Rachel Louise Butler

Student Number: 960446371

PhD Thesis: 2014

Title: Hidden Mysteries and Open Secrets: Negotiating Age in Seventeenth- and Eighteenth-Century Culture.

CONTENTS

CHAPTER 1: INTRODUCTION

This thesis is about representations of male and female aging in early modern England. The aim of this study is to enrich our understanding of cultural discourses on aging by considering how this phenomenon was constructed in contemporary thought. The discourse analysis which characterises my study of the social construction of aging in the early modern period reflects the 'cultural turn' in history. Cultural definitions of age, which I too find useful, combine calendar years and functionality (when an individual is no longer able to care for him or herself) with other variables, and determines the understanding of age according to a society's particular value-system.[1] This definition has been most usefully applied to the study of old age, and reflects the development in historical research from a modernisation narrative that 'traced' the origins of the modern old-age pensioner to the eighteenth century, to the rather more fruitful idea that multiple truths of aging are produced within competing discourses that vary according to context.[2] Hence, Paul Johnson, in a recent series of essays on the history of

[1] Lynn Botelho and Pat Thane, 'Introduction', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), p. 4; Erin Campbell, 'Introduction', in Erin Campbell ed., *Growing Old in Early Modern Europe* (Aldershot and Burlington, 2006), p. 3; Susannah R. Ottaway, *The Decline of Life: Old Age in Eighteenth-Century England* (Cambridge, 2004), pp. 18-21; L.W. Simmons, *The Role of the Aged in Primitive Society* (New Haven, 1945), p. 15.

[2] Ottaway, *The Decline of Life*, pp. 9-13; Margaret Pelling and Richard M. Smith, 'Introduction', in Margaret Pelling and Richard M. Smith eds., *Life, Death, and the Elderly: Historical Perspectives* (London, 1991), pp. 2-5; Steve King, 'Reconstructing Lives and Social Structures in Britain: The Poor, and The Poor Law, and Welfare under Rural Industrialisation, 1650-1820', *Social History,* Vol. 22.3 (1997), pp. 318-338; Peter M. Solar, 'Poor Relief and English Economic Development before the Industrial Revolution', *Economic History Review,* Vol. 48.1 (1995), pp. 1-22; Pat Thane, *Old Age in English History: Past Experiences, Present Issues* (Oxford, 2002), pp. 147-158; Janet Roebuck, 'When Does Old Age Begin?: The Evolution of the English Definition', *Journal of ocial*

old age from antiquity to post-modernity, explains how this alteration in emphasis has led to an increased appreciation of 'the situatedness of historical texts within ambiguous and multiple constructions of meaning'. Indeed, as comparative anthropological research on the elderly in various cultures has revealed, there are few commonalities which unite such peoples across both space and time. This is a point which has been summarised by Joel Rosenthal who argues 'against any single "read" on old age as being correct, or all inclusive, or even preferred'.[3]

This approach has been successfully reflected in a number of edited collections on old age where early modern scholars have dismantled the often unhelpful assumption that the elderly were a homogenous group and also victims of the intangible forces of 'historical progress' and 'modernisation'.[4] As old age lacked the developmental milestones which marked childhood and early adulthood, scholars have rightly asserted the provisional nature of their conclusions on the beginnings of old age, given that these may also vary according to context.[5] As Pat Thane acknowledges, 'old age spans a long period of life, from the fifties or sixties to past one hundred, and it is questionable

---

History, Vol. 12.3 (1979), pp. 417, 419; Thomas R. Cole, *The Journey of Life: A Cultural History of Aging in America* (Cambridge, 1992), pp. 25-26.

[3] Paul Johnson, 'Historical readings of Old Age and Aging', in Pat Thane and Paul Johnson eds., *Old Age from Antiquity to Post-Modernity* (London and New York, 1998), p. 2; Joel T. Rosenthal, *Old Age in Late Medieval England* (Philadelphia, 1996), p. 30. See also Haim Hazan, *Old Age: Constructions and Deconstructions* (Cambridge, 1994), p. 53.

[4] Botelho and Thane eds., *Women and Ageing,* esp. pp. 1-2; Campbell ed., *Growing Old;* Pelling and Smith eds., *Life, Death, and the Elderly.*

[5] Margaret Pelling, 'Old Age, Poverty and Disability in Early Modern Norwich', in Pelling and Smith eds., *Life, Death, and the Elderly*, p. 76.

whether people over such a vast age range can be said to have common characteristics'.[6] Thus, whilst some scholars have put the beginnings of old age at the relatively young age of 40, others have put this at 50, 60 or even 70.[7] Naturally, old age is complex: 'It is not merely the final stage of life, uncomplicated and universally experienced. It has different meanings for different people, whether one is already older, or whether advanced age is still in one's future', as well as according to social status, economic security and gender.[8]

By considering the role of gender in the construction of old age, historians have illuminated some of the ways in which female old age was understood by contemporaries, and also how this process was thought to vary amongst early modern women. In the transition from women's history to gender history, the integration of old age within discourses that focused on the differences between the sexes was viewed as a logical extension of the intellectual terrain that was forged in dialogue with the hugely

---

[6] Thane, *Old Age in English History,* p. 4; Elles Bulder, *The Social Economics of Old Age: Strategies to Maintain Income in Later Life in the Netherlands 1800-1940* (Amsterdam, 1993), p. 13.

[7] Lynn Botelho, 'Old Age and Menopause in Rural Women of Early Modern Suffolk', in Botelho and Thane eds., *Women and Ageing*, pp. 43-65; Shulamith Shahar, 'Who were Old in the Middle Ages?', *Social History of Medicine,* Vol. 6.3 (1993), pp. 313-341; Keith Thomas, 'Age and Authority in Early Modern England', *Proceedings of the British Academy,* Vol. 62 (1976), pp. 3-46; Herbert C. Covey, 'Historical Terminology Used to Represent Older People', *The Gerontologist,* Vol. 28.3 (1988), pp. 325-337; Margaret Pelling, 'Old People and Poverty in Early Modern Towns', *Social History of Medicine Bulletin,* Vol. 34 (1984), p. 43; Susannah Ottaway, 'Introduction', in Susannah Ottaway, Lynne Botelho, and Katherine Kitteredge eds., *Power and Poverty: Old Age in the Pre-Industrial Past* (Westport, 2002), pp. 1-12; Alice Tobringer, 'Honor for Old Age: Sixteenth-Century Pious Ideal or Grim Delusion?', *Journal of Religion and Aging,* Vol. 1.3 (1985), pp. 1-21; Anne Kugler, '"I Feel Myself Decay Apace": Old Age in the Diary of Lady Sarah Cowper (1644-1720)', in Botelho and Thane eds., *Women and Ageing*, pp. 66-88.

[8] Botelho and Thane, 'Introduction', p. 3.

influential impact of Second Wave Feminism. Indeed, the acknowledgement that gender played an important role in generating multiple definitions of old age partly arose in response to what some scholars have perceived as a natural affinity between old age and the elderly, the social and intellectual impetus of women's history, and the gradual shift towards gender history. Before this important political and intellectual watershed it was assumed that the life experiences of women differed little from those of men, and the actions of women had little influence on the world. This state of affairs may have remained unchanged for longer if not for the influence of Second Wave Feminism, without which women's history would not have been transformed from a minority strand in historical practice to a widespread intellectual movement. In many ways, however, the increased consciousness of women's political identity was inversely related to the absence of women in history, recorded or otherwise. Consequently, scholars of women's history, old age, or both, initially struggled with fundamental definitions. Although they succeeded in highlighting the different experiences of the sexes in the past, this also had the unfortunate and unintended consequence of grouping women together as if they shared similar experiences regardless of age and class. By the 1980s, however, historians began to question the existence of women as a 'pre-given category'.[9]

An important aspect in this development was the growing importance of gender. Joan Scott's response is well known, with her seminal statement declaring the usefulness of gender as a category of analysis. This involved the idea that the characteristics ascribed to and accepted by women varied according to class and race and changed over time. Important, too, is the idea that 'gender identities are not merely shaped by historical

[9] Laura Lee Downs, *Writing Gender History* (London, 2004), pp. 20-29; Botelho and Thane, 'Introduction', pp. 2-3.

context: class, race and politics are implicated in the construction of masculinity and femininity, but gender simultaneously constructs other axes of social differentiation'.[10]

How far gender history has progressed in tandem with old age in early modern historiography shows how far we have come and where future historical research may be concentrated. How gender has shaped the study of old age also provides a point of departure for this study, which looks at male as well as female aging. So far scholars have directed attention mainly to the subject of female old age. Indeed, in some quarters at least, the idea that we know more about male than female old age remains pervasive. This view involves the truism that that 'the world was male, the documents it generated were also "male" in that they reflected male concerns and recorded developments of importance to males'.[11] The idea that we know more about how men aged than women also reflects assumptions about the gendered nature of contemporary sources. Although not all historians assume this view, it nevertheless remains evident that because contemporary paradigms such as the ages of man reflected the progress of men through life, the reconstruction of female old age remains a priority. Indeed, only recently, Hilda Smith warned historians about reading women into sources that did not concern them, when women were neither the subject nor concern of contemporary authors. Smith advises scholars to consider and be alert to the presence of a 'false universal' in contemporary sources. The false universal, or persistent references in contemporary sources to 'all', Smith argues, assumes the inclusion of women, when 'all' actually means

[10] Kevin Passmore, 'Review: *Feminism & History,* ed., Joan Wallach Scott (1996, London and New York)', *Women's History Review*, Vol. 7.2 (1998), pp. 261-264; Joan Scott, 'Gender: A Useful Category of Historical Analysis', *American Historical Review*, Vol. 91.5 (1986), pp. 1053–1075.

[11] Botelho and Thane, 'Introduction', pp. 2-3.

the inclusion of 'all men'.[12] Mary Dove has also offered a word of caution against viewing the ages of man in gender neutral terms by stating that 'we need to remind ourselves that "man" in the ages of man is not normally an inclusive term, and that when I talk about "man's life", I am not being inclusive, either'.[13] As Thomas R. Cole has also argued, women only entered the ages of man narrative when they were assigned a prominent role in the 'civilizing process', and only then as help-meet of man in the creation and maintenance of a proper family, but not as a subject in their own right.[14]

Feminist scholars have long since acknowledged that men justified their domination of the production of knowledge by claiming that their interests were universal and sexually neutral. This remains a useful caveat for historians to bear in mind regardless of their specific historical interests.[15] Nevertheless, the argument that historical sources both refer to and include all men to the detriment of all women needs qualification. Although, as I will argue throughout this study, some ideas about male aging are misplaced, I also believe that an exclusive focus on female old age remains a legitimate avenue of enquiry if we do not make assumptions about male aging by default. Historians have, for instance, convincingly documented in the course of their research into aspects of the reproductive life-cycles of the sexes that men and women's experiences of aging were different. Although both experienced cycles of ascent and decline in terms of reproductive viability

[12] Hilda L. Smith, "'Aging": A Problematic Concept for Women', *Journal of Women's History,* Vol. 12.4 (2001), pp. 78.

[13] Mary Dove, *The Perfect Age of Man's Life* (Cambridge, 1986), p. 25; Pat Thane, 'Social Histories of Old Age and Aging', *Journal of Social History,* Vol. 37.1 (2003), p. 105.

[14] Cole, *The Journey of Life*, pp. 25-26.

[15] Elizabeth Grosz, 'Bodies and Knowledges: Feminism and the Crisis of Reason', in L. Alcoff and E. Potter eds., *Volatile Bodies: Toward a Corporeal Feminism* (New York and London, 1994), pp. 204-209.

and senescence, it is also fair to say if we take the menopause as a signifier of entry into old age (and this remains a point of debate amongst historians) that women's experiences of aging may have been more sudden and more obvious than men's.[16] Historians have also suggested, as some contemporaries did too, that women aged faster than men and passed through the stages of life at a more rapid pace. Other scholars have emphasised the contemporary belief that women passed through fewer life stages than men, and that it was fairly common to divide a woman's life into only three parts: defined more by function rather than chronology. Aki C. L. Beam believes that the tripartite division of a woman's life implied that for many contemporaries female old age was a single stage, entered not gradually, but all at once.[17] These conclusions have been

[16] Katherine Gustafson, 'Life Stage Studies and the Eighteenth Century: Reading Age in Literature', *Literature Compass,* Vol. 11.8 (2014), pp. 528-537; Sarah Toulalan, "'Age to Great, or to Little, Doeth let Conception": Bodies, Sex and the Life Cycle, 1500-1750', in Sarah Toulalan and Kate Fisher eds., *The Routledge History of Sex and the Body 1500 to the Present* (London and New York, 2013), pp. 279-295; Lynn Botelho, 'Old Age and Menopause in Rural Women of Early Modern Suffolk', in Botelho and Thane eds., *Women and Ageing,* pp. 43-65; Sara Mendelson and Patricia Crawford, *Women in Early Modern England, 1550-1720* (Oxford, 1998), p. 3. In response to Lynn Bothelo's view that both menopause and old age occurred around the age of 50, Sarah Read has argued that menopause was both gradual and more likely to cease completely nearer the age of 60. Sara Read, *Menstruation and the Female Body in Early Modern England* (Basingstoke, 2013), p. 173.

[17] The specific editions of the ages of man which Beam refers are included in: N.H., *The Ladies Dictionary, Being a General Entertainment of the Fair-Sex. A Work Never Attempted before in English* (London, 1694), p. 30; Thomas Browne, *Pseudodoxia Epidemica: or, Enquiries into Very Many Received Tenents, and Commonly Presumed Truths* (London, 1676), p. 178; Richard Steele, *A Discourse Concerning Old-Age, Tending to the Instruction, Caution and Comfort of Aged Persons* (London, 1696); Aki C.L. Beam, "'Should I as Yet Call You Old?" Testing the Boundaries of Female Old Age in Early Modern England', in Campbell ed., *Growing Old,* pp. 95-116; Covey, 'Definitions', p. 239.

refined further, allowing for the varying experiences of old age that were constructed by marital status and a woman's relative poverty or wealth.[18]

Historians, in making valid observations about women's experiences of old age, have sometimes implied an axis of differentiation from male aging too. Hence, the resilience of the proposition in early modern historiography that women aged sooner than men, and to a large degree, that the process of aging was sexed.[19] This argument has remained undisturbed in scholarly contributions to the subject of old age and also reflects the uneven development of gender history. Stephen Garton has suggested that despite years of sustained feminist critique and the emergence of gender history as a flourishing area of scholarship grounded in research on the construction of masculinity and femininity,

> essentialist notions of fundamental and inherent differences between men and women have proved remarkably resilient. Sometimes essentialism ... is paradoxically, an outgrowth of

[18] Botelho, 'Old Age and Menopause', pp. 43-65; Margaret Pelling, 'Who Most Needs to Marry? Ageing and Inequality Among Women and Men in Early Modern Norwich', in Botelho and Thane eds., *Women and Ageing,* pp. 31-42; Kugler, "'I Feel Myself Decay Apace"', pp. 66-88; Ottaway, *The Decline of Life,* pp. 173-220, 247-277; Sarah Brophy, 'Women, Aging, and Gossip in Lady Mary Wortley Montagu's Letters of the 1720s', *The Eighteenth Century,* Vol. 45.1 (2004), pp. 1-20.

[19] Amanda Vickery, 'Mutton Dressed as Lamb? Fashioning Age in Georgian England', *Journal of British Studies,* Vol. 52.4 (2013), pp. 858-886; Gail Kern-Paster, 'The Unbearable Coldness of Female Being: Women's Imperfection and the Humoral Economy', *English Literary Renaissance,* Vol. 28.3 (1998), pp. 416-440; Botelho, 'Old Age and Menopause', pp. 43-65; Beam, "'Should I as Yet Call You Old?", pp. 95-116; Erin J. Campbell, "'Unenduring" Beauty: Gender and Old Age in Early Modern Art and Aesthetics', in Campbell ed., *Growing Old*, pp. 153-168.

> feminist campaigns for equal rights. Sometimes essentialism is an assertion of difference usually supported through an appropriation of scientific evidence ... to claim that the sexes are fundamentally and forever different and forever different in ways that cross all times and cultures.[20]

Although essentialism is largely absent from historical research into age, the idea that women and men's experiences of old age were different, if not incommensurably so, continues to reverberate in scholarly contributions to this subject. Indeed, in a recent review of one edited collection on the cultural representations of old age in early modern Europe, Susannah Ottaway noted that historians' use of George Miniois' work as a foil for the continuing assertion of misogyny in contemporary discourses of age, represents an outdated straw man that keeps the focus on the aging experiences of women to the neglect of men. Ironically, by continuing to repeat Miniois' assertion that matriarchy and the culture of women is lost to posterity, historians have simultaneously created a need for more research on female old age by undermining their own nuanced contributions to the subject.[21]

---

[20] Stephen Garton, 'Manhandled: Battle Lines in Manliness and Masculinity', *Gender and History,* Vol. 20.2 (2008), p. 416; Londa Schiebinger, 'Has Feminism Changed Science?', *Signs,* Vol. 25.4 (2000), pp. 1171-1175.

[21] Susannah Ottaway, 'Review: Campbell, Erin (ed.), *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot, 2006)', *Journal of Early Modern History,* Vol. 13 (2009), p. 78; Thane, *Old Age in English History*, pp. 21-24; Minois cited in Thane, 'Social Histories of Old Age', p. 94; Georges Minois, *History of Old Age: from Antiquity to the Renaissance,* trans. S. Hanbury Tenison (Oxford, 1989); Botelho and Thane, 'Introduction', pp. 1-12.

The conflation of women and gender which continues to inform scholarly contributions to old age is not due to essentialism on the part of historians or any uninformed assumptions about male old age as a known quantity. Historians of early modern England first became interested in manhood in the mid-1980s, and over the following 20 years the field has expanded to encompass topics like patriarchy and marital relations, crime and violence, religion and popular culture, and civility and honour. It is only very recently, however, that male age has become a topic of interest. Several historians have found that in many ways the aging male was conceptualised differently from the aging female, but in many other respects was represented as similar in both medical and popular discourses.[22] These contributions to early modern manhood post-date some of the most recent contributions to female old age, so it remains to be seen how a focus on how the aging experiences of early modern men will affect the scholarly terrain of gender that is inclusive of concepts of masculinity and femininity. Nevertheless, as I will show during the course of this study, histories written about men and the deconstruction of notions of hegemonic manhood have the power to disturb any assumptions we may still hold about sexed aging in the early modern period.[23]

Whilst the history of manhood, or masculinity, as some prefer, is a relative newcomer to early modern historiography, it is an increasingly popular subject. Nevertheless, as Karen

[22] Tim Reinke-Williams, 'Manhood and Masculinity in Early Modern England', *History Compass,* Vol. 12.9 (2014), pp. 685-693; Marja van Tilburg, 'Tracing Sexual Identities in "Old Age": Gender and Seniority in Advice Literature of the Early-Modern and Modern Periods', *Journal of Family History*, Vol. 34.4 (2009), pp. 369-386; Helen Yallop, 'Representing Aged Masculinity in Eighteenth-Century England: The "Old Man" of Medical Advice', *Cultural and Social History,* Vol. 10.2 (2013), pp. 191-210.

[23] Robert W. Connell, and James W. Messerschmidt, 'Hegemonic Masculinity Rethinking the Concept', *Gender and Society,* Vol. 19.6 (2005), pp. 829-859.

Harvey has argued, a history of gender that is also tied to the history of masculinity is regarded by some as 'deeply reactionary'. Some forms of male history have been criticised on the basis that gender history, which is inclusive of men, represents 'a male tool used in an attempt to dissipate women's power whereby women become historically viable subjects only when placed alongside men'.[24] For some, like Judith Bennett, however, the task of gender historians is not to emphasise the power of women in the past but to underscore their continuous, unchanging oppression at the hands of male patriarchy.[25] Power, too, is at the heart of Joan Scott's definition of gender, although in a very different way. Gender, according to Scott, is 'a primary way of signifying power relationships' and 'a constitutive element of social relations'. Gender is also a crucial part of the organisation of equality or inequality that relied on 'generalized understandings of the so-called natural relationship between male and female'. Thus the power relationships that have constructed the opposition between males and females is, itself, part of a generalised understanding of the relations between the sexes that looks 'sure and fixed', but in practice may be deeply unstable. Hence, in reality, 'man' and 'woman' are 'at once empty and overflowing categories. Empty because they have no ultimate transcendent meaning. Overflowing because when they appear fixed, they still contain within them alternative suppressed definitions'.[26]

[24] Karen Harvey, 'The History of Masculinity, circa 1650-1800', *The Journal of British Studies,* Vol. 44.2 (2005), p. 296; June Purvis and Amanda Weatherill, 'Playing the Gender History Game: A Reply to Penelope J. Corfield', *Rethinking History,* Vol. 3.3 (1999), pp. 333-338, at 335.

[25] Judith Bennett, 'Feminism and History', *Gender and History,* Vol. 1 (1989), p. 259.

[26] Joan Wallach Scott, *Gender and the Politics of History* (New York, 1988), p. 2; Scott, 'Gender', p. 1074.

The acknowledgement that patriarchy is constituted by power relations based in part on an unstable binary opposition that constructs the sexes along the lines of male superiority and female inferiority has yielded results in the field of early modern manhood. Alexandra Shepard, for instance, has argued that specific meanings of manhood and how these intersected with character traits of the ideal-type householder prevented any 'straightforward linkage of manhood with patriarchal ideals'. Moreover, broader hierarchies which separated superior men from inferior men were informed by patriarchal prescriptions of male self-sufficiency, economic independence and responsibility towards others, although many men were excluded from the kinds of status that was dependent on participation in credit networks. Therefore, the construction of credit in early modern England created hierarchies of men based on age and socioeconomic status. Those men without access to credit, along with women, were classed as subordinate men. Subordinate men were likely to have been in the majority for two reasons: the first, because few men could hope to achieve the independence that characterised the idealised patriarch, and the second, because in a period of abundant labour and few resources 'many men were denied such an easy maturation process into an economically autonomous manhood'.[27]

Patriarchy itself was inherently unstable however. On the one hand, it was portrayed by men who wielded the power of the patriarch as part of the natural order. On the other hand, it was reflected in the construction of masculinity 'which always seemed

[27] Alexandra Shepard, 'Manhood, Credit and Patriarchy in Early Modern England *c.*1580-1640', *Past and Present,* Vol. 167 (2000), pp. 76-77, 79, 82, 89, 96, 98, 101.

threatened and provisional'.[28] The ideology of patriarchy, as Elizabeth Foyster reminds us, 'led to the construction of a system of morality which rewarded or chastised those who succeeded or failed to live up to its requirements'. Some of the ways in which patriarchy was threatened, moreover, had a certain resonance with ideas of aging. Male honour stemmed from virtuous actions and a man's self-mastery. A man's honour was nevertheless endangered by drunkenness and dissolute sexual behaviour, which in turn influenced the premature decline of the male body. The observations of historians writing on the subject of early modern manhood also has the power to alter pre-existing ideas not only about how men aged but how women aged too. Gender history is after all, 'relational history. It seeks to examine the sexes not in isolation, but rather the relations between the sexes'.[29] The oppositional character of the sexes as they were represented in early modern discourse relied upon a fantastical notion of the simple separation of 'public and private', with women confined to the household and men engaged in business dealings with other men and operative within the public sphere. In practice, access to these sharply defined roles were highly complex, and for many men and women, far from given.[30]

I have related historians' engagements with the subject of early manhood in depth because it influences my approach to the subject of aging. I am interested in how the subtle nuances of gender that are an accepted part of historical research into masculinity

[28] Anthony Fletcher, 'Manhood, the Male Body, Courtship and the Household in Early Modern England', *History,* Vol. 84.275 (1999), p. 420.

[29] Elizabeth A. Foyster, *Manhood in Early Modern England: Honour, Sex and Marriage* (Harlow, 1999), pp. 5, 7, 8-9, 39, 40-41, 1.

[30] Shepard, 'Manhood, Credit and Patriarchy', pp. 76-79.

and femininity can inform our understandings of sexed aging in the early modern period. Although we should not assume that the pronounced fractures in concepts of manhood have an automatic resonance to aging and how the sexes experienced this phenomenon, it is my contention that they did. I argue that the pervasive cultural idea that aging was sexed represented ideal relations between the sexes that were inapplicable in practice. By this I mean that the notion that women faced disadvantages in the aging process, in terms of their propensity to age sooner and progress through each life stage at a more rapid pace than men, was predicated on very narrow foundations of gender. In other words, sexed aging relied on the very concepts of hegemonic masculinity and femininity that have so successfully been debunked in recent years by historians. Aging was therefore complicated by distinctions drawn in early modern discourse between subordinate and inferior men, and women's experiences of aging were mediated by how far they departed or conformed to sharply defined roles that both normalised their sex and their differences with men.

Ideas of sexed aging also relates to how sexual difference was understood during this period. This issue alone has generated a great deal of discussion amongst historians. In writings about early modern gender, few ideas have had the impact of the 'one-sex model', which emphasised a male-centric, hierarchical paradigm in which the female body was regarded as an analogous, inverted version of the male body, in both anatomy and physiology wherein the genital parts of women differed from those of men by their position. It has been argued, most notably by Thomas Laqueur, that the one-sex model was replaced during the eighteenth century by a two-sex model which emphasised sexual

difference.[31] Although Laqueur's thesis has attracted supporters and detractors in equal measure, a number of historians agree that whilst the one-sex model had little to do with genitalia, the fluid nature of sexual difference nevertheless had a presence in early modern thought.[32]

This realisation need not entail a complete abstraction of the relations between the sexes as they were understood at this time. Instead, it involves us thinking of the body as a

---

[31] Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to the Freud* (Cambridge MA, 1990), pp. 4-5, 25-9, 34-5, 60-2, 149-51, 155, 157; Thomas Laqueur, 'Orgasm, Generation, and the Politics of Reproductive Biology', in Christine Gallagher and Thomas Laqueur eds., *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century* (Berkeley, 1987), pp. 1-41; Ian Maclean, *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life,* (Cambridge and New York, 1980), pp. 30-31; Wendy D. Churchill, 'The Medical Practice of the Sexed Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 18.1 (2005), pp. 3-22.

[32] Supporters of Laqueur's theory include: Londa Schiebinger, 'Skeletons in the Closet: The First Illustrations of the Female Skeleton in Eighteenth-Century Anatomy', in Gallagher and Laqueur eds., *The Making of the Modern Body,* pp. 42-82; Londa Schiebinger, *The Mind Has No Sex? Women in the Origins of Modern Science* (Cambridge and London, 1989); Roy Porter, 'History of the Body', in Peter Burke ed., *New Perspectives on Historical Writing* (University Park, Pennsylvania, 2001), pp. 233-260; Anthony Fletcher, *Gender, Sex and Subordination in England 1500-1800* (New Haven, 1995). Those who have questioned the linear progression of Laqueur's model from one-sex to two-sex and/or the chronology of his hypothesis include: Jonathan Sawday, *The Body Emblazoned: Dissection and the Human Body in Renaissance Culture* (London and New York, 1995); Karen Harvey, 'The Substance of Sexual Difference: Change and Persistence in Representations of the Body in Eighteenth-Century England', *Gender and History,* Vol. 14 (2002), pp. 202-223; Michael Stolberg, 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries', *Isis,* Vol. 94.2 (2003), pp. 274-299; Janet Adelman, 'Making Defect Perfection: Shakespeare and the One-Sex Model', in Viviana Comensoli and Anne Russell eds., *Enacting Gender on the English Renaissance Stage* (Urbana, 1999), pp. 23-52.

type of 'coat rack', 'upon which differing cultural artifacts, specifically those of personality and behavior, are thrown or superimposed'. One crucial advantage of such a position is that that it allows for commonalities and differences to be observed both between and amongst the sexes.[33] Thus, sexual difference is naturalised not by the inherent biological distinctions between men and women but in the ways in which this is supposed to be expressed through gendered characteristics that are labelled as 'male' and 'female'.

Unlike Dror Wahrman who has asserted that sexual difference was fixed at this time, I would argue that sexual difference only looked fixed because it was normalised by distinct conceptions of masculinity and femininity.[34] It is when we disentangle these associations, as contemporaries did too, that we can more clearly perceive the assumptions that on the surface, at least, naturalised both sexual difference and sexed aging. Taking just one example of how this worked, we may consider contemporary explanations for menstruation. Contemporary physicians believed that menstruation was generated in response to a sedentary life-style which formed part of the typical characteristics of the female sex and the functions of the female body. Men, on the other hand, because of the presumption that they were the more active sex, were able to dispose of their superfluous humours through the sweat and toil of their more physical labours. Like these 'natural' characteristics of the sexes, aging was mediated by the

[33] Linda Nicholson, 'Interpreting Gender', *Signs,* Vol. 20.1 (1994), p. 81.

[34] Dror Wahrman, 'Percy's Prologue: From Gender Play to Gender Panic in Eighteenth-Century England', *Past and Present,* Vol. 159 (1998), pp. 113-160; Dror Wahrman, 'Gender in Translation: How the English Wrote their Juvenal, 1644-1815', *Representations,* Vol. 65 (1999), pp. 1-41.

assumption that men and women had distinct relations with the world and each other.[35] Aging, as Helen Yallop has recently commented, depended not only on the physical experiences of the body, but also the 'social, spiritual, moral, historical and cosmological'. Bodies were, moreover, perceived to grow old in response to certain externalities and experiences.[36] Indeed, understandings of aging in the early modern period was shaped by what Anje Kampf and Lynn Botelho have termed 'boundary work', the confluence of various discourses that both illuminated and complicated the distinctions between health and disease and normal and pathological aging. Aging constitutes a category at the junction of the medical, social and philosophical fields. Indeed, since Antiquity, until the eighteenth century at least, it was addressed by each of those fields. Aging was a process, moreover, that was negotiated by each and every individual: good health and long life depended on a harmonious balance between the body and the elements of the macrocosm. How best to achieve this was the focus of the proliferation of contemporary texts that were concerned with health regimes, the components of which included diet, exercise and life-style to attain longevity. Adding to these ideas was a dramatic change of approach to aging from the idiosyncratic nature of the humoural body in the seventeenth century, to something more complex in the

[35] Wendy D. Churchill, 'The Medical Practice of the Sexed Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 15.1 (2005), p. 12; Thomas W. Laqueur, 'The Rise of Sex in the Eighteenth Century: Historical Context and Historiographical Implications', *Signs,* Vol. 37.4 (2012), pp. 803-804; Nicolaas Fonteyn, *The Womans Doctor, or, An Exact and Distinct Explanation of all Such Diseases as are Peculiar to that Sex* (London, 1652), p. 1; Alexandra Lord, '"The Great *Arcana* of the Deity": Menstruation and Menstrual Disorders in Eighteenth-Century British Medical Thought', *Bulletin of the History of Medicine,* Vol. 73.1 (1999), pp. 38-63.

[36] Helen Yallop, *Age and Identity in Eighteenth-Century England* (London, 2013), p. 41.

eighteenth, where the aging process was culturally shaped through individual reason and action.[37] When these experiences varied, it followed that experiences of aging varied too.

How male aging compared with female aging in this context is nevertheless difficult to assess. The methodological difficulty in comparing and contrasting the bodily characteristics of the sexes has been well noted. Indeed, although the spectrum of sexual difference invoked in contemporary discourse involved hierarchies of male bodies, the gender hierarchy which this subsumed, always placed males above females.[38] Whilst this affords limited opportunities to view women as anything other than subordinate to men it is also important to acknowledge that any representation of the body that seeks to represent the male and female bodies as anything other than oppositional is, to a certain extent, contrived. 'The selection of a particular image of the human body', as Moira Gatens has argued, 'will be a selection from a continuum of differences'.[39] In the same way that the construction of male and female bodies depends on a selection from a continuum of differences, how we understand the ways in which men and women aged depends on the particular ideas of aging we engage with. In different representations of aging, gender was not always the primary means of signifying who aged and when.[40] Sometimes class was more important. As Chris Gilleard has argued, aging, for many men and women was a political as well as a personal issue. In humanist writings, the emphasis

[37] Anje Kampf and Lynn A. Botelho, 'Anti-Aging and Biomedicine: Critical Studies on the Pursuit of Maintaining, Revitalizing and Enhancing Aging Bodies', *Medicine Studies,* Vol. 1.3 (2009), pp. 187-195; Sarah Carvallo, 'Ageing in the Seventeenth and Eighteenth Centuries', *Science in Context,* Vol. 23.3 (2010), pp. 267-288.

[38] Alexandra Shepard, *Meanings of Manhood in Early Modern England* (Oxford and New York, 2003), pp. 49.

[39] Moira Gatens, *Imaginary Bodies: Ethics, Power and Corporeality* (London, 1996), p. vii.

[40] Scott, 'Gender', pp. 1069-1075.

on aging well and living long elided virtue and well-being with appropriate civic conduct. This conflated a good life-style with the typical life-style of the upper echelons and 'an appreciation of wealth as the foundation of civic action and even a condition for the exercise of civic virtue'.[41] Indeed, how contemporaries conceptualised aging throughout the seventeenth and eighteenth centuries not only varied but emphasised intersecting hierarchies that related to the perceived differences both between and amongst the sexes. Thus ideas of aging varied not only because the ways in which this phenomenon was understood also varied: from the structured nature of the ages of man to the more fluid nature of the humoural body in the seventeenth century and the nervous body in the eighteenth, but also because many issues to do with gender also remained unresolved. These in turn posed questions of ethical and political significance that related to presentations of hegemonic masculinity and femininity, women's relegation to the home and the universalising nature of male patriarchy.[42]

Whilst I will argue that women were not always disadvantaged in the aging process when compared to men, mainly because of the aforementioned unresolved issues that concerned gender, the ways in which these were expressed nevertheless varied between the sexes. Therefore, although the aging experiences of men and women were shaped by similar forces that involved the inseparable nature of their bodies from the world at large, these were also expressed in distinct ways. Whilst I agree with Anthony Fletcher that sexual difference was a 'shifting sands' for much of this period, I do not agree that

[41] Chris Gilleard, 'Renaissance Treatises on "Successful Aging"', *Aging and Society,* Vol. 33.2 (2013), pp. 190, 196.

[42] Ian Maclean, 'The Notion of Woman in Medicine, Anatomy, and Physiology', in Lorna Hudson, Joan Kelly and Lisa Jardine eds., *Feminism and Renaissance Studies* (New York, 1999), pp. 127-135.

this resulted in sexual roles becoming playful, and although the sex/gender system was dynamic, too, this did not constitute a playful dialogue either.[43] What the sex/gender system managed to do was subordinate some men and women at the expense of others. This was not only expressed by the propensity for certain social groups to age sooner than others but also underwrote men and women's relative abilities to successfully traverse the stages that comprised the typical early modern life-cycle. This meant that whilst many men were denied the easy maturation process that made them autonomous subjects, many women too, were denied the aspects of their identity that depended on them developing into mature women.

This study, therefore, connects the important observations of historians on early modern manhood with the important and incisive work on early modern women's experiences of old age. For men this includes puberty, fecundity and senescence in old age. For women, the impressive body of research that comprises our understandings of the female life-cycle and life-stages and includes menarche, menstruation and menopause. Like many historians, my approach to the texts that comprise the basis for my analysis of aging in the early modern period involves reading sources for their semantic content, whilst also considering how the particular circumstances in which a source was constructed affected the conventional message it was trying to communicate.[44] In Chapters 2 and 3 of this thesis, for example, which consider theories and practices of aging, my main sources are contemporary medical texts. The proliferation of these sources reflects an important switch during the early modern period between regimens of health, dedicated to and written for individual rulers, to regimens of health directed at the public. As such, the

[43] Fletcher, *Gender, Sex and Subordination,* p. 83.

[44] Garthine Walker, *Crime, Gender and Social Order in Early Modern England* (Cambridge, 2003), p. 6.

sources I will draw upon are broad. They include vernacular medical texts and more popular literature on aging, including early modern almanacs. Whilst this helps illuminate how knowledge of aging was part of a shared discourse that was inclusive of both medical professionals and ordinary people, it is nevertheless important to consider how cultural representations of sexed aging also involved the repression of alternative meanings of masculinity and femininity.[45] Acknowledging, too, that these sources were constructed within certain discursive fields that privileged certain meanings of masculinity and femininity at the expense of others exposes the provisional nature of conclusions regarding 'male' and 'female' aging.

In Chapter 4, where I examine aging as a concept that related to the mind and the expression of cognitive faculties, I will demonstrate how contemporary theologians, educationalists and physicians had different ideas about how age related to the acquisition and eventual loss of mental capacities throughout the life-course. These ideas were conceptualised within a number of competing discourses that related to far-reaching changes in how contemporaries understood the nature of human mentality. I will analyse how and why theologians and other early seventeenth-century theorists related emerging and declining mental powers to the soul and why the empirical approach pioneered by John Locke and others meant that for the first time during the early modern period cognitive faculties were properly thought to develop. I will also consider the exclusionary practices at the heart of ideas of normal and abnormal mental development and how these ideas were filtered through early modern concepts of idiocy. Gender and class provided focal points for discussions amongst contemporaries about whether, in terms of the ability to acquire knowledge and exercise faculties that were

[45] Gilleard, 'Renaissance Treatises', p. 203; Scott, 'Gender', pp. 1067-1068.

deemed reflective of an 'intelligent' human subject, men and women developed psychologically in the same way. Ideas about mental faculties and their expression, as I will also demonstrate, were reflective of broader power relations between the elites who defined the parameters of intelligence and those who were excluded on the basis of either gender, class or both. Concepts of normal and abnormal mental development, then, in their application to specific groups of people, were inseparable from the social biases they inspired. Where they are found in scholars contributions to this subject, I have also related how ideas of cognitive functions related in practice. Concepts of idiocy were negotiated in the Courts of Wards and Liveries during the early modern period. The crucial conceptual distinction that arose from problems of property and title inheritance in these courts involved the one between idiots and lunatics. Legal doctrine distinguished between those who were unfit to inherit because of supposedly innate mental incapacity (idiots) and those who could be temporarily deprived of their inheritance while they were judged to be out of their minds (lunatic).[46] Tests of memory and the ability to reason effectively from basic propositions were involved in identifying idiots.[47]

In Chapter 5, I will consider ideas of the early modern reproductive life-cycle, as they applied to early modern men and women and related to concepts of gender and class. This builds upon the research of early modern scholars into menarche, puberty, menopause and declining reproductive in males. The aims of this chapter are three-fold: to demonstrate firstly that ideas of the reproductive life-cycle were inextricably linked to

[46] Bernard Clarke, *Mental Disorder in Earlier Britain* (Cardiff, 1975), p. 58.

[47] Peter Rushton, 'Idiocy, the Family and the Community in Early Modern North-East England', in David Wright and Anne Digby eds., *From Idiocy to Mental Deficiency Historical Perspectives on People with Learning Disabilities* (London, 2002), p. 51.

ideas about aging, and secondly that the typical life-cycle, as it was related by contemporaries, was inapplicable to many early modern men and women. Thirdly, and finally, I will illustrate how the exclusionary practices that were at the heart of the early modern reproductive life-cycle were inseparable from gender: how contemporaries related masculinity and femininity to men and women. This means that the reproductive stages that characterised the male and female life-cycle were contingent on certain ideas of gender. If a woman or man did not live up to contemporary physicians' expectations of femininity and masculinity, life-cycle change was either less pronounced or entirely displaced. Ideas of subordinate and inferior manhood were, for instance, at the heart of contemporary interpretations of the male reproductive life-cycle. In the female life-cycle, reproductive processes were linked to essentialist ideas about women's typical behaviours and characteristics that were, in practice, inapplicable to many women. Hence, ideas of the life-cycle that took the form of a binary opposition might look as if they were universally applicable but on closer inspection the terms on which they were predicated can be seen to exclude certain sorts of people. The sources used in this chapter are predominantly vernacular printed texts. These outlined the conventions and debates of medical theory circulating amongst medical practitioners that related to puberty, ideas of reproductive and sexual competence in male and female adulthood (and conversely infertility and impotence) and the declining reproductive fecundity that was expected in old age. These were aimed at other medical practitioners and also appear to have been written with a broader audience in mind.[49]

[49] Toulalan, "'Age to Great, or to Little, Doeth let Conception", p. 281; John Komlos, 'The Age at Menarche in Vienna: The Relationship between Nutrition and Fertility', *Historical Methods,* Vol. 22.4 (1989), p. 158; Lord, "'The Great *Arcana* of the Deity'", pp. 49-50; Herbert Moller, 'Voice Change in Human Biological

In Chapter 6, I will establish how some of the ideas about sexual and reproductive development that were explored in Chapter 5, worked in practice. This is demonstrated in a case study of medical witnesses' testimonies in rape trials at the Old Bailey during the period 1674-1800. I will illustrate how understandings of sexual and reproductive development and decline formed an inseparable part of midwives, physicians and surgeons' judgements about whether rape had occurred. I will also demonstrate how ideas of the life-cycle, as these were related by medical witnesses to female children, adolescents, and single women, married women and widows were thought to obfuscate the bodily signs of rape. In these instances, Laura Gowing's comment that sexual difference was 'made flesh' by social context of the sexual body, including talk, touch and the law, is particularly apt.[51] Medical witnesses also had to contend with issues of idiosyncratic development in females and how this varied the signs of rape displayed on body. The central question of this chapter, therefore, concerns the ways in which ideas of age and the female life-cycle intersected, in different ways, to contribute uncertainly to rape. The omission of the body of the male rapist in this chapter suggests a departure from the themes of this thesis so far, given my emphasis on the aging experiences of men and women. Yet as I will illuminate in this case study, the negation of rape in some instances stemmed from the displacement of the male body's contribution to the physical injuries that were suggestive of the sexual violation of the female body. This, as I will show, can be traced to culturally resonant ideas about sexual development at

---

Development', *Journal of Interdisciplinary History,* Vol. 16.2 (1985), pp. 239-253; Walker, *Crime, Gender and Social Order,* p. 6.

[51] Laura Gowing, 'Women's Bodies and the Making of Sex in Seventeenth-Century England', *Signs,* Vol. 37.4 (2012), p. 815.

puberty. The sources that comprise the main body of my analysis in this chapter are the *Proceedings of the Old Bailey.* The *Proceedings* began to be published from 1674 and they quickly became a regular periodical, with editions published eight times a year following each session of the court. The *Proceedings* were cheap, widely circulated and aimed at a popular audience. The publication of the periodical also reflects a growing surge in the dissemination of popular literature about crime at this time. As a result, a wider audience were more aware than ever of the meanings of rape and age that were produced in a legal context, although as we shall see, these were rarely reported in the *Proceedings* in an unmediated way.[52]

[52] Robert B. Shoemaker, 'The Old Bailey Proceedings and the Representation of Crime and Criminal Justice in Eighteenth-Century London', *The Journal of British Studies,* Vol. 47.3 (2008), pp. 559-580; Garthine Walker, 'Everyman or a Monster?: The Rapist in Early Modern England, c. 1600-1750', *History Workshop Journal,* Vol. 76.1 (2013), pp. 119-220.

CHAPTER 2: THEORIES OF AGING

Age and aging was conceptualised within a number of different models and paradigms during the seventeenth and eighteenth centuries. Contemporary interpretations of these models conveyed a number of conflicting ideas about aging. On the one hand aging was understood as a structured process, somewhat teleological in its unfolding, whilst on the other hand, it was deemed unpredictable and contingent on a number of factors that easily led to the subversion of age boundaries. I will illuminate these ideas through a number of important contemporary models of age and aging. During the seventeenth century this included the 'ages of man' paradigms, the humoural model of the body, including its component elements of the temperaments and the six non-naturals. Seventeenth-century contemporaries also understood aging in metaphorical terms, through what was termed the 'lamp metaphor'. The lamp metaphor forms the final part of my discussion of seventeenth-century ideas of aging. Eighteenth-century ideas of aging, which is discussed in the second part of this chapter, were in a number of ways quite different, although there were elements of overlap with seventeenth-century notions of the process. Primarily, age was understood within ideas of the nervous body and concepts of nervous sensibility during the eighteenth century. Interpretations of the nervous body had a class as well as a gendered component in terms of how these ideas were applied, in different ways, to early modern men and women. This chapter begins with a discussion of the ages of man literature. It is to this that we will now turn.

The Ages of Man

It has long been acknowledged that there is immense variety in the pace and timing of human aging, that people do not all age at the same rate or in the same ways. In consequence, since antiquity, age has been divided into stages. Some of these were

elaborate, such as the medieval 'ages of man' schema, which divided life into three, four, seven or twelve ages.[53] In addition, historians have noted the existence of schemes which divide age into five and six stages.[54] Though popular from the Middle Ages onwards, the ages of man were adapted from Greek and Roman traditions, and were sometimes based on Moslem versions of the ancient divisions. During the thirteenth century, writings began to appear in the vernacular languages, thereby reaching a wider audience, so that even people who did not know Latin became familiar with the motifs of the ages. Many who could not read heard about them in sermons and saw them illustrated in wall paintings and sculptures.[55] Religious writers and artists depicted an individual life in terms of its division into a number of steps, cycles or circles.[56] Illuminated manuscripts, stained glass windows, religious sculptures and secular murals conveyed the ages of man in their various schemas and divisions.[57] From the fourteenth century, both the ages of man and its journey-of-life motifs were circulated more widely in Europe, and the metaphor of life as a journey became increasingly popular.[58] From the sixteenth until the eighteenth century, the ages were depicted as a pyramid or bridge of steps often with representations of death or the devil or love and other hazards of life lurking beneath,

---

[53] Pat Thane, 'Social Histories of Old Age and Aging', *Journal of Social History,* Vol. 37.1 (2003), p. 98.

[54] Sarah Carvallo, 'Ageing in the Seventeenth and Eighteenth Centuries', *Science in Context,* Vol. 23.3 (2010), p. 271.

[55] Shulamith Shahar, *Growing Old in the Middle Ages* (London, 1997), p. 14.

[56] Susannah R. Ottaway, *The Decline of Life: Old Age in Eighteenth-Century England* (Cambridge, 2004), p. 55.

[57] David G. Troyansky, 'The Older Person in the Western World: From the Middle Ages to the Industrial Revolution', in Thomas R. Cole, David D. Van Tassel and Robert Kastenbaum eds., *Handbook of the Humanities and Aging* (New York, 1992), p. 42; Pat Thane, *Old Age in English History. Past Experiences, Present Issues* (Oxford, 2000), p. 48.

[58] Thomas R. Cole, *The Journey of Life: A Cultural History of Aging in America* (Cambridge, 1992), p. 12.

'lying in wait to ambush one at any age'.[59] By the early modern period, all of these images and descriptions of the life course were current. Other artistic and literary representations imagined the teleological unfolding of life in three to ten stages, in a linear pilgrimage or circular cycle. These conceptions of the aging process survived into the eighteenth century.[60]

Amongst the various ages of man schemas, Aristotle's three-stage division was particularly influential. It expressed the prime divisions of life: growth, stasis and decline. In general, the biological division of the three ages were based on the rise and fall of physical strength and power. The three-stage division was widely represented in visual and literary forms. A four-fold structure was preferred by medical theorists. This was an influential attempt to explain bodily changes during the life-cycle. In this scheme, four ages were governed by the four humours and were analogous with the microcosmic order of the seasons and the elements. It was recognised that since people had different 'complexions' or 'humours', each related to the elements in different ways. Accordingly, all people were different and lived for varying lengths of time. Within this structure, both Hippocrates and Galen, whose work was translated in the twelfth century, suggested a regimen of diet and conduct of life suited to each phase of life. Within the structured framework of 'ages', issues of biological development, the acquisition of virtue, the path to salvation, the process of learning and the interrelationships of these themes were often expounded in contemporary discourse.[61] Four-age divisions spread widely in the vernacular from the thirteenth century onwards. They became increasingly common in

[59] Thane, *Old Age*, p. 48.

[60] Ottaway, *The Decline of Life,* p. 55.

[61] Thane, *Old Age*, pp. 26-47; Cole, *The Journey of Life,* p. 6.

England from the fourteenth and fifteenth centuries onwards, proliferating in vernacular medical texts. The four-fold scheme was as popular as the seven-age scheme, which was especially prominent in classical Arabic astrology and came to England through translation.[62]

The third major scheme of the life-course depicted seven ages, each relating to the influence of a particular planet. In his astrological treatise *Tetrabiblos,* the second-century astronomer, Ptolemy, provided the authoritative version of the seven-ages, which became popular in the West in the late middle ages. In Ptolemy's treatise, which provided the model of Jaques' monologue in Shakespeare's *As You Like it,* the last two ages are ruled by Jupiter and Saturn. The sixth age (from fifty-six to sixty-eight) brings 'thoughtfulness, dignity and decorum', whilst the last age (sixty-eight until death) is old and cold, 'dispirited, weak, easily offended, and hard to please'.[63] The seven-ages paradigm, as Shakespeare would have understood it, was documented from such contemporary versions as the one found in *The Treasurie of Auncient and Moderne Times:* 'By common division of Astrologers ... the life time of man is divided into seven Ages, over each one of which Ages, one of the seven Planets is said to rule and govern'.[64] The seven-age scheme allowed for 'old age' to be conceptualised within a number of stages, thus enabling a distinction to be made between 'young' and 'old' old age.[65]

---

[62] Thane, *Old Age,* p. 47.

[63] Cole, *The Journey of Life,* p. 6; The seven-ages was of made famous in stylised literature by Shakespeare in *As You Like It* (1599-1600).

[64] Pedro Mexía, *The Treasurie of Auncient and Moderne Times. Containing the Learned Collections, Judicious Readings, and Memorable Obseruations* (London, 1613), p. 336.

[65] Thane, *Old Age,* p. 48.

Whilst Ptolemy and Shakespeare popularised the seven-fold division, Aristotle the three-fold division, and Hippocrates and Galen the four-fold division, not all schemes remained consistent in terms of emphasis on their respective scientific origins. Some authors used a four-stage division which was not based on the theory of the humours but corresponded to the four seasons of the year. Others used a seven-stage division corresponding to the seven cardinal virtues, the seven canonical hours and even the temperaments, which properly belonged to the four-fold division. The version of the ages most associated with religious thought comprised the division of life into six-stages, based on the scheme of St Augustine of Hippo. It rested on the parallels between six stages in the life of man and the six epochs of human history in its Christian version.[66]

Although there were clear conventions about where childhood ended (typically fourteen), unsurprisingly, given the proliferation of interpretations of the ages of man schemas from the thirteenth century onwards, there was also a corresponding increase in the ages at which individuals could be considered old. Old age, as Margaret Pelling has observed, 'lacks the great legal, administrative, and developmental milestones which marked childhood and early adulthood'.[67] According to the different divisions mentioned,

---

[66] Shahar, *Growing Old,* p. 15; Alexandra Walsham, 'The Reformation of the Generations: Youth, Age and Religious Change in England, *c.* 1500-1700', *Transactions of the Royal Historical Society,* Vol. 21 (2011), p. 97; Elizabeth Sears, *The Ages of Man: Medieval Interpretations of the Life Cycle* (Princeton, 1986); Henry Cuff, *The Differences of the Ages of Mans Life: Together with the Originall Causes, Progresse, and End thereof* (London, 1607); J.A. Burrow, *The Ages of Man: A Study in Medieval Writing and Thought* (Oxford, 1988).

[67] Walsham, 'The Reformation', p. 97; Margaret Pelling, 'Old Age, Poverty and Disability in Early Modern Norwich', in Margaret Pelling and Richard Smith eds., *Life, Death, and the Elderly: Historical Perspectives* (London and New York, 1991), p. 76.

the beginnings of old age could commence at 35, 40, 45, 50, 58, 60 or 72 years old.[68] The interest for historians, however, is less in terms of the ages being able to provide a clear point of chronological departure for the beginnings of old age and more *because* it illustrates that old age in this culture was not fixed and immutable but fluid and flexible.[69]

The ages of man were and are of value to contemporaries and to historians alike, precisely because they express the symbolic nature of every stage of life, as well as their authors' value judgements about aging. The divisions were not based on empirical evaluations derived from the biological or social realities. Contemporaries were more interested in the qualitative change which took place in the transition from stage to stage.[70] The changing nature of physical and mental capacities as the individual aged was more important than chronological age.[71] The chronological ages which marked the stages of life varied, but were broadly consistent in their emphasis on infancy, youth, maturity and old age, thus giving a clear definition to the life course. Pat Thane ascribes the popularity of the four-fold scheme in particular to 'a human need to impose a knowledgeable shape upon what might otherwise be experienced as frightening,

[68] Shahar, *Growing Old*, pp. 12-35; J.W. Jones, *Observations of the Division of Man's Life into Stages* (London, 1861); Steven Smith, 'Growing Old in Early Stuart England', *Albion,* Vol. 8.2 (1976), pp. 125-141; Burrow, *The Ages of Man*.

[69] Walsham, 'The Reformation', p. 93.

[70] Shahar, *Growing Old,* pp. 17-18.

[71] Aki C.L. Beam, "'Should I as Yet Call You Old?" Testing the Boundaries of Female Old Age in Early Modern England', in Erin Campbell ed., *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot and Burlington, 2006), p. 106.

unexpected, and directionless physical and mental changes'.[72] Not unconnected is Thomas R. Cole's opinion that the ages of man provided contemporaries with an iconographic and important image of the life-cycle where each step was understood as a stage for the performance of certain roles. This was lacking in older motifs like the dance of Death and the Wheel of Fortune. These schemas, which provided a stable motif in popular culture from the thirteenth to the nineteenth centuries, provided contemporaries with an enduring image of life which juxtaposed the swiftness of time and the power of death with the wish for an orderly, long, and productive life.[73]

Discussion of the 'ages of man' in early modern historiography has also led to questions about gender. Are we to take the man in the ages literally, or see 'man' as a synonym for all mankind? Conversations among scholars as to whether women experienced the equivalent life-stages to men have been current from the 1980s.[74] Many historians have been unequivocal in their interpretations of the ages of man schemas as applying only to men. Mary Dove has asserted that 'we need to remind ourselves that "man" in the Ages of Man is not normally an inclusive term, and that when I talk about "man's life", I am not being inclusive, either'.[75] Dove's statement should be seen in light of the searching questions posed by feminist scholars from the earliest stages of women's studies. According to this view, men justified their hegemony of the production of knowledge by

[72] Thane, *Old Age,* p. 47.

[73] Cole, *The Journey of Life,* pp. 24-25.

[74] Thane, *Old Age,* p. 47

[75] Mary Dove, *The Perfect Age of Man's Life* (Cambridge, 1986), p. 25.

claiming that their interests are universal.[76] Hilda Smith asks scholars to consider and be alert to the presence of a 'false universal' in contemporary sources. The false universal, or persistent references in contemporary sources to 'all', assumes the inclusion of women, when what 'all' actually means the inclusion of 'all men'.[77]

Few scholars have interpreted the ages of man in a way that has unquestionably conflated 'man' with 'mankind'. Equally, few historians have seen women's position in these schemas as unproblematic. Thomas Cole sees women entering the ages of man iconography in the early modern period, but only 'through the eyes of men'. The iconography of women's life-cycle focused on daily life and women's duties to create and maintain a proper family, but not on the biological events which so preoccupied the many ages of man schemas.[78] Historians have since continued to note the existence of alternative paradigms addressing the female life course. These were associated with the key social and legal markers in a woman's life: namely, the phases of maidenhood, motherhood, and widowhood.[79] If not explicitly excluded from the ages of man literature,

---

[76] Elizabeth Grosz, 'Bodies and Knowledges: Feminism and the Crisis of Reason', in L. Alcoff and E. Potter eds., *Volatile Bodies: Toward a Corporeal Feminism* (New York and London), pp. 204-209; Sarah Harper, 'Constructing Later Life/Constructing the Body: Some Thoughts from Feminist Theory', in Anne Jamieson, Sarah Harper and Christina Victor eds., *Clinical Approaches to Ageing and Later Life* (Buckingham and Philadelpia, 1997), pp. 160-172, esp. pp. 164-165.

[77] Hilda L. Smith, '"Aging": A Problematic Concept for Women', *Journal of Women's History,* Vol. 12.4 (2001), pp. 77-86, esp. p. 78.

[78] Cole, *The Journey of Life,* p. 26.

[79] Erin J. Campbell, '"Unenduring" Beauty: Gender and Old Age in Early Modern Art and Aesthetics', in Campbell ed., *Growing Old,* p. 158; Lynn Botelho, 'Old Age and Menopause in Rural Women of Early Modern Suffolk', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), p. 46.

then there was some indication that women were understood to pass through stages of life that were distinct from men's. Although few authors stated specifically that they were speaking of men alone, most analyses were conducted in masculine terms.[80] Generally, historians now agree that women were thought to age faster than men and passed through the stages of life at a more rapid pace. This idea also has resonance in seventeenth-century thought. Thomas Browne quoted classical authors who stated that while men entered the final life stage at 70, women did so at 60. Richard Steele, in *A Discourse Concerning Old- Age,* wrote that women passed through only three stages: growing, ripeness and decaying, entering each stage two to four years earlier than men. According to this way of thinking, women's colder moist humours caused them to reach puberty earlier and age more quickly than men because their dominant humidity had a corrupting effect.[81]

---

[80] Shulamith Shahar, 'Who Were Old in the Middle Ages?', *Social History of Medicine,* Vol. 6.3 (1993), p. 320; Anonymous, *The Whole Duty of a Woman or A Guide to the Female Sex From the Age of Sixteen to Sixty* (London, 1696).

[81] Beam, "'Should I as Yet Call You Old?'", pp. 100-101; Botelho, 'Old Age and Menopause', pp. 43-65; Campbell, "'Unenduring" Beauty', p. 158; Ian Maclean, *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life* (Cambridge and New York, 1980), p. 35; Ottaway, *The Decline of Life,* p. 35; Amanda Vickery, 'Mutton Dressed as Lamb? Fashioning Age in Georgian England', *Journal of British Studies,* Vol. 52.4 (2013), pp. 858-886; Anonymous, *The Ladies Dictionary Being a Good Entertainment for the Fair Sex* (London, 1694), p. 30; Thomas Browne, *Pseudodoxia Epidemica: or, Enquiries into Very Many Received Tenents, and Commonly Presumed Truths* (London, 1676), p. 178; Richard Steele, *A Discourse Concerning Old-Age, Tending to the Instruction, Caution and Comfort of Aged Persons* (London, 1696).

The Humoural Body

The ages of man paradigm were not the only way in which age and aging was conceptualised in early modern England. Medical understandings of the body also provided popular models of these phenomena. The most dominant type of medicine practiced in early modern England was known as 'humoural medicine'. Humoural medicine was based on early Greek manuscripts formerly believed to have been written by Hippocrates in the fifth century BC, but now accepted as the work of several authors, and known as the Hippocratic corpus.[82] Humoural theory, first espoused by the Hippocratic writers, was later developed and systemised by Galen. This particular set of doctrines and beliefs held that physical and mental health were determined by the balance in the body of the four humoural fluids. The Galenic body was thought to achieve health by carefully monitoring and manipulating the literal and permeable influences of the macrocosm.[83] The concept of preventing disease through a good health regimen was based on ideas developed by Hippocratic and Islamic writers and included the Galenic concept of what Arabic writers called the 'non-naturals'. The non-naturals consisted of air, things taken in (in terms of food and drink) sleep and waking, motion and rest, things excreted from the body, otherwise known as 'emptiness and repletion', and the management of the passions and emotions.[84] As we shall see, this had important implications for age and aging.

---

[82] William A. Jackson, 'A Short Guide to Humoural Medicine', *TRENDS in Pharmacological Sciences,* Vol. 22.9 (2001), p. 487.

[83] Michael C. Schoenfeldt, *Bodies and Selves in Early Modern England* (Cambridge, 1999), p. 22.

[84] Louise Hill Curth, 'Lessons from the Past: Preventative Medicine in Early Modern England', *Journal of Medical Ethics: Medical Humanities,* Vol. 29.1 (2003), pp. 16-17.

The genre of medical advice literature (in which the non-naturals played no small part) has a long history.[85] As Paul Slack has shown, works such as Thomas Moulton's *Mirror or Glass of Health* (written, said Moulton, so that 'every man, woman and child could be their own physician in time of need') were almost as old as the printed book itself.[86] Thanks largely to the popularisation of medical knowledge from the early to mid-seventeenth century many Latin works were simplified for a popular audience.[87] From sixpenny pamphlets to weighty tomes, individuals were urged to take responsibility for the safe-guarding of their own health through the non-naturals, or more broadly, their life-style.[88] Andrew Wear, in particular, has written extensively on the literature of the period where contemporaries were advised on how to live healthy and prolong life. These concerned two strands of learned medicine: hygiene (in its original sense of the art of conserving health, from the Greek 'hygeia' or health) and therapeutics. These were addressed to the middling and upper sections of society and did not claim to be applicable to everyone.[89] The non-naturals, were, nevertheless, genuinely popular throughout all levels of society. Louise Curth Hill has illustrated the persistence of traditional Galenic principles in early modern almanacs. Although, as she says, some authors offered more in the way of medical advice than others, the foundation of preventative treatments were always based

---

[85] Roy Porter, 'The Patient in England, *c.*1660-*c.*1800', in Andrew Wear ed., *Medicine in Society: Historical Essays* (Cambridge, 1992), p. 10.

[86] Paul Slack, 'Mirrors of Health and Treatises of Poor Men: the Uses of the Vernacular Medical Literature of Tudor England', in Charles Webster ed., *Health, Medicine and Morality in the Sixteenth Century* (Cambridge, 1979), pp. 237-273.

[87] Patricia Crawford, 'Sexual Knowledge in England, 1500-1750', in Roy Porter and Mikláš Teich eds., *Sexual Knowledge, Sexual Science: The History of Attitudes to Sexuality* (Cambridge, 1994), p. 86.

[88] Porter, 'The Patient in England', pp. 95-106.

[89] Andrew Wear, *Knowledge and Practice in English Medicine, 1550-1680* (Cambridge, 2000), pp. 154-155.

on ways in which the non-naturals could be could be manipulated through a good daily regime.[90] Readers were informed that their engagements with the non-naturals determined superfluities or deficiencies in bodily humours and posed dangers to their health. Management of the non-naturals could also maintain or restore health and prolong life.[91]

The Temperaments

The temperaments were an important component of the humoural body. Temperament referred to the blending of elements: warm, cold, dry and moist, the four causes by which everything throughout nature was determined. In this sense, a particular temperament was literally defined by the mixture of heat (warm and cold) and moisture (moist and dry) that were characteristic of the humours.[92] The doctrine of the four 'humours' stated that the human body consisted of blood, phlegm, yellow bile and black bile. In the second century, BC Galen of Pergamon linked these humours to the four elements of Greek philosophy and their abstract qualities. The humours determined the physical constitution and temperament of the person. The theory presupposed that the world was composed of four elements: fire, air, water and earth. Each of the four elements was linked with one of the four principal bodily humours and each of the humours assumed certain qualities of the elements. For example, yellow bile was connected with fire and

[90] Louise Hill Curth, 'The Medical Content of English Almanacs 1640-1700', *Journal of the History of Medicine,* Vol. 60.1 (2005), pp. 258, 261; Louise Hill Curth, *English Almanacs, Astrology and Popular Medicine, 1550-1700* (Manchester and New York, 2007).

[91] Eve Keller, '"The Sublimest Juyce in our Body": Bloodletting and Ideas of the Individual in Earl Modern England', *Philological Quarterly,* Vol. 86.1/2 (2007), p. 102.

[92] R.M. Stelmack and A. Stalikos, 'Galen and the Humour Theory of Temperament', *Personality and Individual Difference,* Vol. 12.3 (1991), p. 259.

regarded as hot and dry; blood with air was hot and moist; phlegm with water was moist and cold; while earth was the element of black bile, which was cold and dry.[93] The four adjectives to describe these bodily humours: choleric, sanguine, phlegmatic and melancholic, corresponded to the four elements of fire, air, water and earth. These were the choleric, sanguine, phlegmatic and melancholic temperaments. Galen also held that there were two axes on which complimentary qualities varied: the cold-hot and the moist-dry. When two axes were out of balance it was possible to have two elements that were in excess, that is, four double combinations. In this schema, nine temperaments were identified and they were not categorically independent.[94]

The temperaments were represented mainly within a four-fold ages of man schema, where individuals passed through the stages of childhood, youth, middle-age and old age, altering from a hot to a cold temperament as life progressed, sometimes through a five-fold schema and other times a seven-fold one.[95] The chronological boundaries associated with the schemas could also be subverted, the extent to which depended on differences in temperament. Ambrose Paré, a noted commentator on the temperaments, argued that 'this description of ages, is not to be taken so strictly, as always to be measured by the spaces and distances of years', whilst John Makluire suggest that 'The division of ages must not always be taken from the time: for some sooner, others later according their

[93] Sherry Sayed Gadelrab, 'Discourses on Sex Differences in Medieval Scholarly Islamic Thought', *Journal of the History of Medicine and Allied Sciences,* Vol. 66.1 (2010), p. 46.

[94] Stelmack and Stalikos, 'Galen and the Humour', p. 259.

[95] Burrow, *The Ages of Man*; Shahar, *Growing Old,* p. 15; Walsham, 'The Reformation', p. 97; Sears, *The Ages of Man;* Cuff, *The Differences of the Ages*.

complexion'.[96] The temperament of a human being could also vary according to factors such as sex, or geographical location. Young people were generally regarded as hotter than the elderly, men regarded as hotter than women, and people who lived in hot climates were believed to have hotter temperaments than those who lived in cold climates.[97] These factors varied the depth of physiological changes an individual would undergo throughout the life-course. Brian K. Nance has argued that it is wrong to conclude for instance that

> all adolescents possess a sanguine temperament, or all old people a phlegmatic one. An adolescent may have any of the four temperaments, but will be hotter and dryer (relative to his natural temperament) than at any point in his life. The ages of life alter a person's natural temperament, but they must work upon what nature has provided.[98]

The temperaments were also sexed, and conceptualised within a hierarchical structure where men and women were opposed on a continuum of hot-cold temperaments: men with their hotter temperaments, women with their colder ones. Hotter temperaments, the hot-moist (sanguine temperament) especially, were associated with long life and a late entry to old age: 'For no state of body', in the words of Lemnius, 'is better or more commendable then this, nor any that longer prolongeth life, and keepeth backe Didage'.

---

[96] Ambrose Paré, *The Workes of that Famous Chirurgion Ambrose Parey Translated out of Latin and Compared with the French by Thomas Johnson* (London, I634), pp. 83-89; John Makluire, *The Buckler of Bodilie Health, Whereby Health May Bee Defended, and Sickesse Repelled* (London, 1630), pp. 84-85.

[97] Gadelrab, 'Discourses on Sex Differences', pp. 46-47.

[98] Brian K. Nance, 'Determining the Patient's Temperament: An Excursion into Seventeenth-Century Medical Semieiology', *Bulletin of the History of Medicine,* Vol. 67.3 (1993), p. 433.

The sanguine temperament was quite literally associated with male perfection: physical power, 'purity of blood', an 'amiable and beautifull feature', and a 'pliable & refined wit'.[99] Women existed at the opposite end of this scale. The disadvantages of their cold-moist (phlegmatic) temperament have been noted with some frequency by both historians and contemporaries alike. The ancients, upon whom seventeenth-century literate society relied, confidently stated that men aged more slowly than women.[100] Women's colder, moist humours caused them to reach puberty earlier and age more quickly than men because their dominant humidity predisposed them to a short life.[101] Henry Cuff wrote in the early seventeenth century that women 'for the most part are sooner perfected than men, being sooner fit for generation ... and finally, sooner older women'. They were, in

[99] Levinus Lemnius, *The Touchstone of Complexions. Generallye Appliable, Expedient and Profitable for all Such, As be Desirous & Carefull of their Bodylye Health* (London, 1576), pp. 9, 95.

[100] Botelho, 'Old Age and Menopause', p. 51; Amy M. Froide, 'Old Maids: the Lifecycle of Single Women in Early Modern England', in Botelho and Thane eds., *Women and Ageing,* p. 91; Lois W. Banner, *In Full Flower: Aging Women, Power, and Sexuality. A History* (New York, 1992), pp. 15, 175-177, 181, 184; Patricia Crawford, 'Attitudes to Menstruation in Seventeenth-Century England', *Past and Present,* Vol. 91.1 (1981), p. 67; Smith, 'Growing Old', p. 128; Peter N. Stearns, 'Old Women: Some Historical Observations', *Journal of Family History,* Vol. 5.1 (1980), pp. 44-46.

[101] Mary E. Frank, 'Visible Signs of Aging: Images of Old Women in Renaissance Venice', in Campbell ed., *Growing Old*, p. 158; Ian Maclean, 'The Notion of Woman in Medicine, Anatomy and Physiology', in Lorna Hudson ed., *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life* (Chicago, 1985), pp. 20, 110-111; Helkiah Crooke, *Mikrokosmographia: A Description of the Body of Man. Together with the Controuersies thereto belonging* (London, 1615), pp. 106-107; John Pechey, *A Plain Introduction to the Art of Physic, Containing the Fundamentals, and Necessary Preliminaries to Practice* (London, 1697), p. 6; Alexander Ross, *Arcana Microcosmi, or, The Hid Secrets of Man's Body Discovered in an Anatomical Duel between Aristotle and Galen Concerning the Parts thereof* (London, 1652), p. 48.

Cuff's words: 'soone ripe, soone rotten'.[102] To help make this point, writers frequently represented 'male' and 'female' temperaments within a distinctly polarised imagery of men and women with their strongly opposed physical, social and mental characteristics.[103] Gail Kern-Paster has argued that 'the countless visible and behavioural displays of male and female difference were understood inductively to proceed from a pervasive difference of temper and temperature originating from deep within'.[104] The complexions (or temperaments) required men and women to 'Act their Scenes and several Circumstances ... Here may be seen how the Dilligent House-wife is busie in her Domestic Affairs, while her Careful Husband is abroad'.[105] Helkiah Crooke's view was also typical in this respect:

> It behoved therefore that man should be hotter, because his body was made to endure labour and travel, as also that his mind should be stout and invincible to undergo dangers, the only hearing whereof will drive a woman as we say out of her wits. The woman was ordained to receive and conceive the seed of the man, to bear and nourish the infant, to govern and

[102] Cuff, *The Differences of Ages,* p. 95; Dove, *The Perfect Age,* p. 23.

[103] Anonymous, *The Compleat Doctoress or, A Choice Treatise of all Disease Incident to Women* (London, 1656), p. 4; Wendy D. Churchill, 'The Medical Practice of the Sexed Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 15.1 (2005), p. 12; Crawford, 'Sexual Knowledge', p. 97; Robert Martensen, 'The Transformation of Eve: Women's Bodies, Medicine and Culture in Early Modern England', in Porter and Teich eds., *Sexual Knowledge*, p. 108; Maclean, 'The Notion of Woman', p. 135.

[104] Gail Kern Paster, 'The Unbearable Coldness of Female Being: Women's Imperfection and the Humoral Economy', *English Literary Renaissance,* Vol. 28.3 (1998), p. 431.

[105] Samuel Haworth, *Anthropologia, or, A Philosophic Discourse Concerning Man. Being the Anatomy both of his Soul and Body* (London, 1680), pp. 190-191.

> moderate the house at home, to delight ... and therefore her body is soft, smooth and delicate, made especially for pleasure, so that whosoever uses them for other does almost abuse them[106]

The opposition was forged from the importance of heat to the concept of male perfection: heat was instrumental in the production of the most perfectly concocted semen from which the male was born, which was produced in the right (hotter) testicle and situated in the right (hotter side) of the uterus. The male grew faster in *utero,* was of darker and harder flesh, more hairy, more able to sustain extremes of temperature, had larger arteries and veins, a deeper voice, was less prone to disease and was more robust in stature. He had mental characteristics which were attributed to body heat: courage, and moral strength. The colder female, on the other hand, was characterised by the deprivation or opposite of these qualities. Most importantly, males came to full maturity more slowly and aged less quickly than the colder female. [107]

The cold-moist (phlegmatic) temperament, traditionally associated with women, was not thought the most deficient in terms of longevity, and when compared with the three other temperaments, early old age. Moreover, despite representations to the contrary, 'male' and 'female' temperaments frequently overlapped: the cold-moist (phlegmatic) and cold-dry (melancholic) allowed for the presence of both men and women. The cold-dry temperament rather than the cold-moist temperament was also considered the most deficient in terms of future prognostics for health and longevity. This was understandable given the purported symmetry of this temperament with old age. The cold-moist

[106] Crooke, *Mikrokosmographia,* pp. 272-273; Cuff, *The Differences of Ages*, pp. 106-107.

[107] Maclean, 'The Notion of Woman', p. 133.

temperament was also less conducive to long life than the sanguine (hot and moist), the choleric (hot and dry) temperament, but more advantageous than the melancholic temperament.[108]

The natural temperament also influenced the depth of physical changes (for better or worse) a certain temperamental type would undergo throughout the life-course. Men, particularly men of the sanguine temperament (women were thought unable to possess this temperament), were undoubtedly better off in this respect. The more perfect the complexion, the less pronounced the physiological decline between adulthood and old age was predicted to be. Longevity was reduced the more the individual deviated from a hot-moist (sanguine) complexion. Of the 'melancholic, choleric, flegmaticks and the sanguinous', the sanguinous according to John Makluire, 'bear their age better than the rest who become sooner old'.[109] As Lemnius so lyrically put it, 'there appeare certayne reliques, notes, and tokens of the good temperament that aforetime was in the same'.[110] Whilst women were said to pass through the life stages sooner than men, contemporaries also acknowledged an element of overlap, with both women and men predisposed to a phlegmatic or melancholic temperament.[111] This fact chimes with Ian Maclean's view that incoherence in contemporary thought on this subject was the product of failure on the part of the ancients to agree upon the extent to which males and females were

[108] James Hart, *Klinike, or The Diet of the Diseased. Divided into Three Bookes. Wherein is Set Downe at Length the Whole Matter and Nature of Diet for those in Health, but Especially for the Sicke* (London, 1633), pp. 85-86; Thomas Walkington, *The Optick Glasse of Humors. Or The Touchstone of a Golden Temperature* (London, 1607), p. 34.

[109] John Makluire, *The Buckler*, pp. 76-86.

[110] Lemnius, *The Touchstone of Complexions,* p. 91.

[111] Kern Paster, 'The Unbearable Coldness', pp. 422-423.

temperamentally different. These left unresolved questions like whether the hottest female was colder than the coldest male.[112]

More broadly, the overlap in temperaments between women and men resonated with the view that the entire world, with its animate and inanimate components, was made up of both masculine and feminine elements.[113] The latter predominated in men of colder temperaments. Phlegmatic men, according to contemporaries, were physically soft in body, particularly in the breast area, and were known for their weak chins. Like women who were known for their idleness, corpulent frame and ponderous thoughts, phlegmatic men were also known for their idle life-style and 'sleepie, lazye, slothful, drowsie, heauie, lumpish and nothinge quicke at their busyness'. Lemnius thought that the life-style of a phlegmatic man was comparable to that of a snail.[114] Unsurprisingly also, due to the association of the phlegmatic temperament with women, these types of men shared similar feminine characteristics, only differing in terms of the type of production of sexed fluids and the means by which these were evacuated from the body. As with menstruation in women, men of the cold-moist phlegmatic temperament were urged to rid themselves of superfluous humours, typically by vomiting.[115] As the description of the phlegmatic suggests, the temperaments also influenced personality traits as well as physical

[112] Ian Maclean, 'The Notion of Woman', pp. 127-135.

[113] Lemnius, *The Touchstone of Complexions,* p. 62.

[114] Walkington, *The Optick Glasse of Humors*, pp. 52-69; Everard Maywaringe, *Tutela Sanitatis Sive Vita Protracta. The Protection of Long life, and Detection of its Brevity, from Diaetic Causes and Common Customs* (London, 1664), p. 42; Everard Maynwaringe, *Vita Sana & Longa. The Preservation of Health and Prolongation of Life. Proposed and Proved* (London, 1669), p. 104; Cuff, *The Differences of the Ages,* p. 95; Lemnius, *The Touchstone of Complexions,* pp. 119, 62; Nicolaas Fonteyn, *The Womans Doctor, or, An Exact and Distinct Explanation of all Such Diseases as are Peculiar to that Sex* (London, 1652), p. 1.

[115] Walkington, *The Optick Glasse of Humors*, pp. 52-69.

characteristics. Temperamental traits are defined as 'constitutionally determined dispositional characteristics that influence the manner in which a person's actions are expressed'.[116]

The temperaments were a psychological as well as a physiological model. Humoural psychology, as Jacques Bos reminds us, was a central proposition of the Hippocratic Corpus and Galen's work. It is through these sources that we find the idea that bodily fluids are not merely the building blocks of people's physical constitution but also affect their mental disposition. Though, as Bos admits, this connection is not explored in a systematic manner in the Hippocratic corpus nor in Galen's works, the parallels between behaviour and biology were still much in evidence during the seventeenth century.[117] Thus, the sanguine temperament was regarded by Thomas Walkington as 'the monarch or prince to be constituted over all temperatures'. Men of the sanguine temperament were also regarded as loyal, brave, upholders of the rights and prerogatives of sovereign and country. Physically hairy, he also had red hair, accompanied with a 'great beard'. The choleric (hot-dry) temperament was second only in terms of long life and a good old age, where physical changes were less pronounced, to the sanguine temperament. The man of a choleric complexion was an angry man, best imagined in the proverb recounted by

[116] Stelmack and Stalikos, 'Galen and the Humour Theory', p. 255.

[117] Jacques Bos, 'The Rise and Decline of Character: Humoral Psychology in Ancient and Early Modern Medical Theory', *History of the Human Sciences,* Vol. 22.3 (2009), p. 30; Robert R. McCrae and Paul T.Costa, Jr.; Fritz Ostendorf and Alois Angleitner; Martina Hřebʃcková; Maria D. Avia Jesús Sanz and Maria L. Sánchez-Nernardos; M. Ersin Kusdil, Ruth Woodfield, Peter R. Saunders and Peter B. Smith, 'Nature over Nurture: Temperament, Personality and Life Span Development', *Journal of Personality and Social Psychology,* Vol. 78.1 (2000), p. 174.

Thomas Walkington, 'So we say in our English proverb when a man is teasty and anger wrinckles his nose such a man takes pepper in the nose'.[118]

The melancholic temperament, like the phlegmatic temperament, also saw a male and female presence, if not a collective one due to its historic associations with certain elements of national identity. According to one long-standing view, widespread melancholy, along with its suicidal inclination, was an accompaniment of Protestantism. According to another, the frequency of the disease was a peculiarly English characteristic and reflected the 'general temper of the age'.[119] It was a ubiquitous trope in non-technical literary contexts too – hence Thomas Dekker's description of the 'still and melancholy streets' of plague torn London.[120] It was also a temperament, that is, a complexion determined by an excess of black bile, or a disease, which was a pathological development of the complexion. The complexion was normal and healthy, whereas the disease instituted a form of madness in which the imagination was damaged. Like wine, black bile had different effects on the behaviour and character of different types of people, and depending especially on the temperature of the humour, it produced many forms of madness and also conditions associated by Aristotle with irrationality and vice. Melancholy was also associated with extraordinary achievement. This temperament was usually associated with men in the fields of philosophy, politics, poetry or the arts.[121] Suggestive of this, was the sub-species of scholarly melancholy. This was brought about

---

[118] Walkington, *The Optick Glasse of Humors*, pp. 52-69.

[119] Angus Gowland, 'The Problem of Early Modern Melancholy', *Past and Present,* Vol. 191.1 (2006), pp. 79-80.

[120] Thomas Dekker, *The Wonderfull Yeare 1603: Wherein Is Shewed the Picture of London, Lying Sicke of the Plague* (London, 1603).

[121] Angus Gowland, 'The Ethics of Renaissance Melancholy', *Intellectual History Review,* Vol. 18.1 (2008), pp. 103-107.

by a sedentary, solitary life, combined with excessive intellectual activity, which involved a descent into anxiety and madness. The emotional aspects of the disease, however, meant that women were deemed more susceptible to the condition. The strong passions associated with melancholy meant that women were more likely to be diagnosed with the disease than men.[122]

The Six Non-naturals

Although the innate temperament was thought to be relatively settled, it was also theorised as being in permanent flux. The humoural complexion was always, as Leminus' translator wrote, 'suffring chaung & alteration' through a range of internal and external 'non-natural' factors – such as diet or mental perturbations – that were deemed capable of changing the elemental qualities in the body. Temperaments were 'easelye one into an other transmuted'.[123] The influences of the non-naturals, according to Everard Maynwaringe, 'will alter and change the best tempered body'.[124] As Ludmilla Jordanova reminds us, 'temperament' and 'constitution' were 'bridging concepts', which made sense of the interrelated nature of the body and its environment, with each interacting and changing each other in the process.[125] The relationship of human bodies (both male and

[122] Gowland, 'The Problem of Early Modern Melancholy', pp. 99, 115; Robert Burton, *The Anatomy of Melancholy, What It Is. With all the Kindes, Causes, Symptomes, Prognostickes, and Seuerall Cures of It* (London, 1621).

[123] Gowland, 'The Problem of Early Modern Melancholy', p. 98; Lemnius, *The Touchstone of Complexions,* pp. 4-6, 26-31, 33, 88.

[124] Everard Maynwaringe, *Tutela Sanitatis*, p.40.

[125] Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science between the Eighteenth and Twentieth Centuries* (Madison, 1989), pp. 25-27.

female) to the world was continually changing, never stable nor predictable in their engagements.[126]

The six non-naturals: air, things taken in (meat and drink), sleep and waking, motion and rest, things excreted, and the passions and emotions, were those factors whose use or influence 'one cannot escape'. They served 'essentially for the conservation of health' but only if they were 'properly disposed and made use of'. If there was a failure to do so, the three contra-naturals (diseases, their causes, and symptoms) were produced.[127] As this suggests, the ideas of the temperaments and their relationships to seventeenth-century men and women, were contingent on the non-naturals, and more broadly, the environment in which they lived. The interplay between the non-naturals, temperaments and constitutions were therefore regarded as open-ended.[128] At the heart of this dialectical relationship was a set of dichotomies: between town and country, short life and long life, the unhealthy and healthy, the stultifying and the fresh, the stagnant and the moving, dark and light, crowded and un-crowded, the tame and the wild.[129] In Chapter 3 these relationships will be analysed in greater depth, specifically the ways in which alterations in temperaments, mediated by the limits and boundaries imposed upon bodies and their world, affected the intersecting relations of gender, aging and class. With this in

---

[126] Ulinka Rublack, 'Fluxes: the Early Modern Body and the Emotions', *History Workshop Journal,* Vol. 53.1 (2002), p. 2; Keller, '"The Sublimest Juyce"', p. 2; Mikhail Bakhtin, *Rableais and his World* (Bloomington, 1984).

[127] William Coleman, 'Health and Hygiene in the Encyclopédie: A Medical Doctrine for the Bourgeoisie', *Journal of the History of Medicine and Allied Sciences,* Vol. 29.4 (1974), p. 402.

[128] Carlos López-Beltrán, 'Natural Things and Non-Natural Things. The Boundaries of the Hereditary in the 18th Century', in Staffan Müller-Wille and Hans-jorg Rheinberger eds., *A Cultural History of Heredity* (Berlin, 2002), p. 70.

[129] Andrew Wear, 'Making Sense of Health and the Environment in Early Modern England', in Wear ed., *Medicine in Society*, p. 145.

mind, the premise that women both grew up quicker and aged sooner than men will be analysed in terms of the interactions (and often presumptions) between the temperaments and non-naturals. Meanwhile, here I shall sketch out what the non-naturals were, and the general rules which applied to health, longevity and aging, in the medical and non-medical literature which addressed this subject.

The Non-naturals: Air & Climate

There was widespread recognition that in the literate culture of early modern England, and probably in oral culture, of a relationship between health and environment. This recognition helped to create a shared 'lay' and 'professional' medical culture. Both medical and non-medical writers believed that some climates were healthier than others. The classical medical tradition also included medical topography: that is, the relationship between places and health and illness. As with food and bodies (see later) there was a relationship between air, 'the very food of life', place, and the humoural constitution of the nation, forming in the words of Andrew Wear, 'the natural link between people and their mother country'.[130] The physician, William Vaughan, thought that the best air for maintaining health come from 'a mans natiue soyle'.[131] On this basis, Godfrey Goodman cautioned against the perils of foreign travel to his fellow Englishmen because 'There is a great distance in the climate, and therefore we should not rashly undertake such a journey, to join together things so far separated in nature'.[132] The air of some nations was also considered better than others. English writers such as William Harrison in *The*

[130] Wear, *Knowledge and Practice,* pp. 184-186.

[131] William Vaughan, *Approved Directions for Health, both Naturall and Artificiall: Deriued from the Best Physitians as well Moderne as Auncient* (London, 1612), p. 2.

[132] Godfrey Goodman, *The Fall of Man, or the Corruption of Nature Proved by the Light of Our Naturall Reason* (London, 1616), p. 98.

Description of England (1577) and William Camden in his *Britannia* (1586) agreed that their country possessed the most temperate climate in the world, being neither too hot nor too cold. As Camden put it, 'Britaine is seated as well for aire as soile, in a right fruitful and most milde place'.[133] England was the measure against which other nations were judged and found wanting. Harrison valorised the products of England's climate as 'men for the most part of a good complexion [bodily constitution], tall of stature, strong in body, white of colour and therefore of great boldness and courage in wars'. This was because the 'Briton' was a 'people inhabiting near the North and far from the equinoctial line, where the soil is not so fruitful and the people not so feeble'. In other words, they have to work harder, and the tougher, colder environment also produced a tougher people. There was a certain geographical determinism in this respect: feebler lived men lived closer to the equator with stronger nearer the pole. Interestingly, and a little contradictory, even, given the denigration of the phlegmatic temperament when it was associated with women, Harrison, in a diatribe against the inhabitants of hotter countries, celebrated the character and 'strength of body' of northern, phlegmatic nations, of which the Protestant Englishman was very much a part.[134]

More contradictory again, given the praise for the English climate and the robustness of its inhabitants, was the contemporary emphasis on the dangers of the domestic climate

---

[133] William Harrison, *The Description of England: The Classic Contemporary Account of Tudor Social Life,* ed., Georges Edelen (New York, 1994 [First published in Raphael Holinshed, *The First and Second Volumes of Chronicles, Comprising 1 The Description and Historie of England* London, 1587]), pp. 428-429; William Camden, *Britain, or A Chorographicall Description of the Most Flourishing Kingdomes, England, Scotland, and Ireland, and the Ilands adjoyning, out of the depth of Antiquitie beautified with Mappes of the Severall Shires of England: Written first in Latine by William Camden Clarenceux K. of A. Translated newly into English by Philémon Holland Doctour in Physick* (London, 1637), p. 2.

[134] Harrison, *The Description of England,* pp. 444-448.

for health and longevity. The sources of bad air were topological, biological and man-made. Within one country, it was agreed throughout the early modern period, there was a variety of healthy and unhealthy habitats.[135] This was even the case in England, as William Bullein acknowledged:

> To thy self, being a naturall English man of birth and education: this land is very Temperat. Howbeit, our dwellings in this land, be variable as fennes, marishes, woods, heithes, valleys, and rockie places, and neare the sea side ... marish grounds and places where hempe and flax is rotten and dead carrion be cast, or multitudes of people dwelling together, or houses environed with standing waters, where into iakes [jakes] or sinks, have issues, or wallowing swine, or carrion unburied or foule houses, or such like places be dangerous, corrupteth the bloud.[136]

Industry, agriculture, services, households, solid waste management, road and sea transport were all thought to contribute to pollution. Toxic air could be created through the work of butchers, tanners or farm workers. The decomposition of human and animal waste, whether as excrement or dead bodies on the battlefield, was thought to create very dangerous fumes. Other noxious vapours were said to arise from swamps and muddy areas or stagnant water.[137] Generally, the countryside, despite its muddiness and stagnant water, was considered a healthier place to live than the towns and cities where disease

[135] Wear, *Knowledge and Practice,* p. 190.

[136] William Bullein, *The Government of Health: A Treatise Written by William Bullein, for the Especiall Good and Healthfull Preseruation of Mans Bodie from all Noysome Diseases* (London, 1595), p. 30.

[137] Curth, 'Lessons from the Past', p. 17.

was rife. Certain climates were good for all, providing they did not lapse into extremes of temperature. Too greater heat or cold, or very sudden mutations in the conditions of the air, were detrimental to the maintenance of a balanced temperament. Temperate air held the power to slow down the aging process by neutralising the worst effects of unfettered heat or cold in one's local environment. Air too hot 'dissolves and draws out the natural heat', and 'dissolves, wastes, and consumes the humours, and causes them to putrefy'. Air too cold 'is of a congelative power' and 'extinguishes the natural heat, especially in weak bodies, by congealing the substantial moisture thereof, and consequently it being able to actuate as it ought, putrefies'. The Bath physician, Tobias Venner, advised his readers that dry, 'meanly moist' air was beneficial to all, as was air that was 'meanly cold'. This degree of coldness was considered proportionate to the contrary natural heat of the [male] body and thus promoted an equitable balance in the humours.

Discussions of climate and air also directly advanced understandings of the aging process. High ground, where the air was clear, was considered healthiest, enabling its inhabitants in the words of Venner, to live to 'extreme old age' and 'enjoy very good and perfect health'.[138] Inhabiting higher or lower ground promoted differences in both character and constitution, thus those living on 'the tops of hills (where every wind blows from under the Sun) are for the most part sound, strong, nimble, long-lived and fit for labour', whilst 'the valley people (so seated that no wind blows upon them) are heavy spirited, dull and sickly'.[139] The ability to breath air 'freely' and in 'open spaces', inside or outside the home,

[138] Tobias Venner, *Via Recta and Vitam Longam Pars Secunda. Wherein the True Use of Sleepe, Exercise, Excretions, and Perturbations Is* (London, 1628), pp. 1-3.

[139] Thomas Mouffet, *Healths Improvement: or, Rules Comprizing and Discovering the Nature, Method, and Manner of Preparing all sorts of Food used in this Nation* (London, 1655), p. 18.

unfettered, combined with the avoidance of 'crooked', 'low and marshy places', were thought to prevent the corruption of the humours, from which a variety of diseases arose and thus reduced the likelihood of an 'untimely old age'.[140]

In a similar vein, the dangers of contagion from densely populated households were highlighted as a potent cradle for the spread of disease.[141] The choices for the poor regarding where they lived were limited, as they tended to inhabit crowded rooms and tenements.[142] Thus climatic prescriptions and the environmental manipulations which ensured a long and healthy life could only be satisfied through relative wealth. Robert Burton pointed out that because air was changeable and could alter, for better or worse, detailed adjustments had to be made to a person's house as well as their lifestyle: 'A clear air cheers up the spirits, exhilarates the mind: a thick, black, misty, tempestuous, contracts, overthrows. Great heed is therefore to be taken at what times we walk, how we place our windows, lights and houses, how we let in or exclude the ambient air'.[143] William Vaughan gave practical instructions on how to tell if the air was good, where to build the foundations of a house and how to align its windows.[144] A man, according to Andrew Boorde, 'must dwell at elbowe-rome, havyng water and woode annexed to his place or house', whilst he added that there must also be some prospect of a view. Failure to provide the latter did not merely displease in an aesthetic sense – it also led to ill-health because the body and mind were related.[145]

---

[140] Venner, *Via Recta,* pp. 6-7.

[141] Vaughan, *Approved Directions for Health,* p. 63.

[142] Wear, *Knowledge and Practice,* p. 195.

[143] Burton, *The Anatomy of Melancholy,* p. 435.

[144] Vaughan, *Approved Directions for Health,* p. 18.

[145] Andrew Boorde, *A Compendyous Regyment or a Dyetary of Helth* (London, 1542), p. 233.

Other prescriptions seemed to go against the grain of such advice. As it turned out, foreign climates were not so bad for the English to live in after all. Neither was there such a thing as universal conditions that would suit all constitutions. In the first instance, foreign climates did not always pose a danger to its English settlers, especially if the temperament of the place was the same as that country's origin. *The Planter's Plea* (1630), a tract which advertised the New England settlement, praised the air of the colony as being better suited to English constitutions than the air in England.[146] Yet even if climate and constitution did not agree, it was accepted that the body became 'seasoned', or acclimatised over time to foreign travel or foreign settlement and developed a constitution that corresponded to the new environment and climate.[147] This worked at a domestic level, too, where individuals of certain occupations were thought to be especially prone to the exposure of noxious air. People that worked with edible fats, oil and in lighting industries, like tallow-chandlers, were thought to be especially vulnerable to infected air, though Humphrey Brooke thought the long duration spent in such occupations meant that men became accustomed to the dangers, to the extent that the infected air ceased to do any harm. Brooke went so far as to suggest that these men had the strongest constitutions of all, and lived long, without being incapacitated by sickness.[148]

---

[146] John White, *The Planter's Plea* (1630) in Peter Force ed., *Tracts and Other Papers Principally in the Origin, Settlement and Progress of the Colonies in North America*, Vol. II (New York, 1836-1847; reprinted New York, 1947), tract 3, p. 13; Wear, *Knowledge and Practice,* p. 187.

[147] Wear, *Knowledge and Practice,* p. 186.

[148] Humphrey Brooke, *Ugieine, or A Conservatory of Health. Comprized in a Plain and Practicall Discourse Upon the Six Particulars Necessary to Mans Life* (London, 1650), p. 67; Wear, *Knowledge and Practice,* p. 198.

The Non-naturals: Diet

The relationship between diet and health has been called one of the most ancient branches of the therapeutic art.[149] Early modern medical belief on diet and health is traceable to early Greek writers such as Diocles, Mnesitheus, Philotimus, and the Hippocratic treatise, *On Diet.* Galen's *On the Powers of Food,* written about 180 C.E., classified all foods according to their medicinal qualities.[150] During the early modern period, diet was considered the 'mother of diseases', because food was internalised more frequently and for longer in the body.[151] This is reflected in the proliferation of works during the early modern period which outlined general and specific rules for a healthy diet. People were advised to eat a varied diet, with the proviso that the type and quality of food to be ingested depended on each person's individual age and constitution. The healthiest diets were also supposed to change with the seasons of the year, in quantity, as well as the type of food consumed.[152] In colder seasons, readers were advised to eat much and 'feed liberally on strong meats, as Beef, Barren Does, Gelt [gelded] and on spiced and baked meats for better digestion'.[153] During warmer seasons, different advice was offered. In

[149] W.S.C. Copeman, *Doctors and Disease in Tudor Times* (London, 1960), p. 155.

[150] Curth, 'The Medical Content', pp. 267-268; Mark Grant, *Galen on Food and Diet* (London and New York, 2000), pp. 68-190.

[151] Margaret Pelling, *The Common Lot: Sickness, Medical Occupations and the Urban Poor in Early Modern England,* (London, 1998), p. 52.

[152] Curth, 'Lessons from the Past', p. 18.

[153] John Pool, *Poole. 1656. An Almanack and Prognostication, or The Country-mans Counsellor for Health and Husbandry, For the Year of our Lord* (London, 1656), sig B2r. The pagination system in early modern books was sometimes different than it is today. Some sections or even whole books use 'signatures'. 'B2r' represents the second page of the second section. 'A' the first section and so on. The 'r' refers to the Latin recto which means the front side of the page, whilst 'v' refers to the Latin verso, or the back side of the page. For more

April, for instance, 'our blood begins to heat and wax rank, and therefore it is expedient to eat meats of light digestion. Salt meats are very hurtful, chiefly to restive persons'.[154] During spring, readers were advised to 'Abstain from such Meats as do engender raw, crude, and moist humours'.[155] Whereas during the summer months, writers advised their readers to eat fruit in a 'ripe state', this was equally true of herbs, for instance, which though considered bad for the body when they were unripe, during the summer months, 'their crude and superfluous humours exhaled'.[156] Regardless of season, certain foods were generally considered good for the health of the body, where others were considered bad. Cheese, in particular, was a common feature of daily diet. Generally, it was thought that 'for healthy men may cheese be wholesome food'.[157] There were also numerous references to the consumption of fruits and vegetables in popular works.[158] Some, such as 'sallets', were recommended as being particularly healthy foodstuffs.[159] Lettuce, which

---

on referencing styles in early modern books during the period 1450-1800, see Curth, 'Lessons from the Past', p. 20.

[154] Curth, 'Lessons from the Past', pp. 16-19; William Heathcott, *Annus ab Incarnatione Domini. 1665. An Almanack and Prognostication for the Year of our Lord 1665 Being the First from Bissextile or Leap-year* (London, 1656), sig A7v.

[155] Richard Saunders, *Apollo Anglicanus. The English Apollo: Treating of the End of the World, so Much this Year Expected, and Astrologically Predicting the Most Observable Affairs of this Present Revolution* (London, 1656), sig C4r.

[156] Ferdinando Beridge, *Oi Dodekomzooi, or, An Almanack for the Year of our Lord God 1654* (London, 1654), sig B4v; Nicholas Culpeper, *Culpeper Revived from the Grave, to Discover the Cheats of that Grand Impostor call'd Aurum Potabile* (London, 1687), sig C2r.

[157] Curth, 'Lessons from the Past', pp. 16-19; Jonathan Dove, *Dove Speculum Anni à Partu Virginis MDCLX, or, An Almanack for the Yeare of our Lord God 1660* (Cambridge, 1660), sig B3r.

[158] Curth, 'Lessons from the Past', p. 18.

[159] Boorde, *A Compendyous Regyment,* pp. 30-31.

was the most common 'sallad herb', was said to be grown 'in every garden'.[160] Salads often included a range of ingredients, including raw vegetables, fruits, nuts and occasionally eggs and shellfish.[161] All these foods were considered to be particularly healthy.[162] Others, however, were to be avoided. These included 'eating trash and food contrary to nature'.[163] According to one contemporary, these included produce such as 'garlicke, onions, radishs, sweete and thicke Wines, salt meates, coleworts [and] pulses'.[164]

Readers were also advised to pay attention to the origins of their food: 'ideas of cleanliness and dirt, of natural and unnatural, of light and darkness, of movement and sluggishness underlay many of the descriptions of healthy and unhealthy foods'. Animals were judged to be healthy (and thus healthy food) in the same ways as humans were judged. As such, the husbandman working in the fields was thought to be healthier and longer lived than the city merchant or student, so animals and fish coming from the wild were equated with health and cleanliness.[165] The healthiest fish, for instance, were produced when 'by reason of continuall agitation, it becometh of a purer, and less slimie

[160] Nicholas Culpeper, *The English Physitian Enlarged: With Three Hundred, Sixty, and Nine Medicines made of English Herbs* (London, 1653), p. 157.

[161] P. Brears, 'Decoration of the Tudor and Stuart table', in C.A. Wilson ed., *Food and Society: The Appetite and the Eye* (Edinburgh, 1991), p. 92.

[162] Heathcott, *Annus ab Incarnatione*, sig A5v;

[163] Joseph Blagrave, *Blagrave's Ephemeris for the Year 1660 with Physical and Astrological Observations on Every Month* (London, 1660), sig B6r.

[164] John White, *White 1643. A New Almanacke and Prognostication for the Yeere of our Lord God 1643: Being the Third after the Bissextile or Leape-yeare* (London, 1643), sig C1v; Heathcott, *Annus ab Incarnatione.*

[165] Wear, *Knowledge and Practice,* p. 203.

substance, and consequently of easier concoction [digestion], and of a purer juyce'.[166] Similarly, the best freshwater fish would be that 'which is bred in pure, stonie or gravelly rivers, running swiftly'.[167] Lemery recommended the flesh of animals bred on mountainous terrain, continuously exercised in wholesome serene air. This promoted easy digestion and enhanced the nutritional properties of the meat consumed.[168] The land on which animals grazed and food was grown was important also. The earth itself could be seen 'anthropomorphically, as needing to be cared for in the same way as people'. John Norden described the land in terms of hot, dry, cold and moist, the four qualities that made up the world and the body. He advised the farmer to care for his land because it is 'like the body, if it bee not nourished with noutriture and comforted and adorned with the most expedient commodities, it will pine away, and become forlorne, as is the minde that hath, no rest nor recreation waxe the lumpish and heavy'. There were some common factors underlying these explanations. The most important involved the idea that the relationship between the environment and its constituent parts must be approached holistically. This was a common thread which ran through many books advising on a correct health regimen.[169]

---

[166] Venner, *Via Recta,* p. 69; Thomas Cogan, *The Haven of Health. Chiefely Gathered for the Comfort of Students, and Consequently of all those that have a Care of their Health* (London, 1636), p. 161.

[167] Venner, *Via Recta,* p. 70; Sir Thomas Elyot, *The Castel of Helth Gathered and Made by Syr Thomas Elyot Knyghte, Out of the Chiefe Authors of Physyke* (London, 1539), pp. 22-23.

[168] Louis Lemery (1677-1743), cited in Anonymous, *An Essay on the Most Rational Means of Preserving Health, and of Attaining to an Advanced Age. To Which are Added, Anecdotes of Longevity* (London, 1799), p. 16.

[169] John Norden, *The Surveiors Dialogue, Very Profitable for All Men to Peruse, but Especially for all Gentlemen* (London, 1610), pp. 196, 76; Wear, *Knowledge and Practice,* pp. 204-205. The analogy between the earth and body is also found in John Donne's extended comparison of the earth and its ills to those of the body: John Donne, *Deuotions upon Emergent Occasions, and Seuerall Steps in my Sicknes* (London, 1627), p. 116.

Perhaps the most important rule when it came to diet and especially with regards to age and longevity was the consensus that individuals should always eat and drink within moderation. As we shall see in Chapter 3, what constituted moderation was contested, frequently seen within predetermined subjective limits that affected the relationship between class gender and age. Suffice to say in this present chapter, which is concerned with general prescriptions concerning the non-naturals, contemporaries thought that straying from the path of moderation, otherwise known as the 'golden mean', or mediocrity, could have a profound effect on both the pace of aging and ultimate longevity. Diet, according to James Hart, 'not onely maintaineth and entertaineth health present, but helpeth also to recover that which is by sicknesse impaired (and as some would have it) produceth the life of man farre beyond the fatall period for all men appointed'.[170] Too much, rather than too little food was frequently the focus of contemporary ire. 'The Throat', as Nicholas Culpepper reminded his readers, 'destroies more than the Sword doth, excess in either meat or drink causes Crudities, Crudities Sickness, and Sickness Death'.[171] Luxurious living, in particular, was considered a prime cause of premature aging.[172] Gluttons, as John Harris reminded his readers, 'dig their graves with their teeth, whil'st their Kitchin is their Shrine, their Cook their Priest, their

[170] Hart, *Klinike,* p. 4.

[171] Nicholas Culpepper, *Health for the Rich and Poor, By Dyet without Physick* (London, 1656), sig A2r.

[172] Lemnius, *The Touchstone of Complexions,* p. 36; Bullein, *The Government of Health,* p. 32; Cogan, *The Haven of Health*, pp. 1-5; John Archer, *Every Man His Own Doctor. In Two Parts. Shewing I. How Every One may know His Own Constitution and Complection* (London, 1671), pp. 97-99; Pechey, *A Plain Introduction,* p. 86; Thomas Tryon, *Healths Grand Preservative: or, The Womens Best Doctor* (London, 1682), pp. 6-7; Thomas Tryon, *A Way to Health Long Life and Happiness, or, A Discourse of Temperance, and the Particular Nature of all Things Requisite for the Life of Man* (London, 1621), pp. 16-17.

Table their Altar, and their Belly their God.[173] 'The golden mean is best', was a popular proverb at this time. Indebted to Aristotlean ideas, Protestant ministers and Galenic doctors alike, preached the mean in conjugal love, sexual activity, diet, labour and recreation.[174] Cornaro's *Treatise of Temperance and Sobriety,* for instance, emphasised how gluttony led to ill health and premature old age. The content of *The Treatise,* with its description of Cornaro's conversion to a more temperate way of life at the age of forty, appealed to all, regardless of religious denomination. It placed great emphasis on the language of vice and virtue to unite religion with health. As such, it was popular with continental European and English readers alike.[175] The link between virtue and humoural medicine has also been noted by Oswei Temkin. Temkin remarks of Hippoctatic and Galenic medicine that 'The coupling of right diet and virtue was an essential part of Galenic philosophy ... Correct and incorrect diet could determine health and disease, and because it was under human control, the choice of diet gave a moral dimension to health and sickness'.[176]

The Non-naturals: Sleep & Waking

Sleep was an important part of the Galenic health regime and was regularly referred to in medical works of the period. Higher mortality rates, much like today, were thought to stem from an inadequate amount of time spent sleeping – less than seven to eight hours at a time. Insufficient sleep was also known to affect mental functions as well as general

[173] John Harris, *The Divine Physician, Prescribing Rules for the Prevention, and Cure of Most Diseases, As Well of the Body, As the Soul* (London, 1676), p. 22.

[174] Joshua Scodel, *Excess and the Mean in Early Modern English Literature* (Princeton, 2002), pp. 6-29.

[175] Wear, *Knowledge and Practice,* p. 181; Luigi Cornaro, *The Sure and Certain Method of Attaining a Long and Healthful Life: With Means of Correcting a Bad Constitution ... Made English by W. Jones* (London, 1702), pp. 33-50.

[176] Temkin cited in Schoenfeldt, *Bodies and Selves*, p. 24.

mental wellbeing.[177] Nicholas Culpepper believed that sleep 'comforts nature much, refresheth the memory, cheers the spirits, quickens the senses'.[178] Richard Allestree suggested that since sleep was ordained by God, it 'comes as a medicine to that weariness, as a repairer of that decay, so that we may be enabled to such labours as the duties of Religion or works of our Calling require us'.[179] Sleep was thought to provide the body with a chance to combat illness and 'repair the decay of daily living'. It was also important to neither sleep too much or too little.[180]

As with other non-naturals, moderation was considered key when it came to what counted as adequate sleep: 'Long and superfluous Sleep' could 'chill the Body, weaken the Natural Heat and breed Flegmatic Humours', whereas moderate sleep 'strengthenth all the spirits, comforteth the body, quieteth the humours and pulses'. The hours of sleep needed and what constituted moderation, could vary according to temperament: the sanguine and choleric needed less sleep (seven hours), than the phlegmatic and melancholic who needed around nine hours sleep.[181] Failure to moderate sleeping habits, 'turning day into night', could encourage the emergence of a colder temperament, with the concomitant disadvantages this wrought to health, longevity and aging.[182] John Pechey thought that too much time spent awake rather than sleeping contributed to a

[177] Curth, 'Lessons from the Past', p. 17.

[178] Nicholas Culpeper, *Galen's Art of Physick: Wherein is Laid Down, 1. A Description of Bodies, Healthful, Unhealthful, and Neutral* (London, 1657), p. 129.

[179] Richard Allestree, *The Whole Duty of Man Laid Down. In a Plain and Familiar way for the use of All* (London, 1680), p. 203.

[180] Curth, 'The Medical Content of English Almanacs', p. 269.

[181] Pechey, *A Plain Introduction,* p. 83; Vaughan, *Approved Directions for Health,* p. 58.

[182] Maynwaringe, *Vita Sana & Longa,* p. 6.

weakening of the body's natural heat.[183] Individuals with colder temperaments, as we have seen, were thought to age quicker than those with hotter temperaments. Sleeping too long was generally thought to encourage this state of affairs in individuals who were not originally endowed with a phlegmatic temperament. Yet whilst moderation in sleeping generally meant less than more, too little sleep was considered equally destructive in hastening the body to a temperament comparable with that of old age.[184] An inadequate period of sleep 'consumes the superfluous moistures, and then the necessary; and lastly, the solid parts themselves, and so extenuates, dries, and emaciates the body'.[185]

The Non-naturals: Passions & Emotions

The passions appear to have been a favourite topic of writers during the seventeenth century.[186] A number of books were published urging readers to suppress their pride, anger, envy, malice, sorrow and fear.[187] Robert Gardner preached that such emotions were destructive, 'carrying us Head long to Hell'.[188] Powerful emotions, according to the Doctor of Divinity, Richard Allestree, contained the seeds of 'death and life'.[189] Jealousy,

[183] Pechey, *A Plain Introduction,* p. 83.

[184] Maynwaringe, *Vita Sana & Longa,* p. 6.

[185] Brooke, *Ugieine*, p. 177.

[186] Gail Kern Paster, Katherine Rowe and Mary Floyd-Wilson, eds., *Reading the Early Modern Passions: Essays in the Cultural History of Emotion* (Pennsylvania, 2004); Susan James, *Passion and Action: The Emotions in Seventeenth Century Philosophy* (Oxford, 1997); Douglas Trevor, *The Poetics of Melancholy in Early Modern England* (Cambridge, 2004).

[187] Curth, 'Lessons from the Past', p. 19.

[188] Robert Gardner, *Veterinarium, Meteorologist Astrology* (London, 1698), sig C1r.

[189] Richard Allestree, *Allestree 1640 A New Almanack and Prognostication for the Yeere of our Lord God 1640, Being the Bissextile or Leap Yeere* (London, 1640), sig C5r.

anger, choler, revenge, sorrow, fear and envy in particular, were thought to damage both the soul and the body.[190] The mutual interactions between the body and soul had a long history in this respect. Galen marshalled the authority of both Plato and Aristotle to labour this point.[191] Thus, an emotional state according to contemporary authors would weaken the body and provide the perfect, welcoming conditions for 'disorders'.[192] The passions were of such force in the potential overthrowing of bodily health that Tobias Venner advised his readers to 'bridle all irrational motions of the mind, by the reason and understanding and labour by all means to observe a mediocrity, in their passion, wherein consisteth the tranquillity of mind and body'.[193] The passions, particularly fear and grief, resulted in 'lasting inconvenience: by pressure of heart, obstruction of spirit, wasting of strength, dryness of bones, exhausting of nature'.[194] Extreme passions, experienced suddenly, would bring the body nearer to old age. Anger, joy and the like would 'dry the Body, alter it too much, troubling it and changing it from its natural Constitution'.[195]

Some, like Francis Bacon, thought the emotions were compatible with health and longevity if one experienced them on a superficial level. Love was a positive force for regulating life 'if successful and not too deep'. Experiencing moderate shame was also conducive to the regulation of age and prolonging life but this was not the case when shame proceeded from 'some great ignominy' and the feeling of shame was acute,

---

[190] Curth, 'Lessons from the Past', p. 19; Blagrave, *Blagrave's Ephemeris,* sig B6r.

[191] Schoenfeldt, *Bodies and Selves,* p. 9.

[192] Blagrave, *Blagrave's Ephemeris,* sig B6r.

[193] Venner, *Via Recta,* p. 30.

[194] Edward Reynolds, *A Treatise of the Passions and Faculties of the Soule of Man. With the Severall Dignities and Corruptions Thereunto Belonging* (London, 1640), p. 232.

[195] Pechey, *A Plain Introduction,* p. 93; Cuff, *The Differences of Ages,* pp. 103-104.

continuing for a considerable length of time.[196] John Pechey thought a certain amount of anger could be positive, particularly when a disease had predisposed the individual to a colder, therefore deficient temperament: 'Anger excites and increases the natural Heat, and oftentimes it is good to be angry, to repair that natural Heat'.[197] Nevertheless, the propensity of some individuals to an 'extremity of passion' predisposed them to falling ill.[198] In the worst cases, the sins of passions could cause a person to go mad, or die an early death.[199]

The Non-naturals: Emptiness and Repletion

Whilst it was considered important to monitor what went into the body, it was also important to regulate what was taken out. The body, in this regime, was considered a 'porous edifice continually producing superfluous excrements which must be removed'.[200] The 'collection of excremental superfluities', as Henry Cuff termed them, corrupted and rotted the body prematurely.[201] Retaining excrements too long in the body, or voiding these too often, were thought to cause ill-health and disease.[202] Periodically, then, the removal of excessive humours was used as a preventive health measure. Unwanted humours were included within four main categories during the early modern period:

---

[196] Francis Bacon, *The Philosophical Works of Francis Bacon, Baron of Verulam, Viscount St. Albans, and Lord High-Chancellor of England; Methodized, and made English, from the Originals* (London, 1733), pp. 374-383.

[197] Pechey, *A Plain Introduction,* p. 94.

[198] John Goldisborough, *An Almanack and Prognostication for the Year of our Lord, 1662. Being the Second from Bissextile or Leap Year, and from the Creation, 5611* (London, 1662), sig A2r.

[199] Culpeper, *Galen's Art,* p. 132.

[200] Schoenfeldt, *Bodies and Selves,* p. 13.

[201] Cuff, *The Differences of the Ages,* p. 101.

[202] Joannes Jonstonus, *The Idea of Practical Physic in Twelve Books. Viz. 1. The Art to Preserve Health. 2. Of the Preternatural Disorders of Mans Body, and their Signs ... Englished by Nich. Culpeper, Gent* (London, 1657), p. 23.

bleeding, purging, bathing and sweating.[203] Much of the advice concerned with bleeding, particularly on phlebotomy, generally began by outlining what not to do. Blood should not be let when 'the weather is extreme hot or cold'. Readers were also advised not to allow blood to be taken from those of 'decrepit old age' and 'young infants'.[204] The amount of blood that could safely be purged from the body was also linked to the complexion of the individual: those with 'coole complexions only had narrowe vaines and little bloude', whereas a 'hote' complexion 'aboundeth with much bloude' and could afford to have more taken.[205] The various dangers inherent in letting blood was also recognised. If done incorrectly, it 'openeth a way to dangerous infirmities, and oft to present death'. Because blood was regarded as the chief humour, too much taken out of the body was considered dangerous, potentially having deadly consequences.[206] Certain people were not fit to bleed: those who were too fat or thin and those who were either very young or very old (defined as over fifty-six years old).[207]

---

[203] Curth, 'The Medical Content of English Almanacs', p. 271; Frig Winter, *Winter. An Almanack for the Yeare of Our Lord 1646. Being the Third After Leap-Yeare. To Which is Added a Compendious Concordance of Yeares* (Cambridge, 1646), sig B1r; Wear, *Knowledge and Practice.*

[204] Allestree, *Allestree 1640*, sig C4v.

[205] Philip Moore, *The Hope of Health, Wherein is Conteined A Goodlie Regiment of Life: as Medicine, Good Diet and the Goodly Vertues of Sondrie Herbes* (London, 1565), pp. 47-48.

[206] John Woodhouse, *Woodhouse 1647. A New Almanacke and Prognostication for the Yeere of Our Lord God 1647: Being the Third after the Bissextile, or Leap-Yeere* (London, 1647), sig B2v; Sir George Wharton, *Naworth. 1645. A New Almanack, and Prognostication for the Yeare of our Lord and Saviour Jesus Christ, 1645* (Oxford, 1645), sig B6v.

[207] Curth, 'Lessons from the Past', pp. 17-20; Thomas Langley, *Langley 1641. A New Almanack and Prognostication for this Yeare of our Lord God 1641, Being the First After Leape-Yeare* (London, 1641), sig B2r; Fly, *Fly 1657. An Almanacke, for the Yeare of our Lord God, 1657. Being the First after Bissextile or Leap-year* (London, 1657). For more on purging see Jackson, 'A Short Guide', p. 488.

Other means to purge the body included vomiting, sneezing and sweating.[208] Implicating these superfluous humours, women were considered to be distinct from men due to their unique physiological constitution and associated 'internal 'flows'.[209] In this respect, the male body was considered more efficient than the female. Traditional theories accorded them more means of fluid elimination. Men could get rid of excess moisture through sweating and the ejaculation of semen.[210] For women, menstruation performed a similar function. Menstruation was considered necessary for a woman's health and consequently physicians viewed any irregularity as a symptom of disease.[211] Another area which was brought to the forefront discussions of male and female bodies in the context of this non-natural was sexual intercourse, with its potential benefits and dangers to health. According to one popular book, the best form of purging was the 'sweet Evacuation by way of Venus'.[212] In moderation and at certain times of the year, sexual intercourse was

[208] Curth, 'Lessons from the Past', p. 19.

[209] Churchill, 'The Medical Practice', p. 17.

[210] Martensen, 'The Transformation of Eve', p. 108.

[211] Crawford, 'Attitudes to Menstruation', pp. 47-53; Michael Stolberg, 'A Woman's Hell? Medical Perceptions of Menopause in Preindustrial Europe', *Bulletin of the History of Medicine,* Vol. 73.3 (1999), p. 407; Martin King Whyte, *The Status of Women in Preindustrial Societies* (Princeton, 1978); Natalie Zemon Davis, *Society and Culture in Early Modern France* (London, I975); M. A. Screech, *The Rabelaisian Marriage: Aspects of Rabelais's Religion, Ethics and Comic Philosophy* (London, 1958), pp. 84-103; James Vincent Ricci, *The Genealogy of Gynaecology: History of the Development of Gynaecology Throughout the Ages, 2000 B.C.-1800 A.D* (Philadelphia, 1943), pp. 342, 357. Gualtherus Bruele, *Praxis Medicinae: or, The Physicians Practice. Wherein are Contained Inward Diseases from the Head to the Foote* (London, 1632), p. 363; Jane Sharp, *The Midwives Book, or, The Whole Art of Midwifery Discovered* (London, 1671), pp. 83-84, 290; Paré, *The Workes of that Famous Chirurgion*, pp. 945-947; John Freind, *Emmenologia: Written, in Latin, By the Late Learned Dr. John Freind. Translated into English by Thomas Dale* (London, 1729), pp. 10-12, 18.

[212] William Basse, *A Help to Discourse: or, More Merriment Mixt with Serious Matters* (London, 1682), p. 168.

an important part of health. Galenic theory stipulated that if the 'natural seed' was kept too long in the body it would turn into poison.[213] For married men and women, sexual intercourse in moderation played a major part in the preservation of health.[214] Because of this, contemporary physicians suggested that never-married women would suffer more ill health than ever-married women as they aged.[215] For single women (and sometimes men) who lived outside the conjugal bond, and were without the health benefits of regular intercourse, effects could be dire. According to early modern physicians, because never-married women had not utilised their reproductive organs they could only look forward to a decrepit and bothersome old age.[216] Wives, according to Fonteyn, are 'more healthfull then Widowes, or Virgins, because they are refreshed with the mans seed, and ejaculate their own, which being excluded, the cause of the evill is taken away'.[217] As was typical with the non-naturals, moderation was considered key to health. This was exceedingly difficult in the context of early modern gender stereotypes, according to which abstinence or even moderation could be almost impossible for many married men. Women were characterised as sexually voracious, making them physically demanding.

---

[213] Curth, 'Lessons from the Past', p. 19; Lawrence Stone, *The Family, Sex and Marriage in England 1500-1800* (London, 1979), p. 313.

[214] Gail Kern Paster, *The Body Embarrassed: Drama and the Disciplines of Shame in Early Modern England* (Ithaca, 1993), p. 133; Alessandro Massaria, *De Morbis Foemineis, The Woman's Counsellour: or the Feminine Physician ... Translated out of Massarius de Morbis Mulier. By R.T. Philomathēs* (London, 1657), p. 12; Curth, 'Lessons from the Past', p. 19.

[215] Froide, 'Old Maids', p. 93.

[216] Carroll Smith-Rosenberg, 'Puberty to Menopause: The Cycle of Femininity in Nineteenth-Century America', *Feminist Studies,* Vol. 1.3/4 (1973), pp. 58-72; Banner, *In Full Flower,* p. 169; Amy Froide offers convincing evidence that never-married women were not especially disadvantaged in the aging process when compared to ever married women: Froide, 'Old maids', pp. 89-110.

[217] Fonteyn, *The Womans Doctor,* pp. 4-9.

Allowing women to dictate the terms of a sexual relationship was more harmful for the health of the male body than the female, as well. Going beyond moderation, in this sense, would dry up the male body prematurely, whereas women were compensated for their cold-moist, arguably deficient temperament, through the hotter male seed.[218]

The Non-naturals: Motion & Rest

Hippocrates who wrote three books on regimen noted that 'eating alone will not keep a man well; he must also take exercise'. Galen capitalised on the tenets of Hippocrates in this respect.[219] Exercise was widely acknowledged to be of great importance for an effective digestive system which acted as 'the bellows to kindle and revive our natural heat'. Without exercise, an abundance of superfluous humours would accumulate, resulting in a lazy body and a dull mind.[220] In the seventeenth century, many writers of popular medical books offered the same message: exercise, or motion as it was termed, was a vital part of a good health regime.[221] These included proverbs stating that 'Exercise is best, For him that in old Age would live at rest', or for 'the man in health, exercise is the only medicine'.[222] Any activity which was 'vehement & a voluntary stirring of one's body,

[218] Curth, 'Lessons from the Past', p. 19; Anthony Fletcher, *Gender, Sex and Subordination in England 1500-1800* (London, 1995), p. 74; Crawford, 'Sexual Knowledge', p. 91.

[219] Galen and Hippocrates cited in Jack W. Berryman, 'The Art of Medicine, Motion and Rest: Galen on Exercise and Health', *The Lancet,* Vol. 380.9838 (2012), p. 210.

[220] Cuff, *The Differences of the Ages*, p. 162.

[221] Curth, 'Lessons from the Past', p. 17.

[222] Thomas Trigg, *Calendarium Astrologicum: or An Almanack for the Year* (London, 1681-1684), sig A2v; Robert Neve, *Merlinus Verax: or An Almanack for the Year of Humane Redemption, by Jesus Christ* (London, 1671), sig A5r.

which altereth the breathing, whose ende is to maintaine health, and to bring the bodie to a very good habit', was counted as exercise.[223]

A range of physical activities were counted as exercise in early modern England. The rather broad meaning of what constituted exercise owes much to contemporary definitions of 'recreation', as 're-creation', signifying the process of having 'undergone a renewal in body or mind'.[224] Exercise could include sports like football, the most popular plebeian sport played at this time.[225] As well as football, activities which were included as exercise usually revolved around horses, whether for 'running', 'hunting', or 'ambling'. Gervase Markham also suggested that the Englishman might partake of 'hawking, coursing of Grey-hounds, Shooting, Bowling, Tennis or Baloone'. Another contemporary recommended 'leaping' as being 'an exercise very commendable and healthful for the body'.[226] Dating from the previous century, a number of games involved with running like 'post and pillar' and 'prisoner's base' were also mentioned.[227] 'Playing with weapons',

[223] Richard Mulcaster, *Positions Wherin those Primitiue Circumstances be Examined, Which are Necessarie for the Training vp of Children, either for Skill in their Booke, or Health in their Bodie* (London, 1581), p. 53; Curth, 'The Medical Content of English Almanacs', p. 269.

[224] Elaine McKay, '"For Refreshment and Preservinge Health": the Definition and Function of Recreation in Early Modern England', *Historical Research,* Vol. 82.211 (2008), pp. 55, 61, 66, 69. See also: Joan-Lluís Marfany, 'The Invention of Leisure in Early Modern Europe', *Past and Present,* Vol. 156 (1997), pp. 174-191; Peter Burke, 'The Invention of Leisure in Early Modern Europe', *Past and Present,* Vol. 146.1 (1995), pp. 136-150.

[225] David Underdown, 'Regional cultures? Local Variations in Popular Culture in the Early Modern Period', in Tim Harris ed., *Popular culture in England, c. 1500-1850* (Basingstoke, 1995), p. 38.

[226] Gervase Markham, *Country Contentments, In Two Bookes, The First, Containing the Whole Art of Riding Great Horses in Very Short Time* (London, 1615), sig A1r; Henry Peacham, *The Compleat Gentleman Fashioning him Absolute in the Most Necessary & Commendable Qualities Concerning Minde or Bodie that may be Required in a Noble Gentleman* (London, 1622), pp. 177-182.

[227] David Loades, *The Tudor Court* (London, 1986), p. 99

dancing and hunting were also considered exercises.[228] Alternatively, 'nobles and gentleman' might enjoy swimming, whilst women were encouraged to try gardening as a form of healthy recreation.[229] Humphrey Brooke considered the acquisition of knowledge of herbs and drugs for use in medicine as a suitable activity for young noblewomen.[230] Certain exercises were also considered better than others for strengthening certain parts of the body: 'Shooting with a Bow is counted as a proper Exercise for the Breast and Lungs; bowling for the Back and Reins: But riding on horseback is the best Exercise of all'.[231] 'Exercise' also extended to activities which were less than physically arduous, like singing, speaking loud and clear reading 'with a loud voice'.[232] Physical activity only 'counted' as exercise if it were undertaken for that reason. Labourers, however, might use the same vigorous movements in their work.[233] This view is supported by a number of contemporary works, which refer to moderate exercise and labour, rather than one or the other.[234] As a consequence, exercises and laborious activities were compared and often considered as equitable versions of one another, despite the apparent differences to our

[228] Cogan, *The Haven of Health,* pp. 1-4.

[229] Peacham, *The Complete Gentleman,* pp. 180-181; Ann Lawrence, *Women in England 1500-1760* (London, 1996), p. 158.

[230] Brooke, *Ugieine*, pp. 146-148.

[231] Pechey, *A Plain Introduction,* p. 87.

[232] Archer, *Every Man His Own Doctor,* pp. 97-98.

[233] Alessandro Arcangeli, *Recreation in the Renaissance: Attitudes toward Leisure and Pastimes in European Culture, c. 1425-1675* (Basingstoke, 2003), pp. 30-42.

[234] Curth, 'The Medical Content of English Almanacs', p. 269; Francis Perkins, *Perkins. 1657. A New Almanack and Prognostication for the Year of our Lord God 1657. Being the First after Bissextile or Leapyear* (London, 1657), sig C1r; Cardanus Rider, *British Merlin: Bedeckt with Many Delightful Varietie [,] and Useful Verities* (London, 1690), sig B5v; John Woodhouse, *Woodhouse 1647. A New Almanacke and Prognostication for the Yeere of Our Lord God 1647: Being the Third after the Bissextile, or Leap-yeere* (London, 1699), sig A2v.

eye at least. As such, the labours of the husbandman and the exercise of the noble man were elided in contemporary thought: the general 'past times' of the former were conflated with the digging or ploughing of the land by the latter.[235]

Contemporaries placed limits, often classical in origin, on the amount of exercise or labour an individual should undertake. Deviations either side of the ubiquitous trope of moderation, which was emphasised across the range of non-naturals, placed the health of the body in considerable doubt. The purpose of exercise/work was to procure 'natural sweat', which would open the pores, clean the blood and comfort the spirits. Activities that either over or under-exerted the individual were ruled out as being likely to cause an imbalance in bodily humours.[236] Galen argued that 'exercise should cease as soon as soon as the body begins to suffer' and 'exercise will be such that each part of the body moves in proportion, none being worked either too hard or not enough'.[237] John Pechey, in the seventeenth century, expanded upon the limits of exercise/work as outlined by Galen:

> Exercise is to be used so long as the Body can bear it, without growing weary, that is, till you wax hot, having a fresh Coulour, and begin to sweat, which, as soon as you perceive, change your cloaths, and dry well all the Members, and put on other Cloaths, and if necessary, lye a little in Bed and rest your self, till you shall be refreshed, and recover new Strength.[238]

---

[235] Cogan, *The Haven of Health,* pp. 1-4; Archer, *Every Man His Own Doctor,* pp. 97-98.

[236] Curth, 'The Medical Content of English Almanacs', pp. 269-270.

[237] Galen and Hippocrates cited in Berryman, 'The Art of Medicine', p. 210.

[238] Pechey, *A Plain Introduction,* p. 87.

Contemporaries would also have been under no illusions that deviations from the mean, either through too much or too little exercise/work, would bring upon them a premature old age. Too much exercise, without adequate rest, caused the body to dry prematurely and 'soone languish and pine away', whilst signifying the most obvious physical signs of premature old age like 'early wrinkles'. When the body, in the words of Richard Steele, 'is harrast with extreme Labours, it is no wonder that Weakness, Languishment and Old-age hasten on a pace'.[239] Writers were also concerned with the physical effects of too little labour/exercise. Idleness was thought to encourage a cold temperament. Readers consulting the works of either John Pechey, Henry Cuff or Levinus Lemnius, and being familiar with the temperaments, would have immediately understood that idleness contributed to a cold-moist or cold-dry temperament, which as we have seen, disadvantaged men and women in the aging process when compared with those [men] of hotter temperaments. As Pechey said: 'Idleness is reckoned the Chief Cause of cold Diseases ... and makes the Body, lazy, weak, and causes a pale Complexion, extinguishes the natural Heat, increases Flegm, and fills the Body with Superfluities'.[240]

The Lamp Metaphor

The lamp metaphor was prominent in contemporary medical treatises and discussions of age and aging. Importantly, in the context of the metaphor, the hierarchy of the temperaments and the different advantages these conferred to men and women in the aging process could be reversed. Metaphors, as Donald Davies states, 'invite us to explore comparisons, make us notice similarities, use a situation as an image of another, and so

[239] Cogan, *The Haven of Health,* p. 12; Steele, *A Discourse Concerning Old-Age*, p. 26.

[240] Pechey, *A Plain Introduction,* p. 89; Henry Cuff and Levinus Lemnius make similar arguments about the cooling effects of too little exercise: Cuff, *The Differences of the Ages*, p. 100; Lemnius, *The Touchstone of Complexions,* p. 52.

on'.[241] This was the case with the lamp metaphor and its relationship to aging. Originally conceptualised by the ancients, the metaphor already had a long history by the seventeenth century.[242] According to this idea, aging was connected with degeneration and loss, which was regarded as the natural consequence of the working and passing of the life force. Aging was, in this instance, also an expression of a 'concealed but imperative driving force of life'.[243] Cicero commented in *De Senecute* that 'when the young die I am reminded of a strong flame extinguished by a torrent; but when old men die it is as if a fire had gone out without the use of force and of its own accord, after the fuel has been consumed'.[244] Aristotle, in his essay 'On Youth and Old Age', defined death as the destruction of the innate heat of the heart. He also used the analogy of a fire that can be extinguished suddenly or can gradually die out. In both kinds of death, he maintained that the 'fire' died from a failure to obtain the fuel that nourishes it. Using the analogy of a burning lamp, he noted that an exceptionally large flame would immediately use up the available supply of fuel.[245] The lamp metaphor was also conceptualised within the

[241] Donald Davidson, 'What Metaphors Mean', in Donald Davidson ed., *Inquiries into Truth and Interpretation: Philosophical Essays* (Oxford, 1984), p. 263.

[242] Peter Niebyl's account of the history of the lamp metaphor remains unsurpassed in this respect: Peter H. Niebyl, 'Old Age, Fever, and the Lamp Metaphor', *Journal of the History of Medicine and Allied Sciences*, Vol. 25.4 (1971), pp. 351-368.

[243] Galen and Aristotle's definitions of Marasmus and the Lamp Metaphor can be found in Theoharis C. Theoharides, 'Galen on Marasumus', *Journal of the History of Medicine,* Vol. 26.4 (1971), p. 370.

[244] Marcus Tullius Cicero, *De Amicitia, De Senectute,* trans. W.A. Falconer (London, 1927), pp. 83, 45; Niebyl, 'Old Age, Fever', pp. 351-368.

[245] Aristotle, *On the Soul: Parva Naturalia,* trans. W.S. Hett (London, 1964), pp. 423-425.

Hippocratic corpus, where it was stated that 'Old men have little innate heat'.[246] Galen used the lamp metaphor to illustrate suffocation of the flame by oil as well as air. Here, the oil was analogous to the blood. He further observed that although the flame of a lamp has oil for food, if too much is added the flame is extinguished rather than nourished. Galen also compared this to the act of piling wood on a fire that had barely started. Elsewhere, he used the notion of piling on too much wood or pouring on too much oil, thus suffocating the flame, in order to illustrate the effects of gluttony. Avicenna also introduced the lamp metaphor into his discussion of the non-naturals. He stated that the intrinsic (innate) heat consumes the intrinsic humidity of the body until it extinguishes itself in the same way that a lamp extinguishes itself by consuming all its fuel. He developed the notion that there was a fixed quantity of this original intrinsic moisture that determined the upper limit of a person's life-span. The role of the physician was to regulate the rate of consumption to extend the longevity of his patient. [247]

The lamp metaphor in hygiene, which conceptualised the role that human agency played in the production of old age, was established in the West by Roger Bacon in the thirteenth century.[248] Bacon's popularisation of this concept (and particular interpretation of the

[246] 'Aphorisms' [1, 14], in *Hippocrates,* trans. and ed., W.H.S. Jones (London, 1959), IV, pp. 105; Hippocrates [attributed], *The Genuine Works of Hippocrates: Translated from the Greek with a Preliminary Discourse and Annotations,* Vol. II, trans. Francis Adams (New York, 1886), p. 197; Niebyl, 'Old Age, Fever', pp. 351-368.

[247] Niebyl, 'Old Age', pp. 351-368; Galen, *Caleni [sic] Pergamensis De Temperamentis,* Vol. 1 (London, 1521), pp. 659-660; Avicenna [Attributed to Avicenna by Ibn Sina?], *Canon Medicinae,* Vol. 1 (London, 1608), pp. 162-163.

[248] Niebyl, 'Old Age', p. 360; Roger Bacon, *De Retardation Accidentium Senectutis,* eds., A.G. Little and E. Withington (Oxford, 1928), pp. 9, 11, 14-16, 24, 42; Roger, Bacon, *The Cure of Old Age and Preservation of Youth by Roger Bacon ... Translated out of Latin, with Annotations and an Account of his Life and Writings by Richard*

metaphor), which revolved around the relationship between heat and moisture, remained popular throughout the early modern period. Indeed, the metaphor was almost ubiquitous in seventeenth-century works addressing the ages of man, the temperaments and the non-naturals (these included works on hygiene in its original sense of the art of conserving health, from the Greek 'hygeia' or health and therapeutics).[249] Typically, these treatises were structured in a way which explained the different layers of interpretation that influenced age and aging. Firstly, writers tended to outline key components of the ages of man schemas and/or the four temperaments. Secondly, they explained how these ideas of age complemented or conflicted (depending on a particular interpretation of the metaphor) with an emphasis on the contingent and extraneous factors which influenced the pace of aging: the six non-naturals. By conceptualising the contingent effects of the non-naturals on the life-course, adherents of the theory behind the lamp metaphor privileged the idiosyncratic engagements of life-style either above or in equality with the more structured schemas of the ages of man or the temperaments.[250]

Browne (London, 1683), pp. 2-3, 5-6, 14, 16-17, 32, 69; E. Withington, 'Roger Bacon and Medicine', in A.G. Little ed., *Roger Bacon: Essays Contributed by Various Writers on the Occasion of the Commemoration of the Seventh Centenary of His Birth* (Oxford, 1914), pp. 352-353.

[249] Examples include: Tryon, *A Way to Health*, p. 13; Leonardus Lessius, *Hygiasticon: Or, The Right Course of Preserving Life and Health unto Extream Old Age. Together with Soundness and Integritie of the Senses, Judgement, and Memorie. Written Originally in Latin, by Leonard Lessius. Now Rendered into English, by T. Smith* (London, 1634), pp. 139-142; Haworth, *Anthropologia,* pp. 132-155; Walkington, *The Optick Glasse of Humors*; Lemnius, *The Touchstone of Complexions.*

[250] Examples of this format include: Tryon, *A Way to Health*; Haworth, *Anthropologia,* pp. 132-155; Steele, *A Discourse Concerning Old-Age*; Walkington, *The Optick Glasse of Humors*; Paré, *The Works of that Famous Chirurgion,* pp. 7-11, 28; Lessius, *Hygiasticon;* Lemnius, *The Touchstone of Complexions;* Gideon Harvey,

Contemporaries, for the most part, drew upon Avicienna and Aristotle's version of the metaphor, where the equitable distribution of both heat and moisture dominated discussions. Thomas Walkington provided a typical example of the former version, with the balance between hot and moist components in the humours interpreted as the be all and end all of negotiations involving the terms of continuing life:

> Man's life is upheld by two staffs: the one is native heat the other is radical moisture ... out heat is like the flame of a burning lamp; the moisture like the oil of the lamp, if there be not a symmetry and a just measure of one with the other, they will in a short time, the one of them destroy the other. For if the heat be two vehement, and the oil too little, the latter is speedily exhausted, and if the oil be too abundant and the heat too remise, the fire is quickly suffocated.[251]

Theoretically, if the balance between heat and moisture was maintained through temperance, a life-span of between 60-100 years was possible before death became inevitable.[252] 'Our life', as James Hart also explained, 'consists in moisture and heat ... But since our heat does daily consume and waste away this natural and radical moisture, it is again by the like humidity to be repaired ... this is performed by means of food, both meat

---

Archelogia Philosophica Nova, or, New Principles of Philosophy. Containing Philosophy in General. Metaphysicks, or Ontology. Dynamilogy, or a Discourse of Power (London, 1663).

[251] Walkington, *The Optick Glasse of Humors*, pp. 32-33.

[252] Cuff, *The Differences of the Ages*, p. 2; Francis Bacon, *History Natural and Experimental of Life and Death or Of the Prolongation of Life* (London, 1623); Bacon's bibliography can be found in Charles Webster, *The Great Instauration: Science, Medicine and Reform 1626-1660* (London, 1976), pp. xx, 246-247; Lessius, *Hygiasticon,* pp. 121-124; Hart, *Klinike,* p. 6.

and drink ... (and as some would have it) produces the life of man far beyond the period for all men appointed'.[253]

Sometimes, either the heat or moisture would be exhausted prematurely, thus providing the basis for contracted longevity and premature old age. Luigi Cornaro, a proponent of pro-longevity medicine, bemoaned the loss of much of his radical moisture in youth, which in his mind at least contributed to a premature old age. This loss, he argued, was a direct consequence of his less than scrupulous approach to temperance in youth. This was an irreparable loss which could not be redressed at some future time either.[254] Thomas Walkington, echoed Cornaro's sentiments when he wrote of the destructive effects of luxurious living and intemperance which 'suddenly extinguish our natural flame & suck vp the natiue oile of our liuely lamp ere we be a ware & die long before the complet age of man'.[255]

The lamp metaphor, or its central components of heat and moisture, was also present in less intrusive or explicit ways in contemporary medical literature. Nevertheless, these references, often casual and without broader reference to the metaphor itself, implied that contemporaries understood how their actions could be responsible for destroying the precarious balance between heat and moisture. Too much exercise was considered 'no friend to Prolongation of Life; for it overheats the spirits' and 'consumes too much the Moisture of the Body', whilst too little sleep, 'consumes the superfluous moistures'.[256] In similar terms, and without any obvious, specific engagement with the metaphor, the physician William Vaughan warned his readers of the dangers of 'immoderate venery',

[253] Hart, *Klinike,* p. 4.

[254] Cornaro, *Sure and Certain Methods*, p. 65.

[255] Walkington, *The Optick Glasse of Humors*, p. 33.

[256] Brooke, *Ugieine,* pp. 164, 177. Similarly: Cuff, *The Differences of the Ages*, p. 120.

which 'extinguisheth radicall moisture and hastneth on old age and death'.[257] More generally, and a point which cuts across the notion of sexed temperaments and the vulnerabilities of men and women as seen through the lens of the lamp metaphor, was the emphasis upon maintaining the balance between heat and moisture (even though women were of a cold temperament contemporaries thought there was some residual amount in their bodies) so the latter did not overwhelm the former. Both men and women with compound temperaments, where moisture was a secondary element in their humoural balance, needed to proceed with caution so they 'growe not too muche oute of square and beyonde measure'.[258]

There was also another way of looking at the lamp metaphor. This entailed seeing the relationship between the components of heat and moisture as contributing to the encroachment of the cold-dry temperament associated with old age. Aging was thus seen to be an effect of the decline of two humours (heat and moisture) that composed the human body in relation to two other humours (coldness and dryness). The secret of longevity was to discover those ingredients that retained heat and moisture while delaying the negative impact of cold and dry elements.[259] This interpretation was typical of the emphasis of the Hippocratic corpus on the cold-dry temperament of old age. Richard Steele provided an example of this thinking when he observed that when either heat or moisture was exhausted 'a cold and dry temper grows upon the body'.[260] Similarly, Ambrose Paré invoked the interpretation of the Hippocratic corpus when he associated the cold and dry temperament with 'the decay of the radicall moisture, which

[257] Vaughan, *Approved Directions,* pp. 69-70.

[258] Lemnius, *The Touchstone of Complexions,* p. 79.

[259] Brian S. Turner, 'Longevity Ancient and Modern', *Society,* Vol. 46.3 (2009), p. 257; Thane, *Old Age,* p. 37

[260] Steele, *A Discourse Concerning Old-Age,* p. 23.

the inbred heate causeth in the continuance of so many years'.[261] This interpretation of the lamp metaphor provided a clear parallel with the cold-dry temperament of old age in a way that interpretations solely concerned with the balance between heat and moisture did not.

The latter interpretation of the metaphor, which was solely concerned with the balance between heat and moisture (not the relationship to older, colder temperaments), proved analogous to the hotter, superior, male temperaments, and this is perhaps why contemporaries, as we will see in the next chapter, articulated the dangers and precarious nature of male perfection in temperamental terms. Heat 'devoured' from the 'violence of excessive inequality', whilst taking into account the element of moisture where 'too much oile oftentimes put out the lamp'.[262] To also make this point, William Bullein instituted in his writing an analogy with the natural world: 'Trees and herbs comprised of hot and moist elements, must needs die, and come to corruption'.[263] This interpretation, in essence, distanced colder temperaments from the debilitating changes of old age. Because of the emphasis on heat and moisture, colder temperaments appeared to be far removed from the dangers of premature aging. Indeed, the same elements which gave the hotter temperaments their superiority and perfection were, as a consequence of this interpretation of the lamp metaphor, simultaneously regarded as the agents of death and physical destruction. The difficulties involved in preserving an already perfect temperament were therefore pronounced. A man, even with a perfectly balanced temperament, which comprised equal elements of heat and moisture, 'could

[261] Paré, *The Works of that Famous Chirurgion*, p. 10.

[262] Cuff, *The Differences of the Ages*, p. 93.

[263] Bullein, *The Government of Health,* p. 13.

change suddenly so that even his closest associates would not recognise him in his debilitated state'. [264]

Heat and moisture, as we have seen in the discussion of the temperaments, above, also defined the (sanguine) temperament. Men of this temperament were said to enter old age later than those of the choleric, phlegmatic or melancholic temperament. Paradoxically, the same duality (hot-moist) was associated with decline and death in the lamp metaphor. The distance of colder temperaments from the heat and moisture associated with death and decline, here, played a part in the ambiguities which surrounded the claims that women aged sooner than men. Helkiah Crooke summed up the coldness of the female condition (and its incompatibility with the lamp metaphor determined by the balance between heat and moisture) in the most literal and evocative fashion when he repeated the ancient claim that for every ten male bodies burnt, only one female body would 'take fire'.[265] For those who had the burning up of life by extreme heat at the forefront of their minds, the cold-moist temperament was as far removed from this interpretation of the lamp metaphor as one could possibly imagine. This reflects a common view amongst philosophers and literary critics that 'Metaphor makes us see one thing as another by making some literal statement that inspires or prompts the insight'.[266] Indeed, the metaphor forced contemporaries to see the relationship between masculinity and femininity in ways which bucked the trend of male-perfection/female-imperfection. For instance, wet wood, as Lemnius likened the phlegmatic temperament,

---

[264] Lemnius, *The Touchstone of Complexions,* pp. 89, 91.

[265] Crooke, *Mikrokosmographia,* p. 273.

[266] Davidson, 'What Metaphors Mean', p. 263; Gordon Lyon, 'Philosophical Perspectives on Metaphor', *Language Sciences,* Vol. 22.2 (2000), p. 149.

'sendeth out nothing but stoare of thick moyst smoak'. So how could it burn sooner than something already hot? The lamp metaphor seen in this way reversed the relationship between superior-male temperaments and inferior-female ones. In a similar use of analogy, the second best temperament – the choleric – for its predominate dryness, was seen as especially exposed to the danger of death and destruction, 'For as the flame in a Torche or Taper feedeth vpon the combustible matter thereof'.[267] Even seeing women's condition as one step removed from old age because of her relative coldness (which the Hippocratic interpretation of the metaphor undoubtedly did) did not preclude an element of improvement (as we shall see in Chapter 3) which gradually distanced her from the temperamental weaknesses associated with her sex, 'therby the body by litle & litle, maye be to a better and quieter state reduced'. Life-style, even for a deficient temperament, had the power to institute 'Old age before the time', or 'Adolescence and youth to last long'. [268]

Nerves and Fibres: The Eighteenth century

While many aspects of the theories discussed above continued into the eighteenth century, there were also some new developments. Of the most significant for our purposes were ideas of the nervous body. Among historical periods, 'the first to cling to nervous physiology with a vengeance was the eighteenth century'. Indeed, 'much of the eighteenth-century Enlightenment was one magisterial footnote on nervous physiology'. During the century, the nerves were 'naturalised, theologised, demonised, mechanised,

[267] Lemnius, *The Touchstone of Complexions,* pp. 117, 127.

[268] The phlegmatic constitution could be altered for the better: Tryon, *A Way to Health,* p. 18; This was also a general point made by Lessius, *Hygiasticon,* p. 4; Quotes from Lemnius, *The Touchstone of Complexions,* pp. 66, 115.

climatised, medicalised, internalised, metaphorised and analogised'. [269] The eighteenth century also saw an enormous increase in interest in the nervous system as the source of the many ills of both body and mind.[270] Differentiated into normal and abnormal states, the nerves influenced health and determined longevity.[271] For much of the period, nervous physiology was contextualised within the broader category of fibre medicine or fibre theory. In anatomy, the fibre was the basic component of the eighteenth-century body. This assumed that that the whole body was composed only of fibres. This theory was first formulated in the anatomical field of the late seventeenth century. At this time, philosophers and plant and animal anatomists explored the micro-structure of the body through the microscope.[272] Nehemiah Grew, the famous plant anatomist, was the first to

[269] George S. Rousseau, *Nervous Acts: Essays on Literature, Culture and Sensibility* (Basingstoke, 2004), pp. 250-251.

[270] Harry Whitaker, C.U.M. Smith and Stanley Finger, 'Introduction', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), p. 3.

[271] Nicholas Robinson, George Cheyne and Robert Whytt, wrote extensively on the nerves and their relationship with health. Nicholas Robinson, *A New System of the Spleen, Vapours, and Hypochondriack Melancholy: Wherein all the Decays of the Nerves, and Lownesses of the Spirits, are Mechanically Accounted for* (London, 1729); Nicholas Robinson, *A New Theory of Physic and Diseases, Founded on the Principles of the Newtonian Philosophy* (London, 1729); George Cheyne, *The Natural Method of Cureing the Diseases of the Body, and the Disorders of the Mind Depending on the Body* (London, 1742); George Cheyne, *The English Malady: or, A Treatise of Nervous Diseases of All Kinds* (London, 1733); Robert Whytt, *Physiological Essays, Containing, I. An Inquiry into the Causes which Promote the Circulation of the Fluids in the Very Small Vessels of Animals* (Edinburgh, 1755); Robert Whytt, *Review of the Controversy Concerning the Sensibility and Moving Power of the Parts of Men and Other Animals* (London, 1761); Robert Whytt, *Observations on the Nature, Causes Nervous, Hypochondriac or Hysteric, to which are Prefixed some Remarks on the Sympathy of the Nerves* (Edinburgh, 1765).

[272] Hisao Ishizuka, '"Fibre Body": The Concept of Fibre in Eighteenth-century Medicine, c. 1700-40', *Medical History,* Vol. 56.4 (2012), pp. 562-564.

articulate, visualise and describe this new understanding of the body. The body, according to Grew, was wholly composed of nothing but fibres. His view of the body entered into the field of human anatomy by the end of the seventeenth century and was expounded, for the first time, in James Keill's textbook on human anatomy, *The Anatomy of the Humane Body Abridged* (1698). Keil was the first anatomist and physician to depart from the classical humoural model of the body in the history of the English-language anatomical textbook. He set forth the criterion that would become standard rhetoric amongst his peers when he declared that 'all the Parts [of the body] are made up of … Fibres'.[273]

'Fibres' were utilised extensively in early modern medicine and literary culture, relating also to the terms, 'nerve', 'thread', 'chain', 'girdle', 'web', 'weave', vibrate', and 'tremble', and images of fibre-based bodies – the 'woven' body, the 'trembling' body, and the 'sensitised' body.[274] Aging, during the eighteenth century, was associated with the conditions of the fibres or solid parts of the body rather than the humours (although these far from disappeared). The 'fibres', or 'solids', as they were also known, entered into the structure of the body from birth to death. The body, as a whole, could now be imagined as materially continuous from the beginning to the end of life. In biology, the

[273] Nehemia Grew, *The Anatomy of Plants: With an Idea of a Philosophical History of Plants and Several Other Lectures Read Before the Royal Society* (London, 1682); James Keill, *The Anatomy of the Humane Body Abridged; or, A Short and Full View of All the Parts of the Body* (London, 1698); Hisao Ishizuka, 'Enlightening the Fibre-Woven Body: William Blake and Eighteenth-Century Fibre Medicine', *Literature and Medicine,* Vol. 25.1 (2006), p. 74.

[274] Ishizuka, 'Enlightening the Fibre-Woven Body', p. 72.

fibres were deemed to be the most appropriate model to explain animal growth within the preformationist framework, a dominant paradigm in Enlightenment embryology.[275]

The fibres were interpreted as dynamic entities, 'elastic', 'flexible', and 'sensible'.[276] Robert James wrote of the fibres in terms of their 'laxity', their 'weakness' and their 'too great rigidity'.[277] The terminology used by James, amongst others, also marked the changing nature of the body's constituent fibres as it aged. Examples of this way of thinking were many, especially amongst the leading physicians of the Enlightenment. According to William Cullen, one of the leading physicians of the Scottish Enlightenment, the fibres 'through the whole course of life' change 'gradually from lax to rigid, as age increases'.[278] George Cheyne, another leading figure in eighteenth-century medicine, imagined this process as a physical unfolding where the solids were small and delicate in

[275] Ishizuka, '"Fibre Body"', pp. 563, 569; Preformation theory, as Eve Keller suggests, was given a good deal of credence by the work of Jan Swammerdam during the last decades of the seventeenth century. In 1670, the *Transactions* reported that Swammerdam had been able 'to shew all the parts of the Butterfly in a Caterpillar' and therefore to demonstrate that 'the caterpillar is the butterfly itself, only covered with the mantle'. His conclusion marks the beginnings of a thoroughly new understanding of the generative process: 'there is no Generation in Nature', he argued, 'but only a production of growing parts'. Eve Keller, 'Embryonic Individuals: The Rhetoric of Seventeenth-Century Embryology and the Construction of Early-Modern Identity', *Eighteenth-Century Studies,* Vol. 33.3 (2000), p. 338; *Philosophical Transactions of the Royal Society,* Vol. 5.64 (London, 1670), pp. 2079-2080; A. Schierbeck, *Jan Swammerdam, 1637-1680: His Life and Works* (Amsterdam, 1967), p. 115.

[276] John Quincy, *Lexicon Physic-Medicum; or, A New Medicinal Dictionary*; *Explaining the Difficult Terms Used in the Several Branches of the Profession* (London, 1726), p. 162.

[277] Robert James, *A Medicinal Dictionary; Including Physic, Surgery, Anatomy, Chymistry, and Botany, in All their Branches Relative to Medicine*, Vol. 2 (London, 1743-45), 'FIB', 'FIBRA'.

[278] William Cullen, *Lectures on the Materia Medica, As Delivered by William Cullen, M.D. Professor of Medicine in the University of Edinburgh* (London, 1773), p. 10.

the beginning of life, but as they unfolded, became harder in an 'insensible', 'slow', 'diverging infinite series'.[279] Herman Boerhaave, perhaps the most famous physician of his age, explained how the more life advanced the more the smallest fibres of the body become rigid and immovable. Vessels, he further argued, 'grow together in smallest fibres ... while at the same time the larger vessels become hardened, contracted smaller, and all parts shrink together, become more compact, grow to each other, and thereby occasion the dryness and wasting'. The physical and visible characteristics of old age were firmly wedded to the increased rigidity of the nerves. During old age, as Boerhaave explained, 'the skin becomes wrinkled and contracted over the fleshy parts, their bodies fall away, and they become thin and slender'. The stooping elderly frame was explained in terms of the reduction in space between the vertebrae's of the spine, from a shrinking of the cartilages. The vertebrae grew together and the spine was defined by a pronounced curvature.[280] Hardening of the fibres also characterised Descartes' conceptualisation of the body's life-span:

> As we get older, the little fibres that make up the solid parts of the body contract and stick together more and more, and in the end they attain such a degree of hardness that the body stops growing entirely, and even loses the ability to be nourished. This leads to such

[279] Cheyne, *The Natural Method*, pp. 3-4.

[280] Herman Boerhaave, *Boerhaave's Academical Lectures on the Theory of Physic,* Vol. 6 (London, 1742-46), pp. 260-261.

a disproportion between the solid parts and fluid parts

that life is extinguished by old age alone.[281]

Despite the obviously teleological nature of human life, implied by the changing nature of the fibres from birth to old age, the how and why of these alterations were far from clear. In a way, this led to a continued reliance on seventeenth-century explanations of aging. The eighteenth century also witnessed the continuation of time-honoured ideas of neurophysiology – animal spirits moving in hollow nerve conduits to and from the ventricles of the brain. Indeed, despite anatomical evidence to the contrary, the old framework of ideas lived on, precisely because it was difficult to see until the end of the eighteenth century with what they could be replaced. Ideas of innate nerve impulses or 'irritability' of the nerves, the significance of 'sensibility' – the nerves as a conduit for feeling – and theories which saw electricity as prime mover in nervous alteration and what became known as the 'electrical craze' in England and France, all featured in theories of the nervous body.[282] The fibres could link mind and body or solely the body in a purely mechanical schema, which was again popular, but the ultimate determination or primacy of one over the other in matters relating to pathological conditions, including aging, varied considerably. This depended on how far the individual was interpreted as a

[281] Carvallo, 'Ageing', p. 273; Réne Descartes, *Oeuvres de Descartes*, eds., Charles Adam and Paul Tannery (London, 1964-1974), p. 250; Réne Descartes, *The Philosophical Writings of Descartes,* trans. John Cottingham, Robert Stoothoff, and Dugald Murdoch, Vol. 1 (Cambridge, 1984), p. 321.

[282] Whitaker, Smith and Finger, 'Introduction', pp. 16, 20-21; A review of these developments can also be found in Patricia Smith-Churchland, *Neurophilosophy: Toward a Unified Science of the Mind Brain* (Cambridge MA, 1989), pp. 13-27.

machine, subject to unalterable rules and regulations, or was embodied, where 'feeling' and 'sensibility' were privileged.[283]

During the eighteenth century, sensibility also became a paradigm denoting a particular kind of consciousness that determined an individual's response to stimulus from the external environment and from inside the body. Sensitivity related to the body, but it was also invested with spiritual and moral values. The word was also synonymous with feeling.[284] The fibre was regarded by eighteenth-century anatomists as the critical mediator between mind and body and explained mental and sensory phenomena.[285] Mechanistic theories, revolving around the discoveries made by Isaac Newton, also had a profound influence upon clinical medicine as it was practiced. 'Iatromechanical theories', with the emphasis on spirits travelling through a network of tubes, with problems being caused by 'blockages', appealed to college-educated physicians. Even if such spirits and blockages could not be verified, they seemed to provide an adequate explanation for a whole range of mental and physical phenomena. Yet many saw this idea as having greater purchase and explanatory power through a melding of old ideas with new. Thus, eighteenth century mechanist ideas of the body were allied with older notions of the humours.[286]

---

[283] George Rousseau, 'Temperament and the Long Shadow of Nerves in the Eighteenth Century', in Whitaker et al., eds., *Brain, Mind and Medicine*, pp. 364-365.

[284] G.J. Barker-Benfield, *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago and London, 1992), p. xvii.

[285] Ishizuka, 'Enlightening the Fibre-Woven Body', p. 80.

[286] Whitaker, Smith and Finger, 'Section E: Introduction: Medical Theories and Applications', in Whitaker et al., eds., *Brain, Mind and Medicine*, p. 211.

Instead of a complete break with seventeenth-century medicine, therefore, the eighteenth century witnessed the integration of older theories of the humours with newer discoveries of circulation by William Harvey and neurology by Thomas Willis. Both men reshaped understandings of the human body in significant ways. Harvey's discovery of the circulation of the blood in 1627, ensured a shift in thinking which culminated in the privileging of the solids above the fluids, yet the humours continued to be a feature of eighteenth-century thought, despite the potential of Harvey's doctrine to unseat Galenic physiology. Thus, instead of the humours having an independent existence, as they did during the seventeenth century, the solids were now considered the repositories of the humours.[287] Much like the seventeenth century, with its emphasis upon complexions and temperaments and their particular physical and mental characteristics, the fibres as they were interpreted in eighteenth-century medical discourse, had their own particular complexions and characteristics too.

Fibre-based Constitutions & The Non-naturals

The long enduring humoural theory (as noted earlier, humoural medicine survived until the nineteenth-century), on which the knowledge of physical and moral temperaments rested, was gradually superseded by a fibre-based understanding of the temperaments. Fibre-based constitutions were polarised: people had either very elastic or very weak fibres (although a variety of intermediate degrees were also admitted). People with very elastic or very weak fibres were generally lean and dry. They also had strong, hard muscles and clean, firm bodies. They were naturally impatient and prone to action. These

[287] George Rousseau, 'Temperament', p. 360; Roy Porter, *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London, 1997), p. 216; Barbara Orland, 'The Fluid Mechanics of Nutrition: Herman Boerhaave's synthesis of Seventeenth-Century Circulation Physiology', *Studies in History and Philosophy of Biological Sciences,* Vol. 43.2 (2012), p. 359.

descriptions usually characterised people with 'hot constitutions', since they had stronger fibres than others. People with lax, weak fibres on the other hand, had thin hair, were small of stature, with soft, loose muscles and fair skin. Their 'cold constitution' made them lazy, indolent and dull and they were also subject to chronic diseases.[288] The discursive framework of the nerves, which were dominated by discussions of hard and lax fibres, was superimposed on traditional dichotomies of the humoural body. Sometimes, traditional discourse on the polarity between robust people who lived in the country and luxurious and indolent men, were integrated into eighteenth-century ideas of fibre-base constitutions. According to this way of thinking, robust people who lived in the country tended to have strong fibres, while lazy, weak, city people had flabby fibres.[289]

The belief that the body could be altered by the non-naturals continued to assume some importance in the eighteenth century.[290] The non-naturals proved particularly receptive to the nervous body in this respect. Consumers of therapeutic texts were advised as to how they could keep their fibres in a situation where they were neither too lax nor too rigid. This was particularly important as both states encouraged disease and premature aging. Fibre-based therapeutics also continued to be practiced within the perspective of the six non-naturals – air, bodily motion, food and drink, excretion and retention,

[288] Ishizuka, '"Fibre Body"', pp. 581-582; George Cheyne, *An Essay of Health and Long Life* (London, 1724), pp. 82-84; Thomas Short, *A Discourse Concerning the Causes and Effects of Corpulency: Together with the Method for its Prevention and Cure* (London, 1727), pp. 55-56; James, *A Medicinal Dictionary,* 'FIBRA'.

[289] Ishizuka, '"Fibre Body"', p. 581; James, *A Medicinal Dictionary,* 'FIBRA'.

[290] Ishizuka, '"Fibre Body"', pp. 574-575.

passions, sleep and waking.[291] In terms of diet, a stimulating substance such as 'acrid' matter would increase the vibration of the fibres, and a mineral, 'Diuretick' water would regenerate weakened fibres through the water's acerbic quality.[292] As they weakened the fibres, caution was raised against the immoderate ingestion of 'modish dishes' with high salt and spices, which rendered the fibres dry, 'crispy' and tense.[293] Nutrition more generally preserved continuity in the body by replacing matter which had been lost through a process of abrasion in the vessels.[294] This 'nerve nutrition' was seen as determinate of the health and disease of both brain and mind.[295] Interest also continued to be focused on the qualities of air, as it was believed that the state of the atmosphere had a great influence on the fibres, since they constantly absorbed air through the pores of the body.[296] Thus, cold and dry air was thought to brace and stiffen the fibres by 'congealing the Moisture' that relaxes the fibres. Cold air produced strength and activity by giving 'great Energy to the Fibres', whilst moisture or moist air would render them more lax and flaccid, diminishing their elasticity and retarding circulation.[297] The idea

---

[291] John Arbuthnot, *An Essay Concerning the Nature of Ailments and the Choice of them, According to the Different Constitutions of Human Bodies* (London, 1733), pp. 135, 115; Ishizuka, '"Fibre Body"', p. 574.

[292] Sir Richard Blackmore, *A Treatise of the Spleen and Vapours: or, Hypochondriacal and Hysterical Affections* (London, 1725), p. 79.

[293] Browne Langrish, *A New Essay on Muscular Motion. Founded on Experiments, Observations, and the Newtonian Philosophy* (London, 1733), p. 30.

[294] Orland, 'The Fluid Mechanics of Nutrition', p. 362.

[295] Frank W. Stahnisch, 'The Emergence of *Nervennahrung*: Nerves, Mind and Metabolism in the Long Eighteenth Century', *Studies in History and Philosophy of Biological Sciences,* Vol. 43.2 (2012), p. 408.

[296] Langrish, *A New Essay,* pp. 3-5.

[297] Clifton Wintringham, *The Works of the late Clifton Wintringham, Physician of York, Now First Collected and Published Entire* (London, 1752), p. 29; Cheyne, *An Essay of Health*, pp. 215-16; Langrish, *A New Essay,* pp. 6-9, 11; Archibald Pitcairn, *The Works of Dr. Archibald Pitcairn; Wherein are Discovered the True Foundation and*

that cold air braced the fibres, exalting cold and dryness over heat and moisture, duly led the British to appreciate their northern climate for its bracing effects on too lax fibres.[298] Passions should also be given due attention, for if excessive, the fibres would tighten and contract.[299] The restorative powers of shaking the fibrous body were also emphasised. Being shaken, the ligaments and the muscles were cleared of their 'excrements'. Superfluous particles were also 'dislodged and shook off' by exercise.[300] For this reason, horse riding was regarded as effective in promoting health, especially when an 'easy pace' was favoured.[301] It was crucial for therapy to support and improve the continuous vibrating motions of the solids, expressed as 'tone', 'tension' or 'elasticity'. The living body must 'move' in a particular way to maintain health, as life depended upon the circulation of the blood which in turn relied on the tonic motion of the solid-fibres.[302] Hence moderate exercise strengthened the solids, but excessive exercise would dry up the fibres and render them rigid.[303]

Principles of the Art of Physic (London, 1715), p. 117; John Arbuthnot, *An Essay Concerning the Effects of Air on Human Bodies* (London, 1733), p. 56; Arbuthnot, *An Essay,* pp. 61-62; James, *A Medicinal Dictionary,* 'FIBRA'; Short, *A Discourse,* pp. 10-2; Wintringham, *The Works,* pp. 22-25.

[298] Cheyne, *An Essay of Health,* p. 31; John Tennent, *Physical Enquiries: Discovering the Mode of Translation in the Constitutions of Northern Inhabitants* (London, 1749), pp. 1-2.

[299] Cheyne, *An Essay of Health,* p. 158; Thomas Morgan, *Philosophical Principle of Medicine, in Three Parts. Containing, I. A Demonstration of the General Laws of Gravity, with their Effects upon Animal Bodys* (London, 1735), p. 374; Short, *A Discourse,* pp. 25, 46-47.

[300] John Quincy, *Medico-Physical Essays. I. Of Agues ... VII. Of Venereal Diseases* (London, 1720), p. 43.

[301] John Fothergill, *Rules for the Preservation of Health: Containing all that is Recommended by the Most Eminent Physicians* (London, 1762), p. 56.

[302] Ishizuka, '"Fibre Body"', p. 575.

[303] Ishizuka, '"Fibre Body"', p. 573; James, *A Medicinal Dictionary,* 'FIBRA'.

Discourses of sensibility, where subjectivity and feeling were considered of primary importance, determined a different approach to the non-naturals. The idea that the individual was in a better position than anyone to decide which life-style was appropriate for them and consequently to determine what they should eat, how much they should exercise, and so on and so forth, was very much a product of Enlightenment thought. Enlightenment selves, according to George Rousseau, were thought of as more 'anatomically self-aware' than they had previously been. This relationship was an amalgam of 'physiology' and 'life experiences' shaped by free-will apart from cultural, political and socioeconomic conditions.[304] Michael Shoenfeldt has discussed precisely this in his theory of 'inwardness'. 'Inwardness' refers to the ability of an individual to 'manipulate' his anatomical-physiological blend and 'demands that one must pay careful attention to the self, in order to know its whims, its desires, and its weaknesses'. Though this idea was explored within the context of a particularly Galenic body, Schoenfeldt's point regarding the importance of 'radical introspection', as a leading factor which influenced one's relationship to the environment, is equally applicable to fibre-based constitutions in the eighteenth century. [305]

A more subjective approach to the non-naturals was particularly prominent (although there were others relating to 'feelings' when approaching exercise and work which will be explored in the next chapter) in contemporary discussions concerned with diet and appetite. 'Appetite' and the 'appetitive' have a long history in Western science. Aristotle and Galen, in particular, identified the appetite as a sense which encourages human

[304] Rousseau, 'Temperament', p. 366.

[305] Schoenfeldt, *Bodies and Selves,* pp. 20-22. See also: Gail Kern Paster, 'Nervous Tension', in David Hilman and Carlo Mazzio eds., *The Body in Parts: Fantasies of Corporeality in Early Modern Europe* (London, 1997), pp. 107-109.

beings to pursue actions required for sustaining life. Thus, feeling the desire for food, looking for food, moving to locate and grasp food and ingesting food, were motivating factors in this respect. As we have seen, what to eat was a central question of hygienic literature devoted to the 'prolongation of life'. Concerning this, eighteenth-century thinking was split into two camps. The first believed that food choices should not be left to the individual's taste, instead, it must conform to general standards of healthy eating. A healthy diet consisted of what was appropriate to the individual based on his or her age, constitution and temperament. Writers in this camp believed that food choices were not a matter of individual desires or tastes. The second view, mediated by ideas of sensibility and the idea that appetite was primarily a mental phenomenon, held that to be healthy individuals must consume what their appetite urged them to eat. From this perspective, what brought the appetite pleasure was inseparable from good digestion and overall health. Conversely, hunger was termed a 'sense of pain', an 'acute', 'intolerable' sensation, created by the 'grating' of irritating nerves and tissues one against another.[306] These two views existed in tension throughout the eighteenth century and often led to conflicting advice of no small importance to the subject of aging.

The Fibres: Gender & Class

Fibre-based constitutions were to some degree sexed. Female nerves were thought to be more delicate and more sensitive than men's.[307] They were taken to be highly 'sensible'

[306] Elizabeth A. Williams, 'Sciences of Appetite in the Enlightenment, 1750-1800', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 43.2 (2012), pp. 392-404.

[307] Such thinking would constitute an unwritten paradigm that would last until the nineteenth-century. This idea was popularised in particular by Sigmund Freud: Rousseau, *Nervous Acts,* p. 264; Dr. Dover, *A Treatise on Hypochondriacal and Hysterical Diseases* (London, 1732); Cheyne, *The English Malady*; James Mattrick

(i.e. sensible or even sensitised) like children, and more passionate than men.[308] Women's muscular weaknesses and inherent disgust of strenuous exercise drew them towards sedentary occupations that continued to reinforce their delicacy. As the century wore on, however, discourses of nervous sensibility would considerably swell the numbers of those who were considered as having weak and delicate nerves. Both doctors and writers shared in the view that only fascinating and captivating people were 'suffering nerves' because they were well bred and refined. The flourishing cults of sensibility, as G.S. Rousseau argues, served to separate the social classes at a time 'where aristocratic title was deemed insufficient'. There was also a feeling that the geographical mobility of the eighteenth century obscured worth and status.[309] Degrees of sensibility thus reflected both social and moral status.[310]

Paradoxically, an innate refinement of the nerves was also identifiable with greater suffering, with weakness and a susceptibility to disorder. Enlightenment physicians, like George Cheyne, explained that only people with 'weakness or slenderness' in the nervous fibres were 'violently affected' by external influences on their bodies. They felt 'too much Pain and Uneasiness from cold or frosty Weather' and 'too great a Degree of Sensibility or Easiness of being acted upon by external Objects'. Thanks to the rise in luxurious living, a theme which was prominent in seventeenth- century, as well as eighteenth-century discourse, Cheyne thought that this type of disorder proliferated because of Britain's economic success. He argued that 'When Mankind was simple, plain, honest, and frugal;

Adair, *Essays on Fashionable Diseases. The Dangerous Effects of Hot and Crouded [sic] Rooms* (London, 1790); Boerhaave, *Academical Lectures ...* Vol. 5; Stahnisch, 'The Emergence of *Nervennahrung,* p. 408.

[308] Jordanova, *Sexual Visions,* p. 28.

[309] Rousseau, *Nervous Acts,* pp. 253-255.

[310] Barker-Benfield, *The Culture of Sensibility,* p. 8.

there were few or no Diseases. Temperance, Exercise, Hunting and Labour, and Industry kept the Juices sweet and the Solids brac'd'. He also suggested that 'the middling sort' remained closest to 'the Simplicity of Nature'. Cheyne proposed that as long as the middle classes stayed simple they would stay healthy, 'not yet [having] grown luxurious rich and wanton'.[311]

The expansion of the nerves into the area of class also had significant implications for gender too. Upper-class males were represented as 'nervous', 'sensitive', 'sympathetic' and 'empathic'.[312] Bernard Mandeville, a social commentator as well as a popular medical practitioner, made much of the life-style pressures that predisposed women to hysteria and their husbands to hypochondriasis. Symptoms for both included languor, mood swings, depression and anxiety.[313] In this sense at least, sensibility was polarised in terms of class *and* gender.[314] Women's naturally more delicate nervous system, her 'Hysterical Paraoxysms' and 'Hysterical Fits and Cholicks', was comparable with 'Hypochondriasis'. 'Hypochondriasis', Mandeville termed, 'the Disease of the Learned', because such men 'continually fatigue their Heads with intense Thought and Study, whilst they neglect to give the other parts of their Bodies the Exercise they require'.[315] Whilst these men were often ridiculed by their contemporaries, they suffered, in fact, because of their exquisite nerves and their elevated status. Nervous disease preyed on 'those of the liveliest and

---

[311] Cheyne, *The English Malady,* pp. 71, 108-109.

[312] Rousseau, *Nervous Acts,* p. 213.

[313] Bernard Mandeville, *A Treatise of the Hypochondriack and Hysterick Passions, Vulgarly Call'd the Hypo in Men and Vapours in Women* (London, 1711).

[314] Rousseau, *Nervous Acts,* p. 232.

[315] Barker-Benfield, *The Culture of Sensibility,* p. 25; Cheyne, *The English Malady,* pp. 3, 116; Mandeville, *A Treatise,* p. 95

quickest natural Parts, whose Faculties are the brightest and most Spiritual, and whose Genius is keen and penetrating'.[316] Cheyne viewed gender in this way because he thought that when it came to the body, the male provided the solids and the female the fluids. Male 'weakness', therefore, represented the encroachment of the female side.[317] Those 'born with weak nerves' could never 'expect strong Fibres or a robust Constitution'.[318] Nonetheless, medical experts thought that women suffered from nervous disorders in greater numbers than men because they were both born deficient, and thereafter, prone to a more debilitating reproductive history. In Mandeville's view, women's nerves were thinner, more delicate and softer. The effects permeated women's constitutions: women's 'delicacy' reflected the weakness of their nervous systems. This also made them unfit for 'abstruse and elaborate thought'. The susceptibility of anyone to an exquisite delicacy of the nerves, however, was universally increased by the non-naturals: bad diet, idleness and a lack of exercise, was increased by prosperity.[319]

Conclusion

Ideas of age and aging were conceptualised within a number of different models during the seventeenth and eighteenth centuries. These included the popular ages of man paradigms, the temperaments, the non-naturals and the lamp metaphor during the seventeenth century, and ideas of the nervous body and nervous sensibility during the eighteenth. In the seventeenth century, it is clear that many of the ideas that conceptualised aging conflicted. On the one hand, age and aging was structured and

[316] Cheyne, *The English Malady,* pp. 179-180.

[317] Barker-Benfield, *The Culture of Sensibility,* p. 24.

[318] Cheyne, *The English Malady,* pp. 66, 67, 14.

[319] Barker-Benfield, *The Culture of Sensibility,* p. 26; Mandeville, *A Treatise,* pp. 246-247.

teleological – like the ages of man and the temperaments. On the other hand, contemporaries emphasised how an orderly progress through life was contingent on the conformance to some behaviours and the avoidance of others. Hence the importance of the non-naturals and prescriptions to only engage with these in moderation. Cutting across many of these ideas were prominent ideas, or even ideals of gender. Whilst this will be expanded upon considerably during Chapter 3, in this chapter we can reach a number of conclusions about the relationship between age, aging and gender. I have demonstrated thus far that whilst contemporaries emphasised a sexed path to aging in abstract renderings of the four temperaments, this opposition was disrupted in a number of ways. Firstly, contemporaries noted that some men shared in the same cold-moist temperament that was traditionally associated with women. Conversely, not all men shared in the advantages conferred in the aging process by the perfectly temperate sanguine complexion. Secondly, contemporaries emphasised that the relationship between the elements of heat and moisture, otherwise known as the lamp metaphor, were complex and open to different interpretations. Consequently, in some understandings of the metaphor, men were deemed as having an advantage in the process over women. In other interpretations, where the destructive qualities of the elements of heat and moisture were emphasised, women with their phlegmatic temperament were far removed from the accelerated path to old age that characterised their complexion in theory.

These ideas overlapped with concepts of age and aging during the eighteenth century. The non-naturals were still considered of great importance in regulating age. Unlike during the seventeenth century, where the non-naturals acted in concert with the humoural body, during the eighteenth century, these were transposed onto the workings of the nerves. Recommended engagements with the non-naturals were of two types: the

first according to traditional prescriptions of moderation, and the second, along the more subjective lines of Enlightenment thought with its emphasis on feeling. The irrevocably opposed ideas that contemporaries should adhere to objective rules and regulations of healthy living and indulge their desires no matter how harmful to their future prognostics of aging, existed in tension as the century wore on. Ideas of fibre-based constitutions, which the non-naturals acted upon in different ways, were also, to a certain degree, sexed. Women were associated with lax fibres whilst men were associated with more firm and rigid fibre-based constitutions. As concepts of the nervous body began to embrace theories of sensibility, however, the opposition that was firmly drawn along lines of gender shifted to include both men and women of the upper classes. Consequently, eighteenth-century ideas about aging were related to the relative rigidity or laxity of the nerves, themselves influenced by discourses of class *and* gender. The dynamic nature of the relationship between the fibre-based body and gender assumed considerable importance during the century. These relationships would influence contemporary opinions about the many and varied paths to old age, which is the subject of Chapter 3.

CHAPTER 3: AGING IN THEORY AND PRACTICE

In Chapter 2, theories of aging were explored in the context of general and established rules and regimes which were thought to affect everyone. Within the humoural body, the four temperaments, when set apart from life-style and the manipulable forces of the non-naturals, generally favoured men over women in the aging process. According to the idea of sexed temperaments, because of their colder nature, women both matured earlier and aged sooner than men. This proposition is the focus of Chapter 3. This idea, it will be argued, depended on a dichotomy of gender which was oppositional, and, in the context of the temperaments, rarely existed beyond representations of ideal relations between the sexes. Contemporary medical theory taught that gender affected the temperaments, but only in a general way. Casebooks from the seventeenth century reveal that physicians thought it was quite possible for individual men and women to have temperaments that ran counter to the assumptions of sexed temperaments. Although some women had temperaments that were cold, wet, or both, others had temperaments that were hot and dry.[320] In practice, both men and women were depicted across the spectrum of all four temperaments. A man or woman's relationship with a particular a temperament, moreover, could also be altered, for better or worse, by the non-naturals. Taken together, the overlapping nature of the temperaments combined with the transformative powers of the non-naturals, fundamentally disturbed the notion that there was an irreconcilably sexed path to old age. These ideas will be considered through an analysis of three of the four temperaments: firstly, the 'superior' sanguine and choleric temperaments and secondly, the 'inferior' phlegmatic one. In this context, I do

[320] Brian K. Nance, 'Determining the Patient's Temperament: An Excursion into Seventeenth-Century Medical Semeiology', *Bulletin of the History of Medicine,* Vol. 67.3 (1993), p. 434.

not discuss the melancholic temperament, which was an acquired temperament already influenced by life-style. I shall demonstrate that 'superior' hotter 'male' temperaments and 'inferior' colder 'female' temperaments were both alterable and subject to manipulation.

The relationship between the temperaments, as it will be illustrated, was not one of simple dominance or subordination as it was applied to early modern men and women.[321] Actions, habits and the course of life which altered a person's temperament for better or worse, created reversals and inversions in the hierarchical ordering of the temperaments. This affects not only how we view gender as a series of opposites involved in a struggle for dominance and subordination, but also how this perpetually evolving and often complex relationship was inseparable from seventeenth-century ideas of aging. The advantages conferred in the aging process through notions of sexed, hierarchical temperaments, were deeply unstable.[322] 'None of the foure complexions' as one contemporary put it, 'haue sooly suche dominion in one man or womans body'.[323] 'Superior' and 'inferior' temperaments also had a tendency to be reversed when analysed through the lens of the lamp metaphor. As we saw in Chapter 2, dominant

[321] Elizabeth A. Foyster, *Manhood in Early Modern England: Honour, Sex and Marriage* (Harlow, 1999), p. 1.

[322] Nance, 'Determining the Patient's Temperament', pp. 417-438.

[323] Sir Thomas Elyot, *The Castel of Helth Gathered and Made by Syr Thomas Elyot Knyghte, Out of the Chiefe Authors of Physyke* (London, 1539), p. 70. Also: Pierre de La Primaudaye, *The French Academie Fully Discoursed and Finished in Foure Bookes* (London, 1618), p. 457; Everard Maynwaringe, *The Method and Means of Enjoying Health, Vigour, and Long Life. Adapting Peculiar Courses, for Different Constitutions* (London, 1683), p. 156; Nicholas Culpeper, *Galen's Art of Physick: Wherein is Laid Down, 1. A Description of Bodies, Healthful, Unhealthful, and Neutral* (London, 1652), pp. 58-67; Daniel Sennert, *Nine Books of Physick and Chirurgery Written by that Great and Learned Physitian, Dr Sennertus* (London, 1658), p. 7.

interpretations of the metaphor, which were solely concerned with the relationship between heat and moisture, tended to emphasis the benefits of colder temperaments whilst playing up the negative connotations of hotter ones. Whilst this discussion naturally impacts upon the one-sex/two-sex debate in early modern historiography, the changing nature of the temperaments had little to do with one of the key aspects of the theory: the interchangeable nature of the male and female genitalia.[324] Nevertheless, contemporary interpretations of the temperaments failed to achieve any sort of hegemony in the establishment of hardened gender polarities and as a consequence, a

[324] Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to the Freud* (Cambridge MA, 1990), pp. 4-5, 25-9, 34-5, 60-2, 149-51, 155, 157; Thomas Laqueur, 'Orgasm, Generation, and the Politics of Reproductive Biology', in Christine Gallagher and Thomas Laqueur eds., *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century* (Berkeley, 1987), pp. 1-41; Ian Maclean, *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life* (Cambridge and New York, 1980), pp. 30-31; Wendy D. Churchill, 'The Medical Practice of the Sexed Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 18.1 (2005), pp. 3-22; Londa Schiebinger, 'Skeletons in the Closet: The First Illustrations of the Female Skeleton in Eighteenth-Century Anatomy', in Gallagher and Laqueur eds., *The Making of the Modern Body,* pp. 42-82; Londa Schiebinger, *The Mind has No Sex?*: *Women in the Origins of Modern Science* (Cambridge and London, 1989); Roy Porter, 'History of the Body', in Peter Burke ed., *New Perspectives on Historical Writing* (University Park, Pennsylvania, 2001), pp. 233-260; Anthony Fletcher, *Gender, Sex and Subordination in England 1500-1800* (New Haven, 1995). Those who have questioned the linear progression of Laqueur's model from one-sex to two-sex and/or the chronology of his thesis include: Jonathan Sawday, *The Body Emblazoned: Dissection and the Human Body in Renaissance Culture* (London and New York, 1995); Karen Harvey, 'The Substance of Sexual Difference: Change and Persistence in Representations of the Body in Eighteenth-Century England', *Gender and History,* Vol. 14 (2002), pp. 202-223; Michael Stolberg, 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries', *Isis,* Vol. 94.2 (2003), pp. 274-299; Janet Adelman, 'Making Defect Perfection: Shakespeare and the One-Sex Model', in Viviana Comensoli and Anne Russell eds., *Enacting Gender on the English Renaissance Stage* (Urbana, 1999), pp. 23-52.

uniquely gendered path to old age. Superior and inferior temperaments, in their maintenance, relied on a man and woman's conformance to certain behaviours and the avoidance of others. Both related to contemporary ideas of masculinity and femininity whilst exposing dislocations and ambiguities in these ideals. Due in large part to the competing models deployed, there was no 'single idea of man or woman' advanced in contemporary discourses of the temperaments.[325] One of the factors that complicated simple dichotomies of gendered temperaments was the concept of aging. It is to this that we will now turn.

The Humoural Body: Superior Temperaments?

Men, as we saw in Chapter 2, had an established stake in all four temperaments: the sanguine, choleric, phlegmatic and the melancholic. These temperaments, in the aforementioned order, reflected the slowest to the quickest path to old age. Temperaments were, as we also saw from the last chapter, vulnerable to alterations for better or worse.[326] In the case of a change for the worse, no time of life was considered safe from falling, suddenly, either through life-style or illness, into the cold-dry temperament of old age.[327] Whilst the temperaments as an ordered hierarchy,

[325] Michael C. Schoenfeldt, *Bodies and Selves in Early Modern England* (Cambridge, 1999), p. 18

[326] See also, Wolter Seuntjens, 'Vapours and Fumes, Damps and Qualms: Wind Passions in the Early-Modern Age', *English Studies,* Vol. 87.1 (2006), p. 37.

[327] Thomas Tryon, *A Way to Health Long Life and Happiness, or, A Discourse of Temperance, and the Particular Nature of all Things Requisite for the Life of Man* (London, 1621), p. 14; Ambrose Paré, *The Workes of that Famous Chirurgion Ambrose Parey Translated out of Latin and Compared with the French by Thomas Johnson* (London, 1634), p. 28; Levinus Lemnius, *The Touchstone of Complexions Generallye Applicable, Expedient and Profitable for all Such, as be Desirous and Carefull of their Bodyle Health* (London, 1576), p. 27.

encompassing the elements of heat and cold, implied differential trajectories for development and decline, it was a hierarchy that was 'constantly under threat from external influences'.[328] Even a 'good Temperament lasts not a moment without Change and Alteration'.[329] This was certainly true of the sanguine temperament.

The Sanguine Temperament

Although the sanguine temperament was considered the most robust of the four temperaments in terms of repelling external threats to a man's body, the preservation of a superior constitution depended upon the adherence to certain rules and regimes. Without careful attention to the non-naturals, it was considered unlikely an individual would live to see old age.[330] Deviations from prescribed regimes, which centred on the non-naturals, would 'alter and change the best tempered body', leading to 'degeneration and intemperate declensions'.[331] Seventeenth-century beliefs in the inter-penetrability of body, mind and environment, also imputed a vulnerability to the temperaments which did not exist in abstract renderings of the hierarchically ordered four-fold scheme. The departure of the internal humoural mixture from its 'proper blend', as a result of

---

[328] Alexandra Shepard, *Meanings of Manhood in Early Modern England* (Oxford and New York, 2003), p. 64; Sennert, *Nine Books*, p. 7.

[329] Juan Huarte, *Examen de Ingenios, or, The Tryal of Wits. Discovering the Great Difference of Wits Among Men, and What Sort of Learning Suits Best with Each Genius. Published Originally in Spanish by Doctor Juan Huartes. And Made English from the Most Correct Edition by Mr. Bellamy* (London, 1698), p. 14.

[330] Eleazar Duncon, *The Copy of a Letter Written by E.D. Doctour of Physicke to a Gentleman, by Whom it was Published* (London, 1606), p. 2; Louise Hill Curth, 'Lessons from the Past: Preventative Medicine in Early Modern England', *Journal of Medical Ethics: Medical Humanities,* Vol. 29.1 (2003), pp. 16-21.

[331] Everard Maynwaringe, *Tutela Sanitatis Sive Vita Protracta. The Protection of Long life, and Detection of its Brevity, from Diaetic Causes and Common Customs* (London, 1664), p. 40.

excessive environmental or psychological influences, contributed significantly to the idea that the temperaments were fundamentally unstable and liable to significant alterations.[332]

The integrity of the sanguine temperament could be undermined from within, by salient personality traits, or from without, by the non-naturals. Regardless of what some authors perceived as a natural ability to repel the worst influences of the macrocosm, men with a sanguine temperament were not exempt from the general rules of moderation which applied to all four temperaments.[333] Departures from moderation in terms of engagements with the non-naturals were likely to be punished by alterations in the balance of humours.[334] This had consequences for aging. A certain diet over-heated the blood: drinking strong spirits and eating overly spiced foods could enflame the heat and diminish the all-important moisture, which sustained continuing life and regulated the pace at which individuals aged.[335] Gluttony and general excess also brought on the

[332] Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science between the Eighteenth and Twentieth Centuries* (Madison, 1989), pp. 22-30; Linda Deer Richardson, 'The Generation of Disease', in Andrew Wear, R.K. French and I.M. Lonie eds., *The Medical Renaissance of the Sixteenth Century* (Cambridge, 1985), pp. 175-194; Harold J. Cook, 'The New Philosophy and Medicine in Seventeenth-Century England', in D. Lindberg and R. Westman eds., *Reappraisals of the Scientific Revolution* (Cambridge, 1990), pp. 397-436; Schoenfeldt, *Bodies and Selves.*

[333] Everard Maynwaringe, *Vita Sana & Longa. The Preservation of Health and Prolongation of Life. Proposed and Proved* (London, 1669), p. 111; Maynwaringe, *The Method and Means*, pp. 162-165.

[334] Thomas Walkington, *The Optick Glasse of Humors. Or The Touchstone of a Golden Temperature* (London, 1607), p. 25. The choleric temperament was considered particularly vulnerable to the drying effects of labour or exercise: Maynwaringe, *Vita Sana & Longa,* p. 120.

[335] Tryon, *A Way to Health,* p. 21; Elyot, *The Castel of Helth,* p. 72. See also Chapter 2, section on the Lamp Metaphor.

physical symptoms of old age sooner, and reduced overall longevity.[336] The drying properties of hot air, physical labour, or a diet which raised the temperature of the body above what was proper to the sanguine constitution, brought about baldness, crookedness in stature, a feeble voice, a stumbling gait and a general wasting of the body.[337]

Men of a sanguine constitution were also reminded that if they instituted a daily regime characteristically associated with one of the three other temperaments, they would eventually acquire, in a very real and somatic sense, the temperament most associated with that particular way of life. If, for instance, a man with a sanguine temperament only engaged in the sedentary employments most associated with the phlegmatic temperament (which included both men and women), his complexion would alter and future prognostics for long life and late old age would reduce accordingly.[338] In some quarters, the sanguine temperament was thought to be even more vulnerable to somatic

---

[336] Pedro Mexía, *The Wonders of the World: or, Choice Observations and Passages, Concerning the Beginning, Continuation, and Endings, of Kingdomes and Commonwealths ... Written Originally in Spanish, Translated into French, and now made English, by that Pious and Learned gentleman Joshua Baildon. Imprimatur, John Downam* (London, 1665), p. 131.

[337] Lemnius, *The Touchstone of Complexions,* pp. 6, 69.

[338] Maynwaringe, *Vita Sana & Longa,* p. 105; Maynwaringe, *The Method and Means,* p. 157; Lemnius, *The Touchstone of Complexions,* pp. 62, 72; Jacques Bos, 'The Rise and Decline of Character: Humoral Psychology in Ancient and Early Modern Medical Theory', *History of the Human Sciences,* Vol. 22.3 (2009), p. 32; Bureau d'adresse et de rencontre, *Another Collection of Philosophical Conferences of the French Virtuosi, Upon Questions of all Sorts; For the Improving of Natural Knowledge. Made in the Assembly of the Beaux Esprits at Paris, by the most Ingenious Persons of that Nation. Render'd into English, by G. Havers Gent. And J. Davies of Kedwelly, Gent* (London, 1665), p. 435; Duncon, *The Copy of a Letter,* pp. 1-15.

alterations than either the phlegmatic, melancholic or choleric temperaments.[339] The lamp metaphor, with its sole focus on the elements of heat and moisture as the combined agents of death and physical destruction, awakened paradoxes which proved contrary to the idea of temperate male perfection. Because men with a sanguine complexion were already innately hot, they were perceived as being most at risk from excesses in diet: the inflaming and destructive properties of rich food and drinks like cider, wine and ale. This also provided an uncomfortable, yet perfectly appropriate parallel with heat, the primary bodily element which contributed to aging.[340]

Sanguine men would also face challenges in leading a life-style that was conducive to its preservation due to the effects on the body of the passions.[341] As Thomas Wright suggested in his 1604 treatise on the management of the passions, 'divers sorts of persons be subject to divers sorts of passions, and the same passion affecteth divers persons in divers manners'.[342] Even though temperamental traits did not completely determine behaviour, they went a long way to inclining men and women to a given course of

[339] Andrew Boorde, *A Compendyous Regyment or a Dyetary of Helth* (London, 1547), pp. 33-34.

[340] Thomas Tryon, *The Good House-Wife Made a Doctor, or, Health's Choice and Sure Friend Being a Plain Way of Nature's own Prescribing* (London, 1692), p. 206.

[341] Walkington, *The Optick Glasse of Humors,* pp. 58-59; Tryon, *A Way to Health,* p. 20; Gideon Harvey, *Archelogia Philosophica Nova, or, New Principles of Philosophy. Containing Philosophy in General. Metaphysicks, or Ontology. Dynamilogy, or a Discourse of Power* (London, 1663), p. 135; Caterina Albano, 'The Puzzle of Human Emotions: Some Historical Considerations from the 17th to the 19th Centuries', *Developmental Medicine & Child Neurology,* Vol. 50.7 (2008), p. 495.

[342] Thomas Wright, *The Passions of the Minde in Generall. Corrected, Enlarged, and with Sundry New Discourses Augmented* (London, 1604), p. 37.

action.[343] To borrow a phrase from modern day social psychology, temperamental traits made the minds of both men and women 'a tabula that is not quite a rasa'.[344] The passions, as another contemporary observed, 'overthroweth the naturall and perfect state of body'.[345] The sanguine complexion could be undermined by a man's proclivity to behaviours which were characteristic of his temperament. Although men of the sanguine temperament possessed the capacity for valiant action, they were also 'greatly given to lechery and whore-hunting, and thrall to other pleasures of the body'.[346]

Other writers emphasised different aspects of the sanguine personality, isolating the tendency to over-confidence in an unalterably superior complexion as a potential cause of destruction. Men with a sanguine temperament were therefore in a paradoxical situation: perfectly temperate, but vulnerable to negative change, because the terms on which their physical perfection was based also exposed them to certain destructive traits. This was based on the idea that the body and mind were inversely related. The stronger the body, therefore, the less will-power there was to avoid harmful influences.[347] According to some contemporary writers, men with a sanguine temperament were more predisposed to riot, drunkenness and a variety of conceited behaviours than any other:

---

[343] Jeremy Taylor, *Vnum Necessarium. or, The Doctrine and Practice of Repentance* (London, 1655), p. 13.

[344] Bos, 'The Rise and Decline of Character', p. 30; Robert R. McCrae and Paul T.Costa, Jr.; Fritz Ostendorf and Alois Angleitner; Martina Hřebʃcková; Maria D. Avia Jesús Sanz and Maria L. Sánchez-Nernardos; M. Ersin Kusdil, Ruth Woodfield, Peter R. Saunders and Peter B. Smith, 'Nature over Nurture: Temperament, Personality and Life Span Development', *Journal of Personality and Social Psychology,* Vol. 78.1 (2000), p. 174.

[345] Duncon, *The Copy of a Letter,* p. 13.

[346] Shepard, *Meanings of Manhood,* pp. 60-61; Levinus, *The Touchstone of Complexions,* pp. 130, 72.

[347] Bureau d'adresse, *Another Collection of Philosophical Conferences,* p. 437.

'so far from humble Thoughts of himself, that it was his ruine'.[348] Whilst the pure sanguine temperament represented perfect manhood, the narcissism and elevated sense of self-worth also predisposed men to destroy the physical basis from which such perfection arose, like 'spendalls, riotously wastying and consumying their patrimony'.[349] They were, in the words of another contemporary, 'addicted to Lust and Pleasure', which encouraged illness and disease.[350] 'Intemperance', as one writer asserted, 'will exhaust his spirits, weaken his parts, and drown his wisdom'.[351] These behaviours were also thought contrary to the provision of both a good and a late old age.[352] Consequently, the dialectical nature of the relationship between the non-naturals and personality traits could lead to such a swift about turn in circumstances that even the most temperate of complexions was vulnerable to extreme alterations in the very humoural balance which provided the basis for their superiority.

---

[348] Richard Baxter, *Reliquiæ Baxterianæ: or, Mr. Richard Baxter's Narrative of the Most Memorable Passages of his Life and Times* (London, 1696), p. 57.

[349] Lemnius, *The Touchstone of Complexions,* p. 101.

[350] Antoine Le Grand, *An Entire Body of Philosophy According to the Principles of the Famous Renate Des Cartes* (London, 1694), p. 282.

[351] Foyster, *Manhood,* pp. 1-40; Roy Porter, 'The Drinking Man's Disease: the "pre-history" of Alcoholism in Georgian Britain', *British Journal of Addiction,* Vol. 80.4 (1985), pp. 389-390; Francis Cheynell, *The Man of Honour Described in a Sermon, Preached before the Lords of Parliament, in the Abbey Church at Westminster, March 26. 1645* (London, 1645), p. 44.

[352] Maynwaringe, *The Method and Means,* pp. 162-165; Tryon, *A Way to Health Long*, p. 14; Paré, *The Workes of that Famous Chirurgion Ambrose Parey*, p. 28; Lemnius, *The Touchstone of Complexions,* p. 27.

The Choleric Temperament

The choleric temperament was interpreted in two ways: as second only to the sanguine temperament in terms of positive future prognostics for longevity and a late old age (but equally dependent on certain 'correct' relations with the non-naturals) and deficient, perhaps dangerously so, in terms of the lamp metaphor with its emphasis on a healthy balance between bodily heat and moisture. Contemporaries tended to accord with the second view, interpreting the choleric complexion as unable to sustain long life because the innate bodily moisture that was required to balance its stifling heat was largely absent.[353] Hence the choleric was predisposed to premature aging. Alluding to the potential for reduced longevity, the choleric, 'cannot long endure with the drought' and when 'heat surpasseth moisture, it consumes in a short time the whole body, as we may see in chollerick men'.[354] Through metaphors of fire and the rapid oxidation of the choleric's body when exposed to the influences of the non-naturals, contemporaries expressed the incongruity of this temperament with longevity and late old age. It was a tinder-box constitution 'overpoizd' by the predominant element of heat.[355] Men with a choleric complexion were thought to 'grow apace and quickly wax Old, because their radical Moisture was soon consumed by the intense heat'.[356]

---

[353] For example: Henry Cuff, *The Differences of the Ages of Mans Life: Together with the Originall Causes, Progresse, and End thereof* (London, 1607), p. 91; Huarte, *Examen de Ingenios,* p. 14; Walkington, *The Optick Glasse of Humors,* pp. 19-30; Mexía, *The Wonders of the World*; Samuel Haworth, *Anthropologia, or, A Philosophic Discourse Concerning Man. Being the Anatomy both of his Soul and Body* (London, 1680).

[354] Mexía, *The Wonders of the World*, pp. 128, 130.

[355] Walkington, *The Optick Glasse of Humors,* p. 19.

[356] Haworth, *Anthropologia,* p. 143.

The vulnerabilities of this constitution to premature drying was also intuitively known by the choleric who experienced dreams that were vividly enriched by images of fire, burning, war and slaughter. In waking moments, too, there was a consciousness of the susceptibility to the destruction of a body that was like 'straw' which 'presently takes fire'.[357] 'Drying', 'warming' physical activities or a 'drying', 'warming' diet, defined as being above the temperature of the body, further hastened the process of aging. The 'fire' generated in the course of eating certain foods or through strenuous exercise, diminished the small amount of moisture retained by this temperament and consequently, 'the natural life doth presently burn, and is in danger to be destroyed; for the heat of this Original Fire is like the heat of Charcoal, whose pleasant Water and Moderator is destroyed'.[358] Nicholas Culpeper, in his commentary on Galen's works, reminded his readers that raising the temperature of the choleric's body through means of an inappropriate diet or arduous physical activity, could 'bring a man to his Grave in the prime of his Age'.[359] Whilst temperance could preserve a good temperament, which was conducive to health and long life, the choleric's tendency to eat and drink to excess, defined as being above the capabilities of the digestive system, 'do too powerfully awaken the *Central Heat,* which ought not to be felt; but when it is stirred up, does sometimes cause either a *Suffocation* or *Evaporation* of the *vital Spirits,* which will make all the external parts of the Body to burn like Fire'.[360] As a consequence, this temperament was

[357] Levinus Lemnius, *The Secret Miracles of Nature in Four Books. Learnedly and Moderately Treating of Generation, and the Parts Thereof* (London, 1658), pp. 95, 60.

[358] Cuff, *The Differences of the Ages,* pp. 98-100; Maynwaringe, *Tutela Sanitatis,* pp. 45-47; Tryon, *A Way to Health,* p. 12; Elyot, *The Castel of Helth,* p. 18.

[359] Culpeper, *Galen's Art of Physick*, p. 54.

[360] Tryon, *A Way to Health,* pp. 11-12.

the most vulnerable to the effects of even moderate heat, which 'rather hastneth death'.[361]

The choleric's salient personality trait, his overriding anger, further threatened the integrity of what remained of the body's small stock of moisture, where life ended with a conflagration in a 'fire of thorns'.[362] Men with choleric constitutions were urged to 'Banish *anger,* immoderate *care, peevishness* and *fretting;* which discompose the spirits, heat and waste them; augment *Choler,* dry the body, and hasten old Age'.[363] Because men with choleric temperaments were continually altering in this sense, they were fit for little more than 'to fill up a church yard in a short space of time'. Gideon Harvey believed that choleric men experienced the passions, such as fear, love, anger and rashness of opinion in a similar way to women – which is to say deeply.[364] In getting carried away by their passions, choleric men entered the realm of the feminine or to quote one contemporary, the 'Sisterhood, which makes us render Our noble selves in a less noble gender'.[365]

---

[361] Cuff, *The Differences of Ages of Mans Life,* p. 91.

[362] La Primaudaye, *The French Academie*, p. 545; Le Grand, *An Entire Body of Philosophy*, p. 282; Bureau d'adresse, *Another Collection of Philosophical Conferences,* p. 411; Robert Burton, *The Anatomy of Melancholy, What It Is. With all the Kindes, Causes, Symptomes, Prognostickes, and Seuerall Cures of It* (London, 1621), p. 142; John Davies, *Microcosmos. The Discovery of the Little World, with the Government thereof* (London, 1603), p. 64.

[363] Maynwaringe, *The Method and Means,* p. 172; John Archer, *Every Man His Own Doctor. In Two Parts. Shewing I. How Every One may know His Own Constitution and Complection* (London, 1671), pp. 10-11; Walkington, *The Optick Glasse of Humors*, pp. 52-69.

[364] Harvey, *Archelogia Philosophica,* p. 135.

[365] Anne Bradstreet, *Several Poems Compiled with Great Variety of Wit and Learning, Full of Delight Wherein Especially is Contained a Compleat Discourse* (London, 1678), p. 23.

Female cholerics, though rarely represented in contemporary literature, were predisposed to premature aging because of a tendency to worry and stress. Stress and worry initiated the dissipation of the limited stock of moisture, which in balance with the innate heat supported continuing life.[366] Females with this temperament, which was usually acquired through a heating/drying life-style, were known for their sexually voracious appetite and their inability to conceive children.[367] A choleric constitution became especially pronounced when a woman ate too much fatty foods and drank strong liquor. Both were thought to dry up the superfluous moisture which characterised the functions of the female body through lactation and menstruation.[368]

The lack of moisture, which in the best temperaments balanced the innate heat, meant that prescriptions outlining carefully stipulated engagements with the non-naturals were regarded as particularly important. Regardless of whether their temperaments were deemed 'superior' or 'inferior' in relation to future prospects for long life and aging, no individual, as we have already seen, was fated to follow the assumed course of their temperament. Learned medicine was not totally conservative in the sense that unbalanced humours could not be re-balanced. Practitioners were willing to go beyond Galen and put forward ideas about disease causation and the powers of remedies if the inner temperament became unbalanced. An unbalanced temperament could be rectified by using a remedy with an opposing quality (too hot a temperament in this instance,

[366] Robert Basset, *Curiosities: or The Cabinet of Nature Containing Phylosophical, Naturall, and Morall Questions Fully Answered and Resolved* (London, 1637), p. 38; Joseph Blagrave, *Blagraves Astrological Practice of Physick. Discovering the True Way to Cure all Kinds of Diseases and Infirmities* (London, 1671), p. 11.

[367] Jane Sharp, *The Midwives Book, or, The Whole Art of Midwifery Discovered* (London, 1671), p. 176.

[368] Tryon, *The Good House-Wife,* pp. 190-192.

could be cured by a cold remedy of equivalent degree to heat).[369] 'Little and gentle exercise' combined with a 'cooling diet' was an important corrective to the deficiency in moisture which was the predominant characteristic of the choleric temperament. Exercise should be continued 'till the colour and flesh is somewhat ruddy, and the sweat beginnes to breake forth ... if they should proceed further ... the spirits would bee soone exhausted, the body distempered and brought into an Atrophy or Consumption'.[370] Cholerics were also advised to avoid heavily salted meat in favour of salads and vegetables like lettuce, sorrel and spinach. Fruits, including limes, oranges and lemons performed much the same function in terms of restoring the lost moisture which set men of this temperament on a precipitous path to old age. Sleep was to be indulged because it 'cools and moistens' the body, thus making up for the lack of innate moisture which was considered necessary for the balance of the life-force along with the innate heat, which in the context of the choleric temperament, was considered overpowering.[371]

The Humoural Body: An Inferior Temperament?

The Phlegmatic Temperament

[369] Andrew Wear, 'Medicine in Early Modern Europe', in Lawrence I. Conrad, Michael Neve, Vivian Nutton, Roy Porter and Andrew Wear eds., *The Western Medical Tradition: 800BC To AD1800* (Cambridge, 1995), p. 260; William A. Jackson, 'A Short Guide to Humoural Medicine', *TRENDS in Pharmacological Sciences,* Vol. 22.9 (2001), p. 487; Schoenfeldt, *Bodies and Selves,* p. 21.

[370] Tobias Venner, *Via Recta and Vitam Longam Pars Secunda. Wherein the True Use of Sleepe, Exercise, Excretions, and Perturbations Is* (London, 1623), p. 23.

[371] Maynwaringe, *Vita Sana & Longa,* p. 120; Maynwaringe, *The Method and Means,* p. 53; Archer, *Every Man His Own Doctor*, pp. 10-11; Elyot, *The Castel of Helth,* p. 18; Venner, *Via Recta,* p. 12.

In abstract renderings of the temperaments, the phlegmatic was considered the most likely to predispose men and women to an early old age (see Chapter 2). Salient personality traits attributed to the phlegmatic further preserved the status-quo. Phlegmatic women were considered more cowardly, more delicate, lazier, more envious, more prone to crying, more cunning, and more capable of lying, as well as more willing to spread despicable rumours than men. The notion that the phlegmatic was particularly idle, slothful, even, was pervasive at this time.[372] It was these characteristics and not solely a woman's sex which provided the rationale for her predisposition to premature aging. 'Their manner of liuing' as André Du Laurens commented, 'also doth make them to waxe old, because they liue as it were alwaies in idlenes'. [373]

This was sometimes cited as the basis of the division of labour between men and women, although men were known to have phlegmatic temperaments too. The way gender was interpreted with the limits of the phlegmatic temperament illustrated how the idealised male, sanguine constitution, was inapplicable to many early modern men.[374] Men with this temperament lacked the mental acuity associated with men, 'being slenderly

[372] Sherry Sayed Gadelrab, 'Discourses on Sex Differences in Medieval Scholarly Islamic Thought', *Journal of the History of Medicine and Allied Sciences,* Vol. 66.1 (2010), p. 65; Blagrave, *Blagraves Astrological Practice,* p. 185; Bureau d'adresse, *Another Collection of Philosophical Conferences,* p. 148; Davies, *Microcosmos,* p. 64; Le Grand, *An Entire Body of Philosophy,* p. 282.

[373] André Du Laurens, *A Discourse of the Preseruation of the Sight: of Melancholike Diseases; of Rheumes, and of Old Age ... Translated out of French into English, According to the Last Edition, by Richard Surphlet, Practitioner in Phisicke* (London, 1599), p. 177; La Primaudaye, *The French Academie*, p. 545; Le Grand, *An Entire Body of Philosophy,* p. 282.

[374] Shepard, *Meanings of Manhood,* p. 53; Amanda Vickery, 'Golden Age to Separate Spheres? A Review of the Categories and Chronology of English Women's History', *The Historical Journal,* Vol. 36.2 (1993), pp. 383-414.

furnisht with what makes a man'.[375] They also 'shunne labour and giue themselues to bodily pleasures, they loue dainties, and delicate meates and drinkes, they are tender and effeminate, and cleane contrary to stowt and valiant men'.[376] That some men were undoubtedly inferior to others was accentuated by comparisons between men and women of the same phlegmatic temperament. Phlegmatic men were like women in respect that they were 'for the most part persons effeminate, nice, tender, without courage and spirit, sleepy, slothfull, weaklings, meycockes'.[377] They also resembled women in appearance with their soft, hairless bodies, and a short but corpulent stature.[378] Not all phlegmatic men were equal to women however. Some women were superior, especially if they were possessed of a choleric or sanguine constitution.[379] This was made possible when women were thought to transcend the weaknesses traditionally associated with their sex, either by exhibiting an unusual show of physical strength or somewhat paradoxically, given the association of the sanguine temperament with men, extended to women who struggled with the physical rigours of pregnancy. Far removed from its association with men, some writers appropriated the sanguine temperament as representative of some women's superior nursing abilities, in terms of being able to

[375] Richard Head, *Proteus Redivivus: or, The Art of Wheedling or Insinuation, Obtain'd by General Conversation* (London, 1675), p. 65.

[376] Pierre de La Primaudaye, *The Second Part of the French Academie. Wherein, As it Were by a Naturall Historie of the Bodie and Soule of Man* (London, 1594), p. 380.

[377] Shepard, *Meanings of Manhood,* pp. 60-61; Levinus, *The Touchstone of Complexions,* pp. 130, 72.

[378] Culpeper, *Galen's Art of Physick,* p. 56.

[379] N. H., *The Ladies Dictionary, Being a General Entertainment of the Fair-Sex. A Work Never Attempted before in English* (London, 1694), p. 19.

supply their children with a richer source of nourishment.[380] In this regard, contemporary writers were following the original logic of Aristotle. In Aristotlean discourse, women, along with men, were represented across the spectrum of the four temperaments.[381]

Regardless of whether the phlegmatic was a woman or man, the improving nature of the non-naturals meant that deficiencies could be corrected through the use of 'contraries'. Contraries referred to things of an opposite temperature to the innate temperament, which in the case of the phlegmatic cold-moist complexion, were elements of the non-naturals that helped 'to repair and recompense the defects of heat, and dry up those superfluous moistures'.[382] We have already seen in Chapter 2 how exercise and work was considered beneficial to the general health of the population. This was considered even more beneficial for individuals with a phlegmatic temperament. Diet and physical activity made the phlegmatic temperament more conducive to health and long life.[383] In the case of diet, this included the consumption of hotter food-stuffs which neutralised

---

[380] Nicolaas Fonteyn, *The Womans Doctor, or, An Exact and Distinct Explanation of all Such Diseases as are Peculiar to that Sex* (London, 1652), pp. 1, 202; Culpeper, *Galen's Art of Physick*, p. 52; J. S., *The Accomplished Ladies Rich Closet of Rarities: or, The Ingenious Gentlewoman* (London, 1687), p. 83; N. H., *The Ladies Dictionary,* p. 19; John Pechey, *The Compleat Midwife's Practice Enlarged, In the Most Weighty and High Concernments of the Birth of Man* (London, 1698), p. 75; Sharp, *The Midwives Book*, pp. 363-364.

[381] Aristotle [Attributed], *The Problemes of Aristotle with Other Philosophers and Phisitions. Wherein are Contayned Diuers Questions, with their Answers, Touching the Estate of Mans Bodie* (London, 1595), p. 45; Hippocrates, *Diseases of Women 1*, trans. Ann Hanson, *Signs,* Vol. 1.2 (1975), pp. 567-584.

[382] Maynwaringe, *Tutela Sanitatis,* p. 42; Tryon, *A Way to Health,* p. 19; Elyot, *The Castel of Helth,* p. 73.

[383] Humphrey Brooke, *Ugieine, or, A Conservatory of Health. Comprized in a Plain and Practicall Discourse Upon the Six Particulars Necessary to Mans Life* (London, 1650), pp. 31-36.

the worst excesses of the cold-moist temperament.[384] Bread eaten with oil for instance, butter eaten sparingly, old cheese and all sorts of gruels and pottages, mustard, salt and spices, were considered beneficial, where colder foods, herbs and salads, for instance, were to be avoided. This sometimes involved the cooking process: meat should be roasted and then boiled. In the instance of a cold-moist body, warm and dry air was considered an agent of improvement.[385]

Rarely was this advice explicitly directed to women, which brings us to the question of why. I would suggest that it is possible that the wider ramifications of a woman's deviation from her colder nature were foremost in the minds of contemporaries. If women were acknowledged to be able to alter their colder nature, this would conflict with the characteristics of femininity that were thought to 'naturally' flow from her phlegmatic temperament. For both men and women, generally, the temperaments went beyond the subject of aging, providing the foundation for the establishment of salient gender norms. As we saw in Chapter 2, heat was central to contemporary ideas of male perfection: encompassing ideas of gestation, a strong and robust physiology, physical strength and moral qualities of courage and moral integrity. The cold-moist temperament, as we have also seen, provided a justification for the exclusion of women from the public sphere. It was also linked to the production of superfluous humours, which in turn, explained why women menstruated and could nourish a conception in the womb. Medical discussions of various but distinctively female processes: including

[384] Maynwaringe, *Tutela Sanitatis,* p. 42; Tryon, *A Way to Health,* p. 19; Elyot, *The Castel of Helth,* p. 73.

[385] Maynwaringe, *Vita Sana & Longa,* pp. 115-116, 49; Tryon, *A Way to Health,* p. 18.

menstruation, parturition and lactation, were all held to flow from her colder nature.[386] The Galenic-Hippocratic two-seed model also relied on women's temperament being cold and moist where men were hot and dry.[387]

Men needed to be hotter so that they could sustain more arduous physical labour and travel. Women needed to be colder so they could receive the seed of man, conceive a child, bear and nourish it whilst never straying far from home where the delicacy of her condition made her vulnerable from excursions into the public sphere.[388] If women were as warm as men, their nutrient would be dispersed by heat, thus, it was necessary for maintaining the balance of society for women to be colder. It was not so much that women, like men, could not correct their deficient temperaments, rather that the coherence in representations of her gender, which in large part stemmed from her colder

[386] Maclean, *The Renaissance Notion of Woman*, p. 144; Patricia Crawford, 'Sexual Knowledge in England, 1500-1750', in Roy Porter and Mikláš Teich eds., *Sexual Knowledge, Sexual Science: The History of Attitudes to Sexuality* (Cambridge, 1994), p. 91; Gail Kern-Paster, 'The Unbearable Coldness of Female Being: Women's Imperfection and the Humoral Economy', *English Literary Renaissance,* Vol. 28.3 (1998), pp. 416-440.

[387] Sarah Toulalan, '"Age to Great, or to Little, Doeth let Conception": Bodies, Sex and the Life Cycle, 1500-1750', in Sarah Toulalan and Kate Fisher eds., *The Routledge History of Sex and the Body 1500 to the Present* (London and New York, 2013), pp. 52-60.

[388] Helkiah Crooke, *Mikrokosmographia: A Description of the Body of Man. Together with the Controuersies thereto belonging* (London, 1615), pp. 272-273; Cuff, *The Differences of Ages,* pp. 106-107; Alexandra Shepard, 'Manhood, Credit and Patriarchy in Early Modern England *c.*1580-1640', *Past and Present,* Vol. 167 (2000), pp. 76-79.

temperament, depended on her not doing so. 'Hot' behaviours which were natural and praiseworthy in men became pathological signs of unnatural deviations in women.[389]

Fertility and the prerogatives of her sexed body, instead of health, determined a woman's approach to the non-naturals. Unlike men of the same complexion, she was advised to eschew the hotter diet and laborious physical activity that would have corrected the deficiency in her temperament, because 'the whole preservation of mankind' depended upon on her not doing so.[390] The idea that health and longevity was a price bought at the expense of the expectations of a woman's gender was also emphasised in contemporary discussions of menstruation. When contemporaries discussed the effects of the suppression of the menses as a result of a woman's engagement in physical labour, they interpreted this firstly in terms of the expression of masculine characteristics that this would bring about (including barrenness), and secondly, in terms of an alignment with a hotter, more efficient, 'male' constitution.[391]

---

[389] Gadelrab, 'Discourses on Sex Differences', p. 52; Gail Kern-Paster, 'The Unbearable Coldness of Female Being: Women's Imperfection and the Humoral Economy', *English Literary Renaissance,* Vol. 28.3 (1998), pp. 423, 429.

[390] Tryon, *A Way to Health,* pp. 201-208; Sennert, *Nine Books,* p. 9.

[391] John Pechey, *A General Treatise of the Diseases of Maids Bigbellied Women, Child-Bed-Women, and Widows, Together with the Best Methods of Preventing or Curing the Same* (London, 1696), pp. 14-15; Alessandro Massaria, *De Morbis Foemineis, The Woman's Counsellour: or the Feminine Physician ... Translated out of Massarius de Morbis Mulier. By R.T. Philomathēs* (London, 1657), pp. 18-19; Nicholas Culpeper, *Culpeper's Directory for Midwives: or, A Guide for Women* (London, 1662), p. 89; Sharp, *The Midwives Book,* p. 290; Du Laurens, *A Discourse of the Preseruation of the Sight*, p. 177; La Primaudaye, *The French Academie*, p. 545; Le Grand, *An Entire Body of Philosophy,* p. 282.

The phlegmatic, though subject to improvements by certain judicious engagements with non-naturals, was nevertheless interpreted as innately deficient in a hierarchical model of the temperaments. As we saw in Chapter 2, this view wasn't always consistent, especially when the temperaments were related to the lamp metaphor which in some interpretations, was solely concerned with the relationship between heat and moisture. Vivid analogies of burning bodies, as we also saw in the last chapter, exposed the difficulties in reconciling the cold-moist temperament with premature aging. As well as acknowledging this through symbolism and analogy – the ancient claim that for every ten male bodies burnt, only one female body would 'take fire' – explicit statements were made in favour of the view that far from aging soonest, those with phlegmatic temperaments were likely to age last. This view, though contemporaneous, conflicted with the hierarchical ordering of the temperaments. In the aging process, some interpretations of the lamp metaphor privileged colder and moister temperaments over hotter ones.

This view can be originally traced to Galen in his Sixth Book of the Preservation of Health: 'those who are very moist, are long-liv'd, and when their bodies are come to their full strength, they are more healthy then others ... and so continue till they grow old'.[392] Seventeenth-century authors interpreted this similarly. Thomas Walkington repeated what he observed was a prominent view amongst physicians when he wrote that the phlegmatic temperament 'commeth nearest the best'. Considering the likelihood that right living would alter this temperament to one dominated by blood [the sanguine temperament], Walkington himself, thought this argument 'not improbable'.[393] That

[392] Galen cited in Bureau d'adresse, *Another Collection of Philosophical Conferences,* p. 435.

[393] Walkington, *The Optick Glasse of Humors,* p. 61.

contemporaries should see the phlegmatic and sanguine temperaments in this way is unsurprising. The fluid nature of the temperaments, as we saw earlier, set men and women apart by degrees, the phlegm which characterised the cold-moist temperament was a metamorphical derivative of blood. Blood symbolised the sanguine temperament most associated with men. Phlegm, the defining characteristic of the cold-moist temperament, was the 'first beginning of blood yet vnperfect, & not exactly laboured: a resemblance, shew or paterne whereof, we may well behold in Muste or new Wyne, whyle it is yet hoate, and newly taken and wringed out of the Presse'.[394] The message was clear: wine matures. Cultivated properly, it becomes a fine wine, far removed from its infantile and inauspicious beginnings.

Other contemporaries emphasised more positive ways of looking at the phlegmatic temperament. Samuel Haworth, eminent empirical physician, continued to expose the fault-lines in instituting parallels between the phlegmatic temperament and the idea that women both grew up sooner and aged quicker than men. Whilst he agreed with the vast majority of his contemporaries who thought that women tended to be dominated by a phlegmatic temperament, he also argued that as a result, 'they grow old slowly'.[395] A colder temperament could just about be reconciled with the assertion that young females grew up sooner than their male counterparts because of what was identified as the persistently corpulent nature of female physiology from youth to maturity. Explaining why this also led to a rapid decline to old age was usually passed over. The dislocations between the lamp metaphor and the idea that the cold-moist temperament disadvantaged women in the aging process, was further exposed as irreconcilable by a

[394] Lemnius, *The Touchstone of Complexions,* pp. 4, 107.

[395] Haworth, *Anthropologia,* p.144.

supporter of the view that women aged sooner than men. Helkiah Crooke acknowledged that in its original ancient incarnation, cold temperaments were associated with the male, and the gradual, when compared to hotter females, ascent and descent to maturity and old age. [396] Thus the temperaments became a carrier for gender that when probed deeper, were exposed as wholly irreconcilable with fixed notions of sexed aging.

Fibre-based Constitutions and Sensibility: The Eighteenth-Century

During the eighteenth century, aging shifted focus from the humoural body to the nervous system and the idea of fibre-based constitutions. Aging, as we saw in Chapter 2, was conceptualised within a paradigm which emphasised the teleological nature of the fibres from the laxness of childhood to the rigidity of old age. The different states of the fibres were further polarised: people had either very elastic or very weak fibres (although a variety of intermediate degrees were also admitted). The fibre-based constitutions of the eighteenth century were determined by ideas (and sometimes ideals) of robust male and flaccid female nerves.[397] Stiff and robust nerves at the most basic level of interpretation were associated with the male and the elderly, with flaccid nerves deemed characteristic of females and children.[398] This model, heavily influenced by eighteenth-century ideas of gender, paved the way for a partial reversal in conceptions of aging where under the most basic tenets of seventeenth-century understandings of the

[396] Crooke, *Mikrokosmographia*, pp. 272-273. Similarly: Cuff, *The Differences of Ages*, pp. 106-107.

[397] George S. Rousseau, *Nervous Acts: Essays on Literature, Culture and Sensibility* (Basingstoke, 2004), p. 253

[398] Hisao Ishizuka, '"Fibre Body": The Concept of Fibre in Eighteenth-Century Medicine, c. 1700-40', *Medical History,* Vol. 56.4 (2012), pp. 563, 570; Robert James, *A Medicinal Dictionary; Including Physic, Surgery, Anatomy, Chymistry, and Botany, in All their Branches Relative to Medicine*, Vol. 2 (London, 1743-45), 'FIBRA'.

temperaments women were inclined to start aging before than men. These reversals were, it will be argued, incomplete and partial. Contemporary distinctions based on the assumed consistencies of fibre-based constitutions were not always so neat as to imply an incommensurably sexed path to old age. Medical explanation, whilst exalting the delicacy of the female nervous system, sometimes contained a broader subtext: to be nervous was to be fashionable and to be sought-after. Both men and women could therefore be nervous and constitutionally delicate.[399]

There were also elements of continuity with the seventeenth century. Discussions concerned with health regimes which promoted health and longevity still focused on the non-naturals. The rhetoric of sensibility, however, meant that these were approached sometimes contradictorily from both the subjective stand-point of 'feeling' and the more traditional perspective of blanket-rules for certain 'types' of people. As with the seventeenth century, who aged and when – be this men, women, labourers or the more sedentary types – can be seen from a number of different, often opposing perspectives. In terms of gender, once again, an oblique picture is presented. An element of this chapter is how eighteenth-century authors often removed from view the contradictions and dislocations that made a hegemonic view of male and female aging possible. The first part of this section looks at some of the most basic ideas of sexed aging in the eighteenth century, followed by some of the exceptions that prevented a firmly sexed path to old age from being emphasised in contemporary discourse. The final part of this section of Chapter 3, looks at some contemporary approaches to the non-naturals, and how these,

[399] Rousseau, *Nervous Acts,* pp. 261-262. Examples include: James Mattrick Adair, *Essays on Fashionable Diseases. The Dangerous Effects of Hot and Crouded [sic] Rooms* (London, 1786); George Cheyne, *The English Malady: or, A Treatise of Nervous Diseases of All Kinds* (London, 1733).

taken collectively, provided irreconcilably different answers to the question of who aged and when.

During the eighteenth century, contemporaries put the beginnings of old age at somewhere between the ages of 50 and 70.[400] This was somewhat more concentrated than the 35-72 years of age of the previous century's ages of man schemas, and the 60-100 years old latitude given for the lamp metaphor. Also, unlike in the seventeenth century, eighteenth-century writers believed that physical decline began earlier in men than in women. One contemporary thought that men began to age ten years earlier than women.[401] Because of a predisposition to callosity in the nervous system men were thought to 'grow up apace'.[402] This process continued until the vessels were 'concreted', 'strong and callous', with the heart unable to continue the functions of life and the fibres became too rigid.[403] Those with firm fibres, according to one contemporary, 'will sooner arrive at puberty, and run through the stages of life more quickly than the lax'.[404] The

[400] James Mattrick Adair, *Commentaries on the Principles and Practice of Physic. Illustrated by Pathological Tables and Practical Cases. Being An Attempt, on a New Plan, to Connect the Several Branches of Medicine, and to Place the Practice of it on a Rational and Solid Foundation* (London, 1772), p. 81; William Cullen, *Lectures on the Materia Medica as delivered by William Cullen, M. D. Professor of Medicine in the University of Edinburgh* (London, 1773), pp. 15-16; Sir John Floyer, *Medicina Gercomica: or the Galenic Art of Preserving Old Men's Healths, Explain'd In Twenty Chapters,* (London, 1738), p. 1; Herman Boerhaave, *Academical Lectures on the Theory of Physic. Being A Genuine Translation of his Institutes and Explanatory Comment,* Vol. 6 (London, 1742-1746), p. 126; Georges Louis Leclerc Buffon, *Barr's Buffon. Buffon's Natural History, Containing A Theory of the Earth, a General History of Man, of the Brute Creation, and of Vegetables, Minerals,* Vol. 4 (London, 1772), p. 96.

[401] Adair, *Commentaries,* p. 79.

[402] Boerhaave, *Academical Lectures* ... Vol. 6, p. 126.

[403] James, *A Medicinal Dictionary,* 'FIBRA'.

[404] Adair, *Commentaries,* p. 71.

nature of female physiology, with its dependency on a greater degree of flexibility in the fibres to express the sexed functions of a woman's body, translated into advantages in the aging process. Consequently, 'In the female, there is greater laxity, with humidity and thinness of the fluids, arterious plethora, more sensibility, irritability, levity and weakness, so that in them the character in of youth continues longer than in male'. Conversely, the rigidity of the fibres conceptualised both the male and elderly body in eighteenth-century medical discourse. This 'temperament', as William Cullen put it, 'is most distinctly marked in old age and in males'.[405]

Women that led a sedentary life did not develop large bones, muscles, blood vessels and nerves as men were expected to do. By associating life-style with the constituent fibres of women's bodies the delicacy of the female fibre-based constitution was also used to explain her greater life expectancy.[406] The functions of the female body, in bearing children and through the monthly evacuation of the menses, also depended upon the inherent flexibility and elasticity of the fibres. Where the purging of the menses and childbirth were aligned with women's reduced longevity and an early entry to old age in the seventeenth century (see Chapter 2), interpretations of the female fibre-based constitution of the eighteenth, would contribute to the opposite view. The laxness which largely defined the female constitution was viewed as far removed from the association of old age with the rigidity of the fibres: 'The fibres of women which are intended to be

[405] Cullen, *Lectures on the Materia Medica,* p. 17; Buffon, *Barr's Buffon,* p. 100. Women's fibres were considered more delicate than men's: G.J. Barker-Benfield, *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago and London, 1992), p. xvii.

[406] Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science between the Eighteenth and Twentieth Centuries* (Madison, 1989), p. 28.

relaxed and to give way' according to Tissot, 'are unavoidably extended by the growth of the of the child [which] should necessarily be less stiff and rigid, less strong and more lax and yielding than the fibres of men'.[407] Eighteenth-century ideas of menstruation also played a large part in attributing specific advantages to women over men in the aging process. Whilst it was once possible to argue that any periodic discharge of blood or fluid from either a male or female patient could be characterised as menstruation, increasingly, a growing number of contemporaries maintained that only discharges from the uterus or vagina should be termed menstruation.[408] The prominent physician Barthez, more specifically, associated the flexibility of female fibres with menstruation and late old age: 'Probably women enjoy this increase in their average age because of the softness and flexibility of their fibres, and particularly because of their periodic evacuations'.[409] Early theories of nervous nutrition, where the nerves were thought to be kept in tone by fluids circulating throughout the body, increased the advantages thought to accrue through menstruation and the circulation of superfluous humours.[410] As poverty and malnutrition increasingly led to high rates of amenorrhea, it is also logical to assume that

[407] Samuel Auguste David Tissot, *Advice to People in General, with Respect to their Health. Translated from the French edition of Dr. Tissot's Avis au Peuple* (London, 1774), p. 88; James, *A Medicinal Dictionary,* 'FIBRA'.

[408] Alexandra Lord, '"The Great *Arcana* of the Deity", Menstruation and Menstrual Disorders in Eighteenth-Century British Medical Thought', *Bulletin of the History of Medicine,* Vol. 73.1 (1999), pp. 40-41; Robert Whytt, *Observations on the Nature, Causes Nervous, Hypochondriac or Hysteric, to which are Prefixed some Remarks on the Sympathy of the Nerves* (Edinburgh, 1767), p. 179; Henry Bracken, *The Midwife's Companion; or, A Treatise of Midwifery: Wherein the Whole Art is Explained* (London, 1737), p. 58.

[409] Barthez cited in Jordanova, *Sexual Visions,* p. 28.

[410] Frank W. Stahnisch, 'The Emergence of *Nervennahrung*: Nerves, Mind and Metabolism in the Long Eighteenth Century', *Studies in History and Philosophy of Biological Sciences,* Vol. 43.2 (2012), pp. 405-417.

the advantages conferred by menstruation in the context of fibre-based physiology did not extend to all women.[411]

Because fibre-based contributions were not solely determined by gender, women did not have a monopoly on advantages in the aging process. Distinctions drawn between the sexes were still mediated, as they were during the seventeenth century, by the commonalities that originated from shared life-styles and social roles. The language of physiology also continued to bring together biological, psychological and social considerations.[412] The pre-conditions of a fibre-based constitution that was compatible with late old age was not just sex, but a 'high refinement' of the nervous system that was encouraged through idleness, intemperance and a fashionable life-style'.[413] These commonalities were enhanced by concepts of refined manliness, where manhood was measured, not lost, by men's ability to narrow the gap between the sexes.[414] Men, as well as women, therefore, were predisposed to having a delicate and sensible nervous system, especially if they led a sedentary or studious life.[415] It was therefore, not only women who

[411] Lord, '"The Great *Arcana* of the Deity"', p. 43.

[412] Jordanova, *Sexual Visions,* pp. 26, 58; Schiebinger, *The Mind Has No Sex?,* p. 207; Adair, *Commentaries,* p. 49.

[413] Alex Thomson, *An Enquiry into the Nature, Causes, and Method of Cure, of Nervous Disorders* (London, 1782), p. 9.

[414] Philip Carter, 'An "Effeminate" or "Efficient" Nation? Masculinity and Eighteenth-Century Social Documentary', *Textual Practice,* Vol. 11.3 (1997), pp. 429-443; Philip Carter, *Men and the Emergence of Polite Society: Britain 1660-1800* (Harlow, 2000); Alexandra Shepard, 'From Anxious Patriarchs to Refined Gentlemen? Manhood in Britain, circa 1500-1700', *The Journal of British Studies,* Vol. 44.2 (2005), p. 282.

[415] Richard Hunter and Ida Macalpine, *Three Hundred Years of Psychiatry 1535-1860* (London, 1963), p. 221; John Mullan, *Sentiment and Sociability: The Language of Feeling in the Eighteenth Century* (Oxford, 1988), p. 208; Thomson, *An Enquiry into the Nature,* p. 10; George Cheyne, *An Essay of Health and Long Life* (London, 1724), pp. 44, 48; Cullen, *Lectures on the Materia Medica,* pp. 1-28.

were thought to age slower than men, but the weak and sedentary of either sex. Yet where a woman's delicate, fibre-based constitution was derived from assumptions about her gender a man's similar disposition was thought to be a consequence of his more scholarly, sedate endeavours. Whilst some men were associated with a predisposition to delicacy in their constitutions, almost all women were credited with lax fibres and sensitive nervous systems. This view was influenced by the supposition that *all* women led sedentary lives uninvolved in activity and the more 'masculine' business of acquisition.[416]

The discourses of sensibility which anchored women and some men to a delicate nervous system also excluded labouring men and labouring women on the basis of their lack of sensibility.[417] Writers generally agreed that labouring men, with their overwhelming lack of sensibility, were considered most at risk from the premature rigidity of fibres which was associated with premature aging.[418] Whilst the exquisite delicacy of nerves, in a few instances, were associated with servants or the lower classes, generally, nervous sensibility was conflated with a particular class identity. Sensibility became a trope for 'gentility and delicacy' it was applied to 'snobs and social climbers where the body or corpus was yoked with the civic polity'.[419] George Cheyne firmly disposed of the notion

[416] Mullan, *Sentiment and Sociability,* p. 220.

[417] This is a distinction also made by E.P. Thompson, *Customs in Common* (New York and London, 1991) pp. 18-19; Karen Harvey, 'The History of Masculinity, circa 1650-1800', *The Journal of British Studies,* Vol. 44.2 (2005), pp. 296-311.

[418] Boerhaave, *Academical Lectures ...* Vol. 6, pp. 248-250, 254, 262; Cheyne, *An Essay of Health,* p. 25; Adair, *Commentaries,* pp. 58, 181; Thomas Morgan, *Philosophical Principles of Medicine, in Three Parts. Containing, I. A Demonstration of the General Laws of Gravity, with their Effects upon Animal Bodys* (London, 1725), pp. 435-436.

[419] Rousseau, *Nervous Acts,* pp. 254-255; James Lowde, *A Discourse Concerning the Nature of Man, both in his Natural and Political Capacity: Both as he is a Rational Creature, and Member of a Civil Society* (London, 1694). For

that those involved in activities such as physical labour could aspire to the delicacy and refinement which characterised both men and women of the upper ranks. Those '*who govern',* Cheyne went on to say, and those 'who *are governed,* are originally form'd and mark'd out by Nature and their original *Frame* and *indelible Signatures'.* The ruling class were those with 'more delicate and elastic *Organs* of *Thinking and Sensibility'.* The opposition was formed in contrast to the rigid fibres of men who were required to undertake manual labour – 'the *governed*'. He divided the 'human race' into two types: 'those whose Eminence and Dignity consists chiefly in their *Heads, Faculties* and *spiritual Nature*, and *those* whose great *Use* and *Design* is to excel in the Exercise and Use of their *Bodies, Limbs and material Organs'.* [420]

Females conditioned to physical labour, as well as being invulnerable to nervous diseases like hypochondria, were also considered more open to the changes in fibre-based physiology which set men upon an accelerated path to old age. Unlike labouring men, however, labouring women are infrequently glimpsed in contemporary literature. [421] The why (as well as the fact that labouring women were the unlikely recipients of advice literature) can be traced to ideas of gender, which only through a process of exclusion of women who did not conform to type, could masquerade as a dominant ideology.

---

more on the body politic in the context of this discussion, see, David Armstrong, *Political Anatomy of the Body* (Cambridge, 1983); Martha Banta, 'Medical Therapies and the Body Politic', *Prospects,* Vol. 8 (1983), pp. 59-128; John O'Neill, *Five Bodies: The Human Shape of Modern Society* (Ithaca, 1985).

[420] George Cheyne, *The Natural Method of Cureing the Diseases of the Body, and the Disorders of the Mind Depending on the Body* (London, 1742), pp. 82-83, 86.

[421] James, *A Medicinal Dictionary,* 'FIBRA'; Tissot, *Advice to People in General,* p. 91; Diana Faber, 'Hysteria in the Eighteenth Century', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), p. 322.

Liberalism, which provided the theoretical underpinnings for the emerging democratic states of the eighteenth century, did not consider women's work as an integral part of the system as a whole, thus identifying the domestic sphere as the proper location of the positive qualities of femininity. Theories of sexual complementarity articulated the idea that men and women were incommensurate, 'fulfilling nature's ends according to its own particular purpose'.[422] Often in conflict with ideas of sensibility that were inclusive of certain ideas of masculinity and femininity, positive attributes such as strength, endurance, physical prowess, intelligence, wisdom, and judiciousness were attributed to males, leaving the opposite, often negative attributes to females: 'electing for them, in general a contingent, supportive and child-producing identity'. The successes of men of the middling and upper ranks were also partly confirmed by their power to mould and define their women, whose idleness was symptomatic of their own successes. Why labouring women featured at all in contemporary advice literature can be traced to eighteenth-century class strictures. Labouring women provided a useful counter-point against which upper and middling women could successfully define themselves. Where middling and upper-rank women were dressed in clothing that not only inhibited movement but made their bodies appear delicate, labouring women had to be strong and wear clothing that enabled physical exertion. Limiting physical strength to labouring women also provided a useful distinction at a time when physical differences among the ranks were permeable.[423]

Fibre-based Constitutions, Sensibility and Approaches to the Non-naturals

[422] Schiebinger, *The Mind Has No Sex?,* pp. 224, 226, 234.

[423] Betty Rizzo, 'Equiviocations of Gender and Rank: Eighteenth-Century Sporting Women', *Eighteenth-Century Life,* Vol. 26.1 (2002), pp. 70-71.

Management of the non-naturals, as the aforementioned emphasis on labour suggests, still constituted a significant part of quotidian life. Dietetics or medicine, still clung fast to temperance – 'nothing too much' and the 'golden mean' was thought best. Gluttony was bad for health but it was also just plain bad when considered in light of the classical virtues.[424] Yet whilst the emphasis on the non-naturals provides a point of convergence with the seventeenth century, physicians were fundamentally split on which approach would help prolong life and institute a late entry to old age and which approach would encourage the precise opposite. The non-naturals continued to be evaluated from the objective standpoint of absolute rules within health regimes, but increasingly, as a consequence of the advent of sensibility, from the subjective stand-point of individual feelings.[425] Sensibility concerned feelings and sensations purely interior and intimate, which excluded third persons. The idea here was that the individual was the governor of his or her health and only the individual could understand what course of life best suited his or her constitution.[426] As Elizabeth Williams points out, in the eighteenth century 'pursuers of healthy eating turned their attention towards the domain of the inner sensations as a faithful guide to health'.[427]

---

[424] Steven Shapin, 'Trusting George Cheyne: Scientific Expertise, Common Sense, and Moral Authority in Early Eighteenth-Century Dietetic Medicine', *Bulletin of the History of Medicine,* Vol. 77.2 (2003), p. 267; Morgan, *Philosophical Principles*, p. 435.

[425] Séverine Pilloud and Micheline Louise-Courvoisier, 'The Intimate Experience of the Body in the Eighteenth Century: Between Interiority and Exteriority', *Medical History,* Vol. 47.4 (2000), p. 252.

[426] Boerhaave, *Academical Lectures …* Vol. 6, p. 241.

[427] Elizabeth A. Williams, 'Sciences of Appetite in the Enlightenment, 1750-1800', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 43.2 (2012), p. 388.

Temperament, in the context of nervous discourse, was a phenomenon that existed both within the body and the mind but in this context, as well, as an appreciation if not an appropriation of John Locke's theory of personal identity. By personal identity, Locke referred to the process whereby individuals learnt to relate past to present experience. Physiology, Locke thought, predisposed creatures to respond to sensory impressions and experience in differentiated ways.[428] The dangers of luxury and exhortations to eat sparingly, for instance, were eclipsed to a certain degree by the idea that to be healthy, individuals must consume what their appetite urged them to eat, even though they were potentially eating themselves into the grave and wrecking their health.[429] Joseph Addison, editor of the periodical *The Spectator,* in response to the idea that the growing battle against obesity provided the key to continuing life, wrote about how this interfered with the 'natural solicitations of hunger and thirst, drowsiness or love of exercise'.[430] Voluntary exercise, undertaken with cheerfulness and vigour, was considered more conducive in establishing a good constitution than involuntary exercise.[431] Pleasure and pain respectively, for better or worse, qualitatively altered the

[428] George Rousseau, 'Temperament and the Long Shadow of Nerves in the Eighteenth Century', in Whitaker et al., eds., *Brain, Mind and Medicine*, p. 358.

[429] Williams, 'Sciences of Appetite', pp. 392-404; Rousseau, *Nervous Acts,* p. 269; Boerhaave, *Academical Lectures ...* Vol. 6, p. 125.

[430] J. Addison and R. Steele, in Donald F. Bond eds., *The Spectator,* Vol. 1 (London, 1965, First published in London, 1711), pp. 105-108; Lucia Dacome, 'Balancing Acts: Picturing Perspiration in the Long Eighteenth Century', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 43.2 (2012), p. 384.

[431] James Mattrick Adair, *Medical Cautions; Chiefly for the Consideration of Invalids. Containing Essays on Fashionable Diseases* (London, 1787), p. 401.

condition of the fibres.[432] The mind, in these instances, showed itself materially, functioning as a 'physiological captain lording over the body's regimen', whilst commanding the anatomical organs (heart, bowels and limbs).[433] Therefore, as exercise was only considered beneficial when undertaken freely, only a very small proportion of those who lived to a ripe old age came from the ranks of those who were 'reduced to the necessity of labouring for their daily bread'.[434]

Fundamentally, too, different approaches to the non-naturals provided conflicting answers to the question of which type of people were predisposed to age sooner than others. This was particularly the case when physicians tried to establish rules for labour and exercise. The idea, already mentioned, that the labouring classes (which increasingly extended towards a multitude of occupations) were already set upon a course of accelerated aging, was altered by other views.[435] Eighteenth-century writers emphasised the alterable nature of the body's limits for physical endurance in terms of its adaptability through habit and custom. Custom, in this century, involved the effects of repetitive actions (in relation to diet, work etc.) on the body. Habit involved the consequences of these actions in terms of the innate temperament being usurped in favour of an acquired and infinitely better complexion.[436] Habit was understood as a

[432] C.U.M. Smith, 'Brain and Mind in the "Long" Eighteenth Century', in Whitaker et al., eds., *Brain, Mind and Medicine,* p. 24.

[433] Rousseau, 'Temperament', p. 360.

[434] Adair, *Medical Cautions,* p. 401.

[435] A variety of activities were included under the term labourer, including a full range of occupations in manufacturing, trading and commercial activity: Catherine Packham, *Eighteenth-Century Vitalism: Bodies, Culture, Politics* (Basingstoke 2012), p. 84.

[436] Cullen, *Lectures on the Materia Medica,* p. 22.

cycle, where unease could became ease and pain could be turned into pleasure. Familiarity, gave 'an inclination and tendency' towards a particular action. In this mechanical model, change occurs through the application of force strong enough to encounter inertia. The cycle of activity and inactivity is thus increasingly slanted towards the performance of labour, and away from rest and indolence. In a physiological sense, the voluntary muscles were under the control of the will and although they would tire when placed under physical stress, they could also acquire from habit a 'readiness with which they take up actions'. This was based on the premise that the muscles were the most 'educable' of all the structures in the human body.[437] Given the fundamental difference in how contemporaries often approached the limits of the human body, the opposite view – that instead of getting stronger, the body was fundamentally weakened by its labours, was also very much in evidence at this time: 'The same causes [exercise or work] which render the Body strong, continuing to act, will, of course render it rigid ... excess Labour brings on all the symptoms of Old-age before Time'.[438]

Ideas of nervous sensibility, which connected body and mind, could also fundamentally alter the terms upon which the body exceeded its limits of endurance and lapsed into the extremes which physicians thought conducive to premature aging. As the greatest anatomist of his age, Thomas Willis identified the soul with the brain and argued that it

[437] Packham, *Eighteenth-Century Vitalism*; Adair, *Medical Cautions,* p. 405; James L. Stone, James T. Goodrich and George R. Cybulski, 'John Hunter's Contributions to Neuroscience', Whitaker et al., eds., *Brain, Mind and Medicine,* p. 77; Even though Adair thought labour brought on premature old age he also argued that 'strong men' were able to adapt to excessive engagements with the non-naturals: Adair, *Commentaries,* p. 59; John Fothergill, *Rules for the Preservation of Health: Containing all that has been Recommended By the Most Eminent Physicians* (London, 1762), pp. 51, 55.

[438] James, *A Medicinal Dictionary,* 'FIBRA'; Adair, *Commentaries,* pp. 58, 82, 105; Morgan, *Philosophical Principles*, p. 436; Adair, *Medical Cautions,* p. 402; Cheyne, *The English Malady,* p. 24.

depended 'on the nerves for all of its functions'. The 'nerves alone' were to be 'held responsible for sensory impressions and consequently for knowledge'.[439] Mental acuity depended on the delicacy of the nerves which joined the body with the brain.[440] The nerves were also designed to carry impulses rapidly and efficiently throughout the body. In some quarters, it was thought that physical labour instituted a change in the mind as well as the body. The density and rigidity of the fibres diminished sensibility. According to some eighteenth-century notions of sensibility, the greater the strength of the body the more inversely mental capacities were affected.[441] Labourers, for instance, were the contemporary equivalents of savages or physically-robust 'No Thinkers'.[442] Pioneers of the Enlightenment spirit hoped to bring about a better world marked by greater political, religious and personal freedom. They also aspired to the reassertion of man's control over nature and the improvement and enhancement of personal well-being. Contemporary notions of sensibility instituted an insurmountable barrier to the achievement of these goals.[443] Notions of sensibility, whilst legitimising the status quo, attributed the differential aging prerogatives of the population as a whole not to the fundamental inequalities originating in society itself, but to the collusion of the most economically disadvantaged individuals with the basis of their own oppression. This was expressed in the production of conditions that contributed to premature old age.

---

[439] Barker-Benfield, *The Culture of Sensibility*, p. 3.

[440] H. Smith, *An Essay on The Nerves, Illustrating their Efficient, Formal, Material, and Final Causes* (London, 1795), pp. 15-16.

[441] Cullen, *Lectures on the Materia Medica,* pp. 23-24.

[442] Roy Porter, 'Nervousness Eighteenth and Nineteenth Century Style', in Marijke Gijswijt-Hofstra and Roy Porter eds., *Cultures of Neurasthenia: From Beard to the First World War* (Amsterdam and New York, 2001), p. 33.

[443] Roy Porter 'The Eighteenth Century', in Conrad et al., eds., *The Western Medical Tradition*, p. 374

According to this way of thinking, class and rank were not only embodied through the nervous system, but also inclined people to certain behaviours. Embedded in the physiology of the nervous system were existing social biases: 'If the discourses of the nerves continue to purport – as our brain theorists today – that we *are* our neurophysiology, that we *are* synapses of our brain – sensibility develops the same possibility while affirming class distinction'.[444] Sensibility, as well as being cultivated, was also inborn. Variations in degrees of sensibility expressed a combination of environmental and innate difference. Given the eighteenth-century connotations of 'degree' with status, the quality of sensibility could be seen as a badge of rank.[445] The individual whose labour is bodily, was 'a subject whose passions, motivations and desires might be known and expressed via the body and have particular bodily consequences and effects'.[446]

In his discussion of the motivating causes of labour, John Locke differentiated between the lower orders who were caught up in desire to work, and those men of leisure who were capable of cultivating the rational self-improvements of 'taste' which exempted them from the desire to work.[447] Whilst poverty caused the neglect of physical health in the pursuit of life's necessities, it was not the intolerable burdens of physical labour which caused men to overburden themselves. It was the vanity of men to prove themselves stronger, fitter and more robust than other men that was essentially to blame for the lapse into the extremes which were conducive to sickness, broken bodies and a premature old age. 'Labourers', as William Buchan observed, 'are often hurt by a foolish

[444] Albano, 'The Puzzle of Human Emotions', p. 495; Rousseau, *Nervous Acts,* p. 232.

[445] Barker-Benfield, *The Culture of Sensibility,* p. 8

[446] Packham, *Eighteenth-Century Vitalism*, p. 88.

[447] John Locke cited in Packham, *Eighteenth-Century Vitalism,* pp. 93-94.

emulation, which prompts them to vie with one another, till they overheat themselves to such a degree as to occasion a fever, or even to drop down dead'.[448] A number of writers also inferred that only the idle, or the wealthy elite (or both), could be trusted to know intuitively which behaviours suited their particular constitution (and those which would exceed and destroy it), because only a great delicacy in the nervous sensibility allowed the individual to understand where the ease and pleasure of exercise left off and a dangerous excess took over.[449] The fashionable physician and author, George Cheyne, pointed to the robust nature of the labourers nerves as the reason why he 'seldom fails to run' into 'Snares and Temptations' as opposed to those with more delicate nerves which acted as a 'Fence and Security' against any potential lapses into extremes of behaviour.[450] In the case of the labouring classes, the frequently cited counter-point against which the elite body was defined, the robust nature of the body's fibres, with its ensuing lack of sensibility, prevented the mind from understanding the limits of the body's physical endurance which it often exceeded.[451] Aging thus became a matter not only for the body, but for the individual conscience as well – although some individuals were thought more capable than others in providing the correct response.

Conclusion

[448] William Buchan, *Domestic Medicine: Or, A Treatise on The Prevention and Cure of Diseases by Regimen and Simple Medicines* (London, 1774), pp. 26, 43.

[449] Boerhaave, *Academical Lectures ...* Vol. 6, p. 128; Fothergill, *Rules for the Preservation of Health,* p. 59; Buffon, *Barr's Buffon,* p. 87; Adair, *Medical Cautions,* p. 391.

[450] Cheyne, *The English Malady,* pp. 20-22; William Buchan thought labourers lacked 'foresight' in this respect: Buchan, *Domestic Medicine,* p. 46.

[451] Rousseau, 'Temperament', p. 364; Adair, *Medical Cautions,* p. 404.

Ideas of sexed aging were impossible to uphold because of contemporary claims for the inclusiveness of both men and women across the spectrum of all four temperaments. I have also suggested that the aging prerogatives attributed to the traditionally female, cold-moist temperament, proved necessary for the sustenance of contemporary ideas (and ideals) of femininity which were predicated upon the integrity of the phlegmatic temperament as it was applied to women. This was in spite of the idea that deficient temperaments could be improved and superior temperaments diminished through certain life-styles. Yet the uncertainty surrounding the temperaments and what each signified in terms of a hierarchy of health and longevity, also meant that both sexes could feasibly claim that their temperaments were the most conducive to the production of late old age. Equally, both sexes could claim that their particular temperaments predisposed them to a short life and premature aging. 'Superior' and 'inferior' temperaments could be reinterpreted according to whether these were seen in light of the integrity of an ordered hierarchy, or more obliquely, if not creatively, in terms of the lamp metaphor. Somewhat contradictory, contemporaries viewed the temperaments from both perspectives, with the consequence that complexions which conferred advantages in the aging process to men were surprisingly vulnerable to alteration and decline. Conversely, individuals with colder, 'female' temperaments, found themselves increasingly distant from the elements which contributed most to death and physical destruction: heat and moisture. The non-naturals specifically, and life-style more generally, had the power to change one's temperament for better or worse. The confluence of psychological, physiological and environmental factors which contributed to a given temperament made both a likely possibility.

These ideas extended into the eighteenth century, with the great change being that men were supposed to age sooner than women. This was the consequence not only of

changing models of the body as they applied to both the sexes, but also ideas of gender. The nervous body, which provided the changed template for aging from the humoural system, was also enmeshed in contemporary notions of sexual. Therefore, any conclusions which situate changing notions of age in the innate differences that existed between men and women should be approached with this in mind. Nourished by eighteenth-century liberalism, this too involved the repression of alternative meanings of gender. Ideas about how gender intersected with aging were contingent on varying interpretations of the nervous body. Concepts of fibre-based constitutions were mainly expressed in terms of the incommensurable nature of the sexes, and hence a distinctly sexed path to old age, although this had a certain class element with the valorisation of middle-class domesticity. Eighteenth-century understandings of nervous sensibility were also predicated more firmly along the lines of both gender *and* class, although which class of men and women were predisposed to live long and healthy lives were variously contested throughout the eighteenth century. However, what became apparent by the end of the eighteenth century was just how much age and aging was negotiated not only in terms of the body but also the mind. In the clamour for the prestige of being marked out as having an exquisitely sensitive nervous system, upper-class males distinguished themselves by their intuitive understandings of what best contributed to health and longevity. Men who worked, and worked hard, on the other hand, were deprived of the requisite ability for introspection which regulated aging as a process that was self-produced.

The role of the mind in the regulation of age remained important, along with the ever finer distinctions that were drawn in the aging process along the lines of both class and gender. These ideas also have a strong presence in Chapter 4. This chapter looks at early modern ideas of development and decline in the context of mental faculties and the

expression of the cognitive faculties throughout the life-course. It is to this that we will now turn.

CHAPTER 4: MINDS AND SOULS: CONCEPTS OF DEVELOPMENT, DEFICENCY AND DECLINE IN EARLY MODERN THOUGHT

The beginning of the seventeenth century did not promise much in terms of a broad-ranging discussion of the relationship between the major cognitive faculties and age. Charting the capacities and powers of the human psyche, though important, was initially eclipsed by concerns with the ontology of mind, the integrity of the immaterial soul and the key Christian doctrine of redemption. Consequently, because of the continued emphasis on a soul that was both immaterial and unchangeable, contemporary theologians and philosophers' enquiries into the nature of psychic competence yielded only static conceptions of the human mentality. The taken-for-granted changes in the functioning of mental capacities over time were either traced to the unknowable will of God, or otherwise wedded to vague notions of maturation which relied on the changing nature of the body from childhood to adulthood and old age.

It was only during the late seventeenth century that the same concerns with salvation and redemption were reconciled with a more empirically grounded, dynamic account of the human mind. 'Psyche', 'anima', 'soul', 'mind' and their cognates – sense, imagination, memory and understanding (or intellect) – provided the rich intellectual tapestry against which these discussions would play out.[452] A number of important contemporary figures

[452] Gary Hatfield, 'Psychology as a Natural Science in the Eighteenth Century', *Institute for Research in Cognitive Science,* Vol. 5.1 (1994), pp. 375-391; For eighteenth-century definitions of the terms marked by quotations in this paragraph, see Ephraim Chambers, *Cyclopaedia, or An Universal Dictionary of Arts and Sciences* (London, 1738); Simon Schaffer, 'States of Mind: Enlightenment and Natural Philosophy', in G.S. Rousseau ed., *Languages of Psyche: Mind and Body in Enlightenment Thought* (Berkley, 1990), pp. 233-290; Fernando Vidal, *The Educated Brain: Essays in Neuroeducation* (Cambridge, 2008), p. 29; Daniel Garber and Michael Ayers, *The Cambridge History of Seventeenth-Century Philosophy,* Vol. II (Cambridge, 1998), p. 953; Roger Smith, 'The History of Psychological Categories', *Studies in History and Philosophy of Biological and*

pioneered approaches to the mind that accommodated the idea that mental capacities – their development and decline - were relational to the life-cycle. Collectively, these theorists contributed to the idea that mental competence was learnt. The most famous contributor to this idea was John Locke. Locke famously held that man entered the world as a *tabula rasa* and that all he would come to know would be the result of experience. He left room for the possibility that the foetus, once its sensory apparatus was developed, came into the world with certain primitive ideas, but on no account should these be considered innate. Since knowledge is material, initially the infant could not possibly have had experience with things prior to birth. Nor for that matter can an adult have ideas about things which had not entered the senses first.[453] Locke's *oeuvre* has rightly been singled out for its importance to the history of childhood and pedagogical theory.[454]

Biomedical Sciences, Vol. 36.1 (2005), pp. 55-94; Gary Hatfield, 'Remaking the Science of Mind: Psychology as Natural Science', in Christopher Fox, Roy Porter and Robert Wokler eds., *Inventing Human Science: Eighteenth-Century Domains* (Berkley, 1995), pp. 184, 196; Gary Hatfield, *The Natural and the Normative: Theories of Spatial Perception from Kant to Hebnholtz* (Cambridge MA, 1990), pp. 12, 29-30, 64-65; L.W.B. Brockliss, *French Higher Education in the Seventeenth and Eighteenth Centuries: A Cultural History* (Oxford, 1987), pp. 185-227; J.G. Buickerood, 'The Natural History of the Understanding: Locke and the Rise of Facultative Logic in the Eighteenth Century', *History and Philosophy of Logic,* Vol. 6.1 (1985), pp. 157-190; Daniel N. Robinson, *An Intellectual History of Psychology* (New York and London, 1981), p. 217; John Locke, *An Essay Concerning Human Understanding. In Four Books* (London, 1690).

[453] Robinson, *An Intellectual History of Psychology*, p. 217; Locke, *An Essay Concerning Human Understanding*, pp. 1-45.

[454] Margaret J. M. Ezell, 'John Locke's Images of Childhood: Early Eighteenth Century Response to Some Thoughts Concerning Education', *Eighteenth-Century Studies,* Vol. 17.2 (1983-1984), pp. 139-155; J.H. Plumb, 'The New World of Children in Eighteenth-Century England', *Past and Present*, Vol. 67 (1975); Philippe Aries, *Centuries of Childhood*, trans. Robert Baldick (London, 1962); Lloyd de Mause, *The History of Childhood: Untold*

At the same time, given his emphasis on the necessity of experience, and 'ideas about things which had not entered the senses first', Locke never quite established his developmental paradigm as applicable to all.[455] Indeed, his theories, and that of his contemporaries and successors, often went against the grain of the idea that mental capacities, as they related to early modern men and women, always unfolded in an orderly fashion.

The first part of this chapter looks at the origins of developmental theories of the mind as they were made famous by Locke. I will also illustrate how these ideas were expanded upon by eighteenth-century philosophers and theologians. In the first part of Chapter 4, I will also consider how these ideas related to gender. Indeed, as I will demonstrate from contemporary writings on this subject, question marks remained over whether women could reach the same level of mental competence as men. Whether men and women had an equal capacity for rational thought was greatly contested. Some contemporary ideas of the mind and its capacity for 'rational' and 'intelligent' thought often assumed an oppositional character. This involved the assertion of the superior male mind over the inferior female one. Other contemporary writers highlighted the potential for equality in the minds of the sexes, if they were afforded the same training and educational opportunities. These ideas also changed over time as ideas of gender changed too. As we shall see in the second part of this chapter, however, where I analyse early modern constructions of 'idiocy', there was no such thing as a universally superior male mind however theorists constructed this as part of an opposition with the inferior female mind. Broad-based definitions of idiocy were inclusive of vast swathes of the population,

---

Story of Child Abuse (London, 1962); Randolph Trumbach, *The Rise of the Egalitarian Family: Aristocratic Kinship and Domestic Relations in Eighteenth-Century England* (New York, 1978).

[455] Locke, *An Essay Concerning Human Understanding* (London, 1690), pp. 8, 37-38, 44, 55-57.

in contrast to what we will see by the end of this chapter as the elitist nature of developmental paradigms as they were expounded by Locke and others. As well as its application to congenital disorders, idiocy also encompassed the idea that cognitive power was lost in old age. The first part of this chapter will look at the origins and nature of developmental paradigms as they emerged out of ideas of the immaterial soul in the seventeenth century. It is to this that we will now turn.

From Soul to Mind: Developmental Paradigms and Gender in Seventeenth- and Eighteenth-Century Thought

During the early modern period the soul was considered the site of thought, reflection, deliberation and the imagination.[456] Theories regarding the nature of the soul, were, for the sake of simplicity, generally divided between those who viewed the soul as immaterial and imperishable and those who viewed it as material and perishable. The immaterial and imperishable soul dominated most of Western history.[457] In the latter conception, the soul as the self was viewed by many seventeenth- and eighteenth-century philosophers and theologians as a simple immaterial substance that maintained unity over time and was naturally immortal. Thus, 'development' within the limits of the immaterial soul was little different from 'change'. This was unacceptable to the not insignificant number of contemporaries who believed that the psychic break 'change' this hinted at could only leave the fragmented soul wandering around the ether of the

[456] Giuseppi Santoro, Mark D. Wood, Lucia Merlo, Giuseppi Pio Anastasi, Francesco Tomasello and Antonino Germanò, 'The Anatomic Location of the Soul from the Heart, Through the Brain, To the Whole Body, and Beyond: A Journey Through Western History, Science, and Philosophy', *Neurosurgery,* Vol. 65.4 (2009), p. 634.

[457] Santoro et al., 'The Anatomic Location of the Soul', p. 642; Thomas M. Lennon, 'Bayle and Late Seventeenth-Century Thought', in John P. Wright and Paul Potter eds., *Psyche and Soma: Physicians and Metaphysicians on the Mind-Body Problem from Antiquity to Enlightenment* (Oxford, 2000), pp. 197-198.

after-life with no hope of eventual, eternal salvation. Souls, therefore, were viewed as uniform, regardless of age and psycho-social competence. In a reflection of this position one contemporary postulated that 'The soul of a new born child is the same, as that of an old man; and that of a fool, as that of a philosopher'. Another simply stated that all souls 'are equal to Sir Isaac Newton's'. Because of the continuity which immateriality brought to understandings of the life-cycle, souls, regardless of age, were thought of as uniform, unchanging, and ultimately unchangeable.[458]

Varying levels of psychic competence were, given the nature of the Procrustean bed that was the immaterial soul, either referred to divine providence or proffered as a by-product of physiological change. According to the first explanation, the intellectual properties that applied to any given individual were determined by God at the time of conception, through what were termed 'divine laws of connection'. The particular

[458] John P. Wright and Paul Potter, 'Introduction', in Wright and Potter eds., *Psyche and Soma*, p. 5; Timothy Nourse, *A Discourse upon the Nature and Faculties of Man in Several Essayes: With Some Considerations upon the Occurrances of Humane Life* (London, 1686), pp. 6-10; Nicholas Mosely, *Psychosophia or, Natural and Divine Contemplations of the Passions and Faculties of the Soul of Man. In Three Books* (London, 1653), pp. 35-37; Sir George MacKenzie, *Religio Stoici* (London, 1663); Alexander Ross, *Arcana Microcosmi, or, The Hid Secrets of Man's Body Discovered in an Anatomical Duel between Aristotle and Galen Concