sean Roberts, Giancarlo Fiorenza eds, *Visual Cultures of Secrecy in Early Modern Europe* (Kirksville: Truman State University Press, 2013), pp.54-75.

²⁰ Rosa Pero ed., *L' almansore. Volgarizzamento fiorentino del XIV secolo* (Florence: Sismel, Edizioni del Galuzzo, 2012).

²¹ Draelants, *Le Liber de virtutibus herbarum*.

²² According to recent commentators it also borrowed from Seneca's *Quaestiones naturales*, from the work of the byzantine doctor Alexander of Tralle and from the *Secretum Secretorum*. See A.L.Trombetti, 'Manfredi, Girolamo', *DBI*, vol.68 (2007); Carré and Cifuentes, 'Girolamo Manfredi's *Il perché*'.

²³ Herbolario volgare nel quale le virtu delle herbe & molti altri simplici se dechiarano, con alcune belle aggionte (Venezia: Alessandro Bindoni, 1522). E.Caprotti ed., Herbarium Apulei 1481, Herbario Volgare 1522 (Milan: Il Polfiilo, 1979). On the long-lasting association, since the 6th century A.D, between the Roman poet Apuleio and the textual and visual form of the herbal L. Tongiorgi Tomasi, 'Erbario', in Enciclopedia dell' Arte Medievale (Treccani online, 1994) http://www.treccani.it/enciclopedia/erbario %28Enciclopedia-dell%27-Arte-Medievale%29/.

endary 13th-century doctor Petrus Hispanicus, is a case in point.²⁴ This substantial volume of 55 carte contains multiple recipes to treat the various ailments that may affect the human body from head to toe and is a faithful rendition of the text of the same title which had already enjoyed a Europe-wide success in manuscript form.²⁵ Apart from the numerous Latin versions, at least 34 manuscript vulgarisations of this work circulated in Italy in the 14th and 15th centuries.²⁶ One of them was credited for providing the basis for the first printed version, which was then re-issued several times (five incunabula editions and four in the sixteenth century).

These remarks lead us to agree with Monica Green on 'the importance of interrogating more systematically what was really 'new' in the age of print'.²⁷ When the new printing technology emerged, practices of appropriation of learned medical knowledge were already widespread, and publishers responded to this existing demand by producing printed vernacular renditions of Arabic and medieval works that were already popular. The sharp distinction drawn by Eamon between print and manuscript cultures disregards the vitality of the vernacular manuscript tradition that had already developed in the late Middle Ages.²⁸ Also in the field of health, as noted by Elizabeth Mellyn, texts that transmitted medical and natural knowledge in accessible vernacular form had been made available to broad readerships, which transcended the boundaries of court and academic entourages, already in the late Middle Ages, and circulated also in copies, now largely disappeared, produced at domestic level.²⁹

²⁴ On this figure see José F. Meirinhos, 'Petrus Hispanus', in Thomas F. Glick, Steven Livesey, Faith Wallis (eds), *Medieval Science*, *Technology, and Medicine*: *An Encyclopedia* (New York: Routledge 2005), pp. 389-92.

²⁵ Despite its success this text is not mentioned by Eamon.

²⁶ The estimate number of Italian vulgarisations is due to G.Zarra, *Il Thesaurus Pauperum Pisano*, *edizione critica*, *commento linguistico e glossario*, Berlin, De Gruyter, 2018, p. 119. This author has partly modified the results presented by S.Rapisarda, 'I volgarizzamenti Italiani del Thesaurus Pauperum', in A.Egelbert et al, *Actes di XXII Congrés International de Linguistique et de Philologie Romanes*, vol.V (Bruxelles: Max Niemeyer Verlag, 1998), pp. ?

²⁷ M.Green, 'The Sources of Eucharius Rösslin's 'Rosegarden for Pregnant Women and Midwives' (1513)', *Medical history*, 53:2, 2009, pp.167-92, p. 170.

²⁸ On the growth of writings in the vernacular in the fourteenth century M. T. Clantchy, 'Parchment and paper: manuscript culture 1100-1550', in S.Eliot and J.Rose eds, *A Companion to the History of the Book* (Oxford: Blackwell 2007), pp. 194-206.

²⁹ E.W.Mellyn, 'Passing on secrets: interactions between Latin and vernacular medicine in medieval Europe', *I Tatti Studies in the Italian Renaissance*, 16:1/2 (2013), pp. 289-309; E.Artale, 'Cose di medicina e vertude d'erbe nello zibaldone di un fiorentino del '300', in Libardi and Piro eds, *Lo scaffale della biblioteca scientifica in volgare*, pp. 225-40.

Equally anachronistic is the distance that is often seen to exist between Latinate culture and vernacular culture, where the former is associated exclusively with academic circles or monastic communities. In reality, when print was introduced Latin was no longer the preserve of restricted academic and religious elites.³⁰ Command of Latin also extended to modest professionals, such as notaries and the expanding ranks of the legal and medical profession, as well as to the low clergy, hence to figures whose professional practice involved constantly mediating between Latinate and non Latinate communities, and even between literate and non literate ones. Not by accident notaries, state officers and jurists, rather than monks or university professors, were often the protagonists of the late medieval vernacularization of scientific texts.³¹

In the early decades of print therefore publishers and the personnel they employed limited themselves to re-package material found in extant Latin and vernacular manuscripts, adapting it to contemporary habits and concerns. Only from the mid 16th century onwards, as we will see shortly, the attention of readers gradually shifted away from ancient and medieval celebrity names and a number of herbals, regimens and recipe books, and also some gynaecological texts, were published for the first time directly in Italian and authored by living medical authors.

In a couple of occasions, prior to then, printers had tested the interest of the market for works penned by more recent doctors. Hence, at the turn of the fifteenth century they published the manuscript regimens compiled in vernacular by two illustrious physicians from the more recent past - Ugo Benzi (d. 1439) and Michele Savonarola (d. 1462). However, these experiments did not win the immediate interest of vernacular readers, nor did they enjoy the continuous enduring appeal exercised by works attributed to old, legendary authors.³²

³⁰ On this point see also S.Minuzzi, 'La stampa medico-scientifica nell'Europa del XV secolo', forthcoming in '?', pp.9, 26.

³¹ An obvious example is that of the 14th century Florentine notary Zucchero Bencivenni, translator of several scientific treatises. See 'Bencivenni Zucchero', *DBI*, vol.8 (1996).

³² Tractato vtilissimo circa lo regimento e conseruatione de la sanitade composto per il clarissimo & excellentissimo philosofo & doctore di medicina meser Ugo Benzo di Siena (Milan: Petri de Cornero, 1481); Libreto de lo excellentissimo physico maistro Michele Sauonarola: de tutte le cose che se manzano comunamente... & le regule per conseruare la sanita de li corpi humani (Venice: Simone de Luere, 1508). Benzi's treatise was only re-printed once, in 1508, then it was re-proposed, more than a century later (1618) as a largely transformed text, with copious supplements by doctor Bertaldi and two years later, with further additions by doctor Galina and together with Pisanelli treatise on food. Savonarola's text was re-printed in 1515 and 1554 and then heavily modified by Boldo in 1576.

The fact that popular reception favoured for such a long time works and names already popular in the late Middle Ages, and welcomed new authors only once didactic health literature had been established for nearly a century, raises broader questions about the reasons why certain texts rather than others exercised a compelling attraction upon the public. As suggested earlier, this issue can only be addressed by considering the relative weight of the various components of a book: appearance, content, authors. Was the book content, i.e. the topic covered and the accessibility of the concepts and language the major factor, or did the way in which content was presented visually, and the physical and performative characteristics of the book more important? And how relevant was authorship (fictional or real) in determining the success of a title? These are the questions that the following sections will try to address.

2. The book as object

In the last decades historians of the book have increasingly drawn attention to the importance of considering books not just as texts but as material artefacts, whose appearance affected the definition of the readership, as well as the way in which the text was approached.³³ Yet the visual and physical features of the vernacular medical book have attracted only marginal attention. Some commentators observe in passing that often 'health manuals' were issued in pocket-size format and had typographical features that increased accessibility but then they tend to attribute the success of these books mainly to their alleged practical content, which, as I have already mentioned, was only part of their appeal. It may be useful, therefore, to apply this perspective specifically to the medical advice book and explore the extent to which printing houses invested in formal aspects to make these publications popular.

Already in the first decades of activity, publishers and their employees made an effort to make more user-friendly, also through form, the vernacular texts of medical content they were issuing in print. Size was, form the start, an important element of these strategies. Indeed these tracts were printed in octavo format, i.e. in pocket size, at a very early date, already at the beginning of the sixteenth century, when not in the late fifteenth century. This certainly applies to the most popular titles discussed above: the *Thesaurus Pauperum* was issued in octavo already in 1497, Albertus Magnus' *Libro* in

³³ See the foundational D. F. McKenzie, *Bibliography and the Sociology of texts* (Cambridge 1999); and the recent H. Smith and L. Wilson (eds), *Renaissance Paratexts* (Cambridge: Cambridge University Press 2011).

1500, and another bestseller, the *Recetario de Galieno*, in 1508; but also a book like the regimen by Ugo Benzi, which had a much more tepid reception, was published in small format as early as 1481.

This was not a general trend that affected all printed textual genres. In these early decades of printing, portable-sized books in vernacular were overwhelmingly represented by texts of religious and spiritual content (lives of saints, confessionals, *ars moriendi* tracts, sermons): 120 of the 182 titles in Italian published in 8° before 1501 fall in this category. In the next decade they are 108 out of 250.³⁴ Chivalric literature, books of poetry, and, increasingly in the 16th century, of entertainment, such as comedies, collections of songs and of jokes are also prominent: they account for 33 and 96 titles respectively in the two decades under consideration.³⁵

By contrast, printed practical literature (28 titles in total) is represented in this phase exclusively by teaching aid texts (reading and arithmetic manuals) and above all by guides on writing letters, not yet by technical treatises, and there are no 80 examples of how-to books - genres to which the vernacular medical advice literature has often been related. If one considers this distribution, the presence of 14 medical advice titles published in 80 before 1511 (6 as incunabular editions) and the related astrology tracts and almanacs, which also include recommendations about health (5 in total), appears significant. Vernacular medical advice books of various kinds (regimens, recipe books and herbals, as well as compendia of these genres) were therefore the first type of scientific and practical treatises to be published in formats aimed to attract ordinary readers. This trend continued in the next two decades: the pseudo Aristotelian *Il Perchè* had an octavo edition in 1512, Savonarola's regimen in 1515 and both the recipe books and herbals first published in the 1520s were issued in pocket format. Probably, one should include in this counting also the small quarto editions, given that, depending on the size of the

³⁴ Source: ISTC, the most complete catalogue of incunabula and, for 1501 onwards, EDIT16.

³⁵ The remaining titles are represented by history books, conduct manuals, travel literature, practical handbooks and prognostication and astrology texts. I return on the last two categories below.

³⁶ Eamon, Science and the Secrets of Nature esp. pp. 126-33; S.Pennell and N. Glaisyer (eds), Didactic Literature in England, 1500-1800: Expertise Constructed (Aldershot: Ashgate, 2003).

³⁷ I have excluded prognostications for the coming year or for specific outcomes (i.e. the war with Venice), which do not include medical contents.

³⁸ Even if we would expect that illustrated herbals would require a larger size, eight of the ten 16th-century editions of the *Herbolario Volgare* were in 80, the remaining two in 40.

sheet that was folded two or three times to obtain the pages, they could in some cases be quite small.³⁹ For example, the 1512 quarto editions of Manfredi *Il perché* was 22 cm in length, just 6 cm more than the octavo edition of the same title issued in 1523. However, the measurement of books is noted two rarely by books' catalogues to allow a systematic analysis of this element.

Small book sizes are important not only since they employed less paper and lowered the price of these texts, making them affordable to many. They also made the book light and transportable, expanding considerably the situations in which the reading or checking of the book may occur. These activities did no longer require a desk but could be performed by sitting on a bench, or even standing.⁴⁰ Moreover, the book could be consulted outside one's home and employed in practical activities, for example as aid in identifying medicinal plants in the increasingly common practice of herborization, or it could become part of one's travelling equipment. The small size encouraged reading and enabled a more frequent use of the book.

Certainly, the small format is not the sole nor an entirely accurate indicator of portability: a thick book in 80 would be less easy to handle than a slightly larger pamphlet made up of only few pages, like the *Cibaldone*, which, published in small quarto, measured 20x14 cm and only contained 14 sides. So the number of pages also needs to be considered when we assess the performative qualities of a book. Moreover, a book of very small size may have been unsuitable for hosting annotations and we know that medical advice books, especially herbals from the survey I have conducted so far on surviving copies, were often heavily annotated. Readers did not just underline the passages relevant to them and signalled the topics of interest at the margins of the text (Figs. 13), they also inserted local language variants of certain plants' names (Fig.14), and added lengthy information from textual or oral sources, or from direct experience to validate, correct or expand the text's content. (Fig.1).

Fig.1 In this case the entry about lupins is almost entirely crossed out and replaced in the wide margin by a lengthy alternative description of their benefits. Sansovino, *Della Materia* Medicinale, British Library 953.h.2.

³⁹ The size of the original sheet depended in turn on the type of paper employed. Hence if the sheet was made of *rezzuta* paper the quarto format page would measure 22,5x15,7 cm and be therefore slightly smaller than an octavo format page which employed the *imperiale* paper (25,0x18,5 cm). C.Pastena, *Arts Artificialiber Scribendi*. *Il Libro Antico in Italia* (Palermo: Cried 2013), p.69.

⁴⁰ A. Petrucci, Writers and Readers in Medieval Italy (Cambridge: Cambridge University Press, 1995).

Readers, in other words, often used the printed advice book as a manuscript, to create their own personalised compendium of helpful medical information. Books of medium size with large margins and blank lines betweens sections provided space for the reader's input, while a book of very small size (like books of prayers, often printed in even smaller formats) might have encouraged instead more passive practices of memorialisation and reading aloud.⁴¹

Considerations regarding the use that readers made of these books surely played a role in printers' decisions about not just the format but the design of different books. Indeed, even more important than size in explaining the popularity achieved by health advice texts is the layout of the page. This became clearer at an early date in the vernacular medical books directed to a large audience: various typographical strategies were employed to divide single textual blocks into visually separate sections so as to make the text more user-friendly and easier to navigate and consult for specific intellectual or practical purposes. See, for example, the first octavo edition of the extremely popular *Thesaurus Pauperum*, dated 1497 (Fig.2). It betrays a clear attempt at making the text's internal organisation visible by featuring frequent indentations, short headings, blank separating lines and woodcut initials. The book already includes a list of contents at the end (Fig.3), albeit not yet organised in alphabetical order. Even if pages are not numbered, it was clearly expected that readers would do so, hence the list indicates both the chapter and the leaf where the topic is addressed.

Fig. 2-3 Thesaurus Pauperum, Florence, Bartolommeo di Libri, about 1497

Even twenty years earlier, the first edition in quarto of another book destined to become a bestseller, *Il Libro del Perchè*, shows the effort, albeit less accomplished than in the previous case, to highlight the different topics addressed by capitalising the initial word of each question and related answer - an artifice not present in the previous folio edition. This book, too, was furnished with a list of contents (Fig. 4-5).

⁴¹ Writing space for annotations was sometimes increased by the readers themselves, who added a number of blank pages to the printed ones when getting their newly purchased book bound.

Fig. 4-5 (Napoli: Francesco del Tuppo, for Bernardinus Gerardinus, 1478, 40).

Both these incunabular cases also display wide margins that offered readers the opportunity to annotate the book. These were not universal conventions but seem to concern specifically to medical advice books aimed to a large non Latinate readership. Indeed, a vernacular medical book clearly directed to a professional audience, such as *Gulielmo Vulgare in Cirurgia*, issued in 80 in 1504, presents a much less reader-friendly layout (Fig.6-7).⁴² Here the text is continuous, devoid of any visual separation between contents, except for the woodcut initial that signals the beginning of a new chapter. Interline space is tiny and margins are also quite narrow. The list of contents simply mentions the number and title of each chapter, not the leaf where this begins.

Fig.6,7

There are other visual distinctions between these texts that are perhaps not immediately evident to the modern observer but, according to Grendler, communicated at once to our predecessors whether the text was destined to a popular or a specialist

⁴² The specialist destination of the books was also attested by the complexity of the language. It was a translation of Guglielmo da Saliceto's 13th-century surgical treatise. The text had enjoyed a wide circulation in manuscript form and had already been issued in vernacular in 1474. The 1504 is the only 80 edition. The online copy available from Gallica bears the signature of its possessor in 1686 -a surgeon active in the village of Graglia, near Biella, in Piedmont-, confirming, albeit anecdotally, the professional fruition of the book.

readership:⁴³ first of all the typeface and the pagination used. Health advice books exemplified by the first two titles were systematically printed in a rudimentary roman type from the start, that is they employed a typeface that makes the text easily legible, as it displays large, round letters and a limited number of abbreviations.⁴⁴ By contrast, Saliceto's surgery adopts gothic text types, which, with their small angular letters and the frequent abbreviations, made the text quite dense and tiresome to readers. Grendler argues that, apart from making the text more readable, the employment of the early Roman typeface, combined with the single column printing, immediately classified the book as intended for popular readerships. The gothic type, by contrast, discouraged the less expert reader, as it was still associated with works of theology, law and medicine, and with Latin, and appeared therefore to be directed to men of learning.⁴⁵

My survey of early health advice Italian books supports Grendler's argument about the appropriateness of certain typefaces for certain contents.⁴⁶ The typeface in these publications is systematically early Roman, there are only very few exceptions to this pattern. The most notable is the first edition of the *Recetario de Galieno* (1508) (Fig. 8), which is set however in a typeface, the gothic rotunda, that presents curved letters, as the name suggests, and closely resembles thickened Roman. In Italy, this typeface was used in a significant number of 'popular' prints especially in the fifteenth century, and preferably in those in Latin.⁴⁷ Unusually, this text is even set in double

⁴³ P. Grendler, 'Form and function in Italian Renaissance popular books', *Renaissance Quarterly*, 46:3 (1993), pp.451-85.

⁴⁴ Grendler stresses that the Roman type used in 'popular' vernacular texts was not the smooth, elegant typeface perfected by Jenson but the 'early Roman', characterised by ticker letters and irregular spacing. This old fashioned style was still used in this literature, as a distinctive sign, when more modern Roman typefaces had become dominant. Ibid., pp.460-61.

⁴⁵ See Grendler's comparison between the devotional text *Fior di virtù*, printed in single column Roman, and prayer books in Latin, such as the *Imitatio* Christi, which tended by contrast to be set in Gothic even if directed to a popular readership that would mechanically repeat the Latin words when praying. Ibid. pp. 457-470. See also H. Vervliet, *The Palaeotypography of the French Renaissance* (Leiden: Brill, 2008), pp.18, 20.

⁴⁶ Grendler's argument diverges from previous views, which saw the use of Roman and Gothic as interchangeable in Italian printing, unlike in other European countries: 'everything points to conclude that Italians did not feel strongly about the choice between gothic and roman', H. Carter, *A View of Early Typography up to 1600* (London: Hypen Press, 2002), p.89.

⁴⁷ Another case in which gothic rotunda was employed instead of early Roman is represented by the 1548 re-editions of the very popular pseudo-Albertus Magnus, *De le Virtù*. This text was however printed in one column.

column, a feature also normally associated with Latin, folio-sized academic editions.⁴⁸ Compared with Saliceto's Surgery, however, the visual effect is much clearer, since letters are sizeable and chapters are short and clearly demarcated by indented titles. In any case, only two years later, the second edition of this highly popular text will be set in Roman rather than in gothic, and so will its subsequent numerous printings.⁴⁹

Fig. 8. Gothic rotunda and two columns in the first ed. of the Recetario de Galieno (1508)

Typographical features, therefore, carried meaning and the adoption of those more appealing to a general public was a contributing factor in the popularity enjoyed by some health advice books; conversely, failure to adopt these visual strategies might perhaps explain the meagre success of other titles. Indeed the choice of a page layout, pagination and typeface associated with intellectually demanding texts, might have played a role in the modest fortune experienced by the already mentioned regimen by Ugo Benzi. Even if printed in octavo at an early date (1481), this treatise failed to attract the interest of readers and was only reprinted once (Fig.9). ⁵⁰

⁴⁸ Grendler, 'Form and function', p. 452.

⁴⁹ The only exception is the edition of 1645, set in italic. I will return on the use of Italic in the following pages. Some editions were printed in two columns, others only had one column.

⁵⁰ Benzi, *Tractato Utilissimo*. See above footnote 32.

Fig.9. Page from Ugo Benzi, <i>Tractato Utilissimo</i> , 1481.
A very similar case is represented by Michele Savonarola's <i>Libreto</i> (1508) (fig.10), another scarcely fortunate text. ⁵¹ Although published nearly 30 years later than Benzi, it presents similar visual characteristics, safe for adopting a more decorated gothic style that looked antiquated and seems to stress the elitist character of the publication.
Fig.10.Savonarola, <i>Libreto</i> , 1508.

⁵¹ See note 32.

The limited appeal of these books was also likely to reflect the already mentioned predilection of the large public for classical or medieval authors whose popularity had already been established in late medieval manuscript culture. As court and university physicians active in the early 15th century, Benzi and Savonarola were not among these celebrities, and were probably unknown to the majority of readers of popularising texts. But the unusual typographical features adopted in these publications certainly emphasised their peculiarity and might have been deliberately chosen to appeal to more learned and sophisticated readers.

This comparative analysis suggests that significant differences existed within the large umbrella of medical advice books in their targeted audiences and that a focus on the visual details of a book may enable us distinguish those publications that were directed to a wider readership and those that were by contrast destined to an intellectually refined or professional public. These differences in appearance were not confined to the first decades of print: in mid 16th century we still find examples of health advice works in vernacular being published as just one uninterrupted flow of printed text, with no indentures and sub-headings, and even without an index. *Di Galeno*, translation of Galen's De Sanitate Tuenda, is a case in point (Fig.11).⁵² In spite of being published in 8°, and authored, like (allegedly) the much more fortunate *Recetario de Galieno*, by this celebrated ancient author, its success was very limited, the book had only one edition.

Fig.11

Yet it is possible that in this case, too, the sombre typographical style was a deliberate choice, deemed appropriate to a culturally refined clientele, interested in reading yet another classic in translation rather than in its empiric contents. Worth noting is also the use of the cursive script, a typeface invented only at the beginning of the 16th century

⁵² Di Galeno Delli mezzi, che si possono tenere per conseruarci la sanitá. Recato in questa lingua nostra da m. Giouanni Tarcagnota (Venice: Tramezzino, 1549).

and closely associated, especially in the first decades of its introduction, with humanist, antiquarian culture.⁵³

3.Contents

It would seem, therefore, that the visual organisation of the text did play a significant role in determining the popular appeal of a book. Yet, as already mentioned, it is normally assumed that what made a medical advice book accessible to the non professional and widely read was the language adopted - which should be uncomplicated and devoid of theoretical assumptions -, the clear prose and a tight organisation, and above all its utilitarian purpose. On close inspection, however, these texts were rarely entirely and exclusively practical handbooks. The majority of them offer some, albeit simplified explanations of the physiological processes that were seen to make certain preventive measures, certain treatments and remedies efficacious for health.

There is no doubt that these books were employed for self-healing and for managing one's health directly, the annotations their readers left behind often make this crystal clear. For example, a certain Bartolomeo Porta explains on the title page of the *Herbolario Volgare* now in the British Library that he purchased this book second-hand (two centuries after its original publication!) to find a valid cure for the toothache that had tormented him for years (See Fig. 12).⁵⁴ In this case the practical motivation for owning the book is made explicit by the buyer himself. In other cases, this is revealed by the pattern of readers' interventions on the text, which show a consistent concern for certain ailments - probably those that affected the annotator and other members of the family.

Fig. 12. The annotation in the middle reads: 'This book belongs to Bartolomeo Porta, [and was] accidentally bought from the bookseller at the Corso in Rome to learn the secrets for tooth pain, from which he has been suffering for many years, and he paid it two Pauoli [Roman currency], June 1748'.

Having said that, it should be noted that, in consulting the book, readers were also acquiring notions of medicine, or consolidating existing ones. Indeed, health advice texts are imbibed with humoural thinking. The *Herbolario Volgare*, for example, considers one

⁵³ Carter, A view, pp. 73, 117. I return, more extensively, to the use of Italic in the next section.

⁵⁴ See *Herbolario volgare*, British Library 453.c.8. The same hand then goes on to underline and signal on the margins the remedies that concern the health of the teeth and of the mouth. See fig. 14: the more rounded handwriting is Bartolomeo Porta's.

simple at a time and devotes one separate entry to each of them (providing also a picture, but not a textual description, of each plant (Fig.13). Such entries normally begin by specifying the humoural gradation of the herb or plant in question, and then go on to classify it according to its quality and hence the type of balancing effect it produces (dissolutiva, confortativa, estenuativa, etc.). Sometimes the text also offers explanations concerning the physiological causes of certain ailments that presume readers to posses simple diagnostic abilities: for example, the herb is said to cure the pain of the head 'that proceeds from wind in the stomach'.55

Fig. 13 Herbolario volgare, British Library 453.c.8

On the right hand side the plant called 'mellilot' (yellow sweet clover) is described, under its depiction, as hot and dry in the first degree and as having little restrictive properties but rather dissolving ones and therefore it digests and liquifies superfluities and removes pain. The recipe then follows. On the left hand side we can see annotations by two different hands, the rounded one being by Bartolomeo Porta's. He singles out two recipes against the ailments by which he is afflicted: gums and teeth pain.

The eminently utilitarian content of these books is therefore debatable. As already observed in relation to a text such as *Il Perché* (see above p.), their impact on early modern medical culture was much broader: in explaining why certain lifestyles were beneficial to health, how certain plants and minerals worked, or how conception took place, these texts also communicated notions of medical theory about the working of nature and the body. They would appeal, therefore, to an audience interested in knowing, not only in doing and contribute to validate certain notions of physiology and humoralism, as well as a related medical vocabulary. Indeed the intent of creating a vernacular version of medicinal or botanical terms still not fixed in Italian was a frequently declared aim of the health advice literature, especially of herbals.⁵⁶ And readers contributed to this plan by adding local or regional variants of plants' names in their hand-written marginalia. (FIG.14).

Fig. 14. This reader has added the Venetian name of the fruit of momordica (bitter melon), one of the plants described in Durante's *Herbario Nuovo* (Venice: Sessa, 1617): 'In Venice some call them caranzele'

⁵⁵ Ibid. c. val al dolor di capo qual procede da ventositá del stomacho

⁵⁶ For example, in the first pages of his *Della materia medicinale libri quattro* (Venezia: F. Sansovino, et compagni, 1561) Francesco Sansovino includes 'a dictionary of the medicinal terms used in the book whose meaning is not universally known'. A similar concern can be found in manuscript culture. On the creation of neologisms by medieval translators of Latin medical texts see L. Demaitre, 'Medical Writing in Transition: Between Ars and Vulgus', *Early Science and Medicine*, 88-102.

(Wellcome Library, 1963.D).

The impact that these books had on their readers was therefore more varied than often assumed and requires further attention. For example, as well as enabling some patients to cure themselves, this literature advanced their awareness of the rationale behind the cures they were offered. According to the dedication that the translator of a medical work attributed Polibio offered to Daniele Barbaro in 1545, the book would give the dedicatee the opportunity of better understanding not only the nature of the disease from which he had recently suffered but the treatment he had received.⁵⁷

Labels such as 'self-help manuals' used to define this genre of medical literature are therefore reductive. These definitions may perhaps apply to those recipe books which mechanically associate specific ailments and the remedies that can cure them, without offering any information about the causes of the ailment and the reasons why the remedy should work. Yet this description by no means applies to all recipe collections, the genre is in fact far less homogeneous than usually assumed. Within this vast category we can identify a group of texts that present a distinctive approach by comparison with standard recipe-books: first, they do not simply indicate the remedies apt to cure the various ailments but, in many cases, they also recommend other forms of therapy (evacuations, blood-letting, diet); second, instead of establishing an automatic correspondence between an ailment -say migraine- and a range of remedies capable of curing it, these texts often stress the need to arrive at a more precise diagnosis before deciding on a cure. Hence they engage in long and complex discussions of the different causes that may have prompted that ailment, so as to determine what type of migraine is that and hence the remedy most suitable for that particular complaint.⁵⁸ This diagnostic procedure was comprehensible only to a readership of professional, qualified practitioners, capable of discerning subtle differences in the health condition that would be invisible to the most. And indeed these texts, unlike the majority of recipe books, were penned by doctors rather than by writers by profession or by empirics. They had originally been compiled in Latin, and in some cases were translated into vernacular only

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⁵⁷ Opere utilissime in medicina di Polibio, illustre medico, discepolo e successore di Hippocrates tradotte dal greco in italiano per Pietro Lauro modenese (Venezia, Comin de Trino, 1545), third, unnumbered page, of the dedication.

⁵⁸ See for example, in Bairo's Medicinal Secrets (referenced in note 59), how the section on the infirmities of the head (Second treatise, leaves 11-17) explores various types of migraine, while the previous one, on hair and scalp, mainly consists of short recipes.

posthumously.⁵⁹ Often, in these more professional recipe collections, remedies were also differentiated by gender, age and complexion, while these distinctions rarely feature in the more popular recipe book.

The specific characteristics of this group of works were also signalled by the distinctive look they present (Fig.15): the text is entirely set in Italic letter and this, combined with the almost uninterrupted flow of the text, separated only by the titles of chapters, qualified these books as professional and learned, in a very similar way to the example in Fig.11. We see again, therefore, how form and content go hand in hand.

Fig. 15. Secreti medicinali di m. Pietro Bairo da Turino (Venezia: Sansovino, 1561)

It is true that the use of Italic becomes more common in the last decades of the 16th century in vernacular medical advice literature, and even some editions of the purely practical recipe books, such as The Secrets of Falloppia (1563), as well as some editions of the super popular Alessio's Secrets, employ this typeface (Fig.16).⁶⁰ Here, however the presence of Italic letters has a different function, they are used in alternation with Roman ones to accentuate the visual separation between the short descriptive sections in which the text is subdivided. As a result, the page presents a much clearer layout than in the previously examined professional recipe-books, as the text is also articulated in short sections separated by blank lines, and includes frequent indentations, subhead-

⁵⁹ Examples include *Tesauro di Euonomo Filatro de rimedii secreti... sommamente necessario a tutti i medici, et speciali* (Venezia, Sessa, 1556), translation of Conrad Gesner's *Thesaurus Euonymi Philiatri De remediis secretis*, published in Latin in Zurich in 1552; *Secreti medicinali di m. Pietro Bairo da Turino* (Venezia: Sansovino, 1561) translation of P. Bairo, *De Medendi humani corporis malis euchiridion volgo Veni Mecum*, first published in Latin in 1512 (Bairo died in 1558); *Prattica d'esperienza dell'eccellente medico m. Benedetto Vittori, da Faenza: nella quale si contengono maravigliosi rimedii... <i>Tradotta nuovamente dall'eccellente medico m. Thomaso Terranuova* (Venezia: Zaltieri, 1570). This is probably a translation of *Empirica de Curandis morbis totius corporis* (Venice: Valgrisi 1550). Vittori had died in 1561.

⁶⁰ See Secreti del rev. donno Alessio Piemontese (Venice, Comin da Trino, 1557 and Milan, Gio' Antonio de gli Antoni, 1559). Secreti diversi et miracolosi, ne' quali si mostra la uia facile di risanare tutte le infirmità del corpo umano raccolti dall'eccel.mo Gabriele Falloppia (Venezia: Marco de Marcia 1563). The attribution to doctor Gabriele Falloppio is generally considered spurious. The book had at least 5 editions between 1563 and 1664.

ings and other visual devices that make its organisation transparent and user-friendly. Moreover, the use of different typefaces creates a clearer contrast between the different elements of the book, typically, the main text, set in Roman, and the index and the dedication, set in Italic.

Fig. 16 Page from Secreti del Falloppia, 1563.

Another important aspect to consider when dealing with the content of popular medical books is its dynamic character. Indeed, subsequent editions of the same title were often revised and amended versions of the original. This lack of integrity of the vernacular medical book is of great interest. In reconstructing a text's aetiology of variation, scholars have often aimed to recover the version closest to the initial one, and hence the author's original conception of the text. In the case of the medical advice book, variation itself could be the object of study as it may represent a deliberate attempt at modernising the book by adapting contents to shifting expectations, interests and fashions, and offer therefore an indication of how medical culture and readers' demand were changing.

We have already come across some examples of the instability of these texts over time. We saw that the pseudo-Albertus Magnus' *De le virtù de le herbe* was enriched, in editions that appeared between 1537 and 1570, by a long section on 'The secrets of women and men', made up of 14 chapters on conception, childbirth and the reproduc-

tive physiology of men as well as of women. We have already commented upon the disappearance of this obstetrical section but the timing of its addition to a very popular text is also intriguing: it is tempting to see its inclusion in this compendium as a way of intercepting a topic, until then treated only succinctly in the vernacular medical literature, just months before these issues were discussed at length in the first Italian translation of Eucharius Rösslin's text on childbirth (*Der Rosengarten*, first published in German in 1513).⁶¹ Although it is impossible to prove that the two publications were related, it is interesting to observe that while Rösslin's translation was a fiasco (there were no reprints), there were at least five editions of the expanded, and more accessible to a popular readership, pseudo-Albertus Magnus.

We have also noticed how, in re-editions of Manfredi's *De Homo/il Perche'*, a text that adopts a question and answer structure, the number of questions severely diminishes over time. As a result of these editorial alterations, 110 of the 568 original questions were removed from the late sixteenth-century editions. It was already mentioned that circa twenty were queries about sexual life and we have attributed these purges to the puritanical climate of the Counter Reformation and the parallel ongoing professionalisation of matters concerning reproduction. However, the rationale behind the removal of other topics, clearly regarded as unsuitable or devoid of interest, still awaits to be explained.

These changes were often introduced when the author was no longer alive: Manfredi, for example, could witness only three of the 27 editions of his book, the more radical amendments were implemented when he had been dead for a long while. This was far from exceptional: during the long life that many medical advice texts enjoyed in this period, it was pretty common for re-prints to present abridged or expanded versions of the original, sometimes described as 'improved' editions on the title pages but often not even mentioned.

This practice underscores the agency of printing houses, and those who participated in various capacities in their activities, in determining, for nearly a century, the publishing policy concerning vernacular health advice works. In a period in which the genre did not yet consist of texts compiled anew by contemporary authors, translators and editors played a key role also in decisions regarding what ancient or medieval manuscripts

⁶¹ Eucharius Rösslin, Libro nel qual si tratta del parto de lhuomo: e de tutte quelle cose, che cerca esso parto accadeno... (Venezia: Giouanni Andrea Vauassore detto Guadagnino, 1538). Both the 1537 edition of Albertus Magnus' Liber and Rösslin's translation were published in Venice.

should be translated into vernacular or adapted for publication. Yet the identity of these figures remained for long time unknown.⁶² In the rare cases in which the translator is mentioned, he is likely to be a fictional figure, possibly deemed attractive because of the exotic connotations of its name, as in the case of mastro Zoane Saracino, alleged translator of the *Recetario de Galieno* (1508).⁶³

Around the mid 16th century however, the translator starts to be mentioned and acquires not just an identity but a voice, since sometimes he even signs the dedication (to the reader or to a particular person) and/or the prologue to the book.⁶⁴ This acquired visibility of the translator is likely to reflect the fact that such activity, rather than being an amateurish, occasional undertaking, had by now become a stable occupation for many, and hence an important source of income. 65 The translator had therefore a stake in the outcome of the book, whose success would enhance his professional reputation and procure more commissions. But his interest in the fortune of the book was at times even wider and a reflection of his frequent involvement in its making as instigator of the project, not just as mere executor. There were even cases in which translators rather than printers applied for and were granted the *privilegio* (the equivalent of the modern copyright) over the printing of the book for a number of years. 66 Hence their active role in promoting the work, achieved in particular by dedicating it to influential patrons whose name would, by itself, exercise a sponsoring function. Pietro Lauro for example, translator, among many other titles, of a medical work attributed to Polibio, makes it explicit that he is dedicating it to Michele Barbaro di Francesco, so that the book would

⁶² On the weak status of the author, and, by extension, of the translator, see Minuzzi, 'La stampa medicoscientifica', forthcoming in '?', pp.2-3.

⁶³ Saracino is thought to have been a physician from Piedmont who was active during the late fifteenth and early sixteenth centuries but there is no evidence for this claim. http://www.textmanuscripts.com/medieval/medical-miscellany-medieval-manuscript-79747.c; Filippo Argelati, *Biblioteca degli volgarizzatori*, o sia notizia dall'opere volgarizzate d'autori che scrissero in lingue morte prima del secolo XV, opera postuma (Milano: F. Agnelli, 1767), p.109.

⁶⁴ Among the first examples: Col Nome de Dio. Il segreto de segreti.. fatti nuovamente volgari per Giovanni Manente, Venezia: Zuan Tacuino da Trino, 1538 and Di Galeno a che guisa si possano conoscere le infermità dell'animo (Venezia: Tramezzino, 1549). In the former Giovanni Manente, the translator/editor of a short treatise attributed to Aristotle authors both the dedication to a certain Piero di Simone and the Prologue; in the latter the translator Giovanni Tarcagnota dedicates the book to an alter-ego, Francesco Gattola.

⁶⁵ On the professionalisation of this occupation, which was often associated with that of tutor, see Peter Burke, 'Lost (and found) in translation: a cultural history of translators and translations in early modern-Europe', *European Review* 15:1, 2007, pp.83-94, p.88.

⁶⁶ S. Minuzzi, The Invention of the Author. The Privilegio di Stampa in Renaissance Venice (Venezia: Marsilio, 2017), p. 100, A. Nuovo, The Book Trade in the Italian Renaissance (Leiden: Brill 2013), p.208

benefit 'from the reputation that books are customary to acquire when dedicated to persons of renown ... and this will favour both the work and myself'.⁶⁷ More than anything else, however, the new conspicuousness of the translator should be ascribed to the fact that early modern translators understood themselves as co-authors.⁶⁸ As translations became increasingly free, i.e. distant from the original text, in order to make them accessible and appealing to an ever wider public, it was natural for their makers to consider the book as theirs and feel that they had a much bigger stake in their reception.

4. Authorship

In the second half of the 16th century, after a long period in which medical advice publishing in the vernacular mainly consisted of classical and medieval titles translated and/ or adapted at the hands of increasingly visible professional translators/editors, named and recognisable medical men, usually physicians active in various parts of Italy at that time, took over the genre. 69 The vernacular health literature then remained dominated by medical authors until its decline in the last decades of the 17th century. The sole notable exception is represented by recipe books, a sub-genre with which doctors persistently did not engage -at least not in the vernacular language-, and that continued to be penned by writers by profession. Most likely, it was the mechanical association between symptom and remedy prevalent in standard recipe-books that was regarded as scarcely dignified for a medical professional and distanced physicians from this type of publication. And in fact as we have already seen, the small number of printed recipe-books authored by doctors adopted a more inquiring, diagnostic-based approach in their prescriptions. Moreover, the prejudice towards publishing in the vernacular was, even beyond the specific case of recipe-books, a potent motive behind the late emergence of Italian physicians as vernacular medical authors. Doctors were expected to write in Latin and writing in vernacular was perceived as diminishing. Latin long remained the language of

⁶⁷ 'Volendo mandare in luce, non senza quella reputazione che si suole acquistare ai libri dedicandoli a persona ragguardevole... il quale (nome) potrà favorire e l'opera e me stesso'. *Opere utilissime in medicina di Polibio*. Lauro perfectly fits the profile of the professional translator and school tutor drawn by Burke. See Achille Dini's entry in *DBI*, vol.64, 2005.

⁶⁸ On this point see Burke, 'Lost (and found) in translation', p.91.

⁶⁹ The unnamed translators and editors likely belonged to the vast category of learned professional writers ('polygraphs'), for long time at the heart of the publishing industry, rather than to the ranks of medical practitioners. This is confirmed by the evidence from the 1530s and 40s, when the translator's name started to appear on the book's frontispiece and these figures also acquired an authorial voice by composing and signing the prefatory epistle.

scholarly medical treatises and when some learned doctors broke with this cultural tradition they felt obliged to justify their choice in prefaces. The persistence of this bias may also be the reason why prominent and widely published physicians do not feature among vernacular medical authors. Even when distinguished and academics doctors like Cardano, Cagnati and Fonseca, and court physicians like Petronio engaged with the medical advice literature, namely with the sub-genre of regimens, they strictly did so in Latin. Petronio's text appeared in vernacular only posthumous, while the translation of Fonseca's regimen when he was still alive was instigated not by him but by the translator and his family, to promote this young man's career.

It was rather ordinary doctors who engaged in vernacular medical publishing, i.e. modest professional figures who often operated in small localities (like Boldo, doctor in Pralboino, near Brescia, Traffichetti in Rimini, or Gallina in Carmagnola), or in provincial towns (like Frediano in Lucca or Salando in Bergamo), where they enjoyed a local or regional reputation, often guaranteed by the position of town physician. And even when they were active in larger cities (like Viviani in Venice, Paschetti in Genoa or Camaffi in Perugia), they belonged to the rank and file of the profession. Significantly, many of these authors were also advisers to local authorities in matters of public health, when not members of the city government in capacities also related to medical issues (such as the control of ports or of prices in time of shortage, or the management of communal supplies).⁷³ They were therefore particularly sensitive to the importance of instructing the population in taking care of their physical wellbeing. However, they were not part

⁷⁰ A.Carlino, 'Introduction', in Andrea Carlino and Michel Jeanneret (eds.), *Vulgariser la médecine: Du style médical en France et en Italie (XVIe et XVIIe siècles)* (Geneva, 2009), 18-19, 22.

⁷¹ These figures were all prolific Latin authors. On Cardano, N.Siraisi, *The Clock and the Mirror: Girolamo Cardano and Renaissance Medicine* (Princeton: Princeton University Press, 1997); on Cagnati, Id., *History, Medicine and the Traditions of Renaissance Learning* (Ann Arbor: The University of Michigan Press, 2008), ch.5; on Petronio, E.Andretta, *Roma medica. Anatomie d'un système médical au XVIe siècle* (Rome: Ecole Française de Rome, 2011); on Fonseca, G.Volpi Rosselli, 'I portoghesi nell'Ateneo Pisano in epoca medicea (1543-1737)', in *Toscana e Portogallo: Miscellanea storica nel 650° anniversario dello Studio Generale di Pisa* (Pisa: Edizioni ETS, 1994).

⁷² It was one of the first works of the promising young humanist Poliziano Mancini. He wrote the dedication (to the Archibishop of Pisa) and included a series of sonnets in praise of the author, written by the translator's father and uncle.

⁷³ For example, Rangoni produced a pamphlet to advise the health authorities on how to purge the air in the Venetian lagoon; Bruno recorded climate changes in Rimini for twenty years, to identify the link between disease and natural phenomena; Panaroli was commissioned an opinion on the salubriousness of Mount Celio in Rome, as site for a hospital. S. Minuzzi, 'Il medico Tommaso Giannotti Rangone (1493-1577) nell'economia della cura ovvero un trionfo di libri, segreti e regimen sanitatis', in *Medicina & Storia*, N.S., 1 (2013), pp. 29-66; 'Note Climatologiche sulla Bassa Romagna 1570-1590 del medico Matteo Bruni', *Studi Romagnoli*, XL (1989), pp. 425-48; Domenico Panaroli, *L'Aria Celimontana* (Roma: D.Marciano, 1642).

of international medical networks, they did not produce theoretical writings and only in a couple of cases (on which I will return) feature in national medical biographies. Often, the vernacular advice text represents the only published work of these physicians, other times it was their only medical publication besides works of poetry, of moral philosophy, of local history or collections of traditional songs.

With this in mind let us now return to the question of how relevant was authorship in determining the success of a title during this new phase of medical advice printing. It is unlikely that the name of these interesting but undistinguished figures exercised significant attraction on large readerships and beyond the small area in which they operated. It was in case the role of powerful local patrons, often represented by well-connected men of the church, which gave to some of these works and authors a fame that transcended the boundaries of the locality. Indeed, the role of patronage in this publishing genre, marginal until the health advice literature mainly consisted of translations and re-editions of ancient, renowned texts, seems to have grown considerably after 1550, that is in the period that saw the rise of the new contemporary medical author. In some cases it is clear that the patron even financed the publication of the work and had a say on its contents and format.⁷⁴

It is likely, that the influence of patrons was a key element in the success of the most fortunate of these new publications, Castore Durante's *Il tesoro della sanità* and Pietro Andrea Mattioli's *Discorsi*. Durante and Mattioli were, like the authors mentioned above, obscure community doctors before their herbals and Durante's regimen became best-sellers. The impression is that the protection of, respectively, the local bishop and the papal legate ensured that, instead of being issued in print by small provincial presses, like the majority of the printed advice literature in this period, the texts compiled by Durante and Mattioli were published in important printing centres and by renowned publishers. In these printing houses then, the input of the various male and female figures

⁷⁴ See the case of the regimen authored by doctor Viviano Viviani, a *protegée* of cardinal Alessandro Orsini in 1626, discussed in Cavallo and Storey, *Healthy Living*, p.31. Once completed, the work had to be read out to the cardinal for his approval.

⁷⁵ For biographical information on Mattioli see C.Preti's entry in *DBI*, vol. 72, 2008 and S. Ferri, *Pietro Andrea Mattioli (Siena, 1501-Trento, 1578)*. *La vita, le opere. Con l'identificazione delle piante* (Ponte S.-Giovanni: Quattroemme, 1998). On Durante see D.E. Rhodes, *La vita e le opere di Castore Durante e della sua famiglia* (Viterbo: Agnesotti, 1968) and T. Pesenti's entry in *DBI*, vol. 42, 1993.

⁷⁶ A significant number of regimens of health, for example, were published by printing houses in Pesaro, Macerata, Perugia, Ferrara, Genoa, Verona, Lucca, Pavia, Carmagnola.

involved in giving a distinctive physical and visual appearance to these books seems to have been a key determinant of the appeal they exercised.⁷⁷

The success of a title, therefore, was no longer necessarily tied up to the fame of the author, as in the early phase of vernacular medial advice printing. The patron's name and the reputation of the press validated the quality of the work and the captivating form of the book did the rest. Does this mean that books lacking the support of powerful patrons and produced in the provinces only had a local or regional circulation? The study of subsequent notes of possession of the same book may help verify this hypothesis and the few examples I have been able to examine so far do support it. Although these texts changed hands frequently, through legacies, gifts or sales on the second-hand market, it would seem that they moved within relatively restricted geographical areas. The notes of possession on the title-page and back-page of the re-edition of Benzi's regimen by doctor Bertaldi (1620), shown in Figure 17, reveal an out of market and entirely local circulation of this book, which had at least four different owners, religious and secular, in nearly 60 years but all of them were based in the small town of Saluzzo, c. 50 kilometres away from the place of publication.⁷⁸

Fig. 17: Bertaldi's *Regole della sanita*, Biblioteca Nazionale Universitaria, Turin. The notes document how in 1654 the book belonged to Friar Aurelio Rosso, whose friary (St Augustin) was based in the small town of Saluzzo. He had received it from Gioachino Ganibaudi on the 18th of June of that year 'to pray God in his memory'. Then the book passed to Father Brigna, Prior in the same friary, who donated it to an un-named person, possibly the last documented owner: Francesco Antonio Cravetto, also from Saluzzo, who signed the book in 1677.

A copy of Durante's *Tesoro della Sanitá*, published in Bergamo in 1588 and now in the Marciana Library, had four consecutive owners. We do not know the location of two of them but the third, revealed by a 17th-century signature, was a convent in Bergamo; we also learn that in 1608 (20 years after publication), it was bought second-hand from a bookseller in the small town of Lodi, 78 km from Bergamo. A similar case is that of the *Scuola Salernitana* in the Wellcome Library, which presents mentions of three different owners in the 17th century, all based in Mugello, a small area of the Tuscan region, at a distance of few kilometres one from the other and very close to Florence, where the

⁷⁷ Intriguingly, the drawer and possibly woodcut carver of the images in Durante's herbal was a woman, Isabella Parasole, renowned designer of lace making pattern books. E. Lincoln, 'Models for science and craft: Isabella Parasole's botanical lace illustrations', *Visual Resources*, XVII (2001).

⁷⁸ Regole della sanita et natura de' cibi, di Vgo Benzo senese. Arricchite di vaghe annotazioni, & di copiosi discorsi, naturali, e morali dal sig. Lodouico Bertaldi...aggiontoui..i Trattati di Baldasar Pisanelli, e sue Historie naturali; & annotationi del medico Galina (Turin: Tarino, 1620).

translator and editor of the work, friar Serafino Razzi, was Dominican friar in the convent of San Marco.⁷⁹

My working hypothesis is that after 1550 not many titles within this genre were read across state boundaries and this applies to both Italian and European states. Indeed, if we ask whether any of these texts were known abroad and whether similar vernacular compilations, originally penned in other countries, were read in Italy, the answer seems to be negative or: only to a minimal extent. The study that Tessa Storey and myself have carried out on the sub-genre of regimens of health suggests that there was scarce interest in making the Italian healthy living books authored after 1550 available in English. The only translation was that of the best-seller Durante, which took place however a century after its original publication. Similar books were produced in England in that period and they suited the English readers better than translated ones, since they presented distinctive ideas about what was regarded as harmful or beneficial to heath.80 In spite of drawing on a common body of knowledge, preventive cultures were far from uniform across Europe and recommendations concerning the daily management of health were deeply conditioned by ingrained local habits and environmental constraints. Did this lack of transnational circulation affect also other sub-genres, besides regimens, of the advice medical literature in the vernacular? The impression so far is that, apart from bestsellers like Mattioli's *Discorsi*, the newly compiled heath advice Italian texts were not translated in other vernaculars. Likewise, not many similar texts compiled by foreign doctors were translated into Italian, and the few that were did not enjoy much popularity. Examples include the regimens penned by renowned physicians such as the German Georg Pictorius or the Flemish Levinius Lemnius.81 Particularly stunning is the tepid reception reserved to the Italian translation of Rösslin's Rosengarten, an immensely popular text in its language of origin, which had only one edition in Italian. This did not reflect a scarce interest in matters of reproduction, since, as already

⁷⁹ Scuola Salernitana del modo di conservarsi in Sanità (Perugia, Pietroiacomo Petrucci, 1587). Wellcome library 5395.1. Razzi's name is made in the dedication and he writes the preface addressed to readers.

⁸⁰ S.Cavallo and T.Storey, 'Regimens, Authors and Readers. Italy and England Compared', and T. Storey, 'English and Italian health advice: Protestant and Catholic bodies', in Cavallo and Storey eds, *Conserving Health in early Modern Culture*.

⁸¹ Dialogi del eccellente medico m. Giorgio Pittore Villingano, del modo del conseruare la sanita... (Venice: Bottega d'Erasmo di Vincenzo Valgrisi, 1550). Interestingly, a short tract attributed to Arnald was appended to this treatise, evidently to increase its appeal. Di Leuino Lennio, ... Della complessione del corpo humano libri due..da quali a ciascuno sarà ageuole di conoscere perfettamente il modo del conseruarsi del tutto sano (Venezia: Domenico Nicolino, 1564).

noted, similar topics were addressed by much more fortunate Italian texts.⁸² It would seem that the vernacular reader had its own criteria for establishing authority: in spite of the fame that figures like Pictorius, Lemnius or Rösslin and their works enjoyed within the learned medical community and in their own countries, their names did not mean much to him. Vernaculars readers in other countries probably thought the same of unknown, to them, Italian authors. Paradoxically, the texts attributed to classical or medieval authorities like Albertus Magnus or Apuleius, protagonist of the first phase of vernacular medical printing, enjoyed a much broader, Europe-wide circulation than those authored by contemporary doctors later on, and a larger number of re-editions. Although the production of health advice texts expanded considerably in terms of number of titles after 1550, their impact was much more localised spatially, and the majority just had one or very few editions.

Conclusions

This essay has given unusual attention to the early vernacular medical literature <u>published</u> in the first decades of print, stressing its fortunate, enduring reception and highlighting its indebtedness to the manuscript culture of the late Middle Ages. In so doing it has challenged the tendency to see the 16th century as the first significant period in the production of printed medical knowledge directed to a large audience, when not its outset.⁸³ I have shown that important precedents can be found even for the so called books of secrets, i.e. the recipe collections that allegedly appeared in print only into the 16th century, and suggested that these constitute, in any case, just one component of the much broader genre of vernacular medical advice flourishing from the early days of print. In exploring the purposes of this composite literature I have also stressed the need to put its practical value into proportions, suggesting that far from being just how-to manuals these texts fulfilled a major didactic function, which consisted in divulging and standardising, by fixing them on paper in simplified, accessible form, physiological concepts, anatomical knowledge and a medical vocabulary that readers were then eager to appropriate, as it can be inferred from their annotations.

The variable number of editions obtained by different titles belonging to this genre confirms however that the vernacular language, and even the small size of many of these books, were not sufficient to ensure the large appeal of the book. The complexity of

⁸² See above, p.?

⁸³ On this point see Minuzzi, 'La stampa medico-scientifica', esp. 1, 33.

the reasoning, even more than the at times convoluted prose rendered some of these books more suitable for a readership of medical professionals than of amateurs. And it is intriguing that the level of conceptual complexity of the work was also immediately made known to potential readers by the visual and physical characteristics of the book, in particular by the typographical characters used and by the spatial articulation of the text. Content and form, in other words, went hand in hand.

It can be argued that the number of editions is a poor indication of the success of a book if not coupled with information about the size of their print runs. However, these are very rarely mentioned and we must content ourselves with general estimates based on the few data available. They confirm, however, that the average number of copies printed was far from insignificant by modern standards. ⁸⁴ In Venice and in other important Italian printing centres the size of the print run varied from 400 to 1500 copies for incunabular editions, depending on the title. In the following century numbers stabilise around the average figure of 1,000 copies, although press runs for small format books often significantly exceeded this figure. We should never forget, in any case, that early modern books enjoyed a much longer life than modern ones and, as documented also by some of the examples discussed in the previous pages, they continued to be read and to change hands even centuries after the date of publication.

The evidence available on prices is also extremely scant. Yet, isolated examples confirm that in terms of costs, too, the disproportion between books that I have defined as highly 'popular' on the basis of the number of re-editions and of their visual presentation, and books that appear, by the same parameters, to be directed to professionals, is very significant. While the newly published edition of the pseudo-Albertus Magnus *De Le Virtù de le Herbe* costed only 4 Venetian soldi in 1555, Mercurio's obstetrical treatise *La commare* was put on the market at Lire 3.10 (equivalent to 60 1/2 Venetian soldi) in 1600: the former was therefore affordable also to a salaried worker (who in Venice would be paid 19 to 27 soldi per day in the period in question), the latter was entirely beyond his reach.⁸⁵

As for the final variable considered, the significance of the author's name in determining the success of a medical advice book, this is certainly of considerable relevance in the

⁸⁴ The following data are drawn from Nuovo, *The Book Trade*, chapter 3. For specific incunabular examples E.M.White, 'A census of Print runs for fifteenth-century books', CERL.org.resources.

⁸⁵ These costs are drawn from the Early Modern Book Prices database produced by the ERC funded project Early Modern Book Trade http://emobooktrade.unimi.it/db/public/prices/index. As the database is in fieri, at the time of consultation (14.4.2020) it contained prices for only seven books in the relevant typology.

first 80 years of printing, when titles are publicised (often inaccurately) as being authored by real celebrities belonging to a remote past. As we move to the second half of the 16th century, however, the author's identity, now more transparent as he is very often a living and in any case contemporary figure, has only a modest impact on the fortune of the book, especially beyond the locality or region where he operates. The patron dedicatee and the publisher and its distribution play a bigger role in determining the success of the title. So, even though the number of medical advice texts grows considerably over time, thanks to the new engagement of small provincial presses in publishing the works of minor, local authors, many of the books produced after 1550 have a more limited diffusion. They travel less and do not enjoy the transnational dimension experienced by their predecessors. The success of the latter, by contrast, carries on undisturbed as, through reprints and adaptations, works attributed to mythical medieval and classical authors continue to be read well into the second half of the following century, the period that begins to see the decline of the genre all together.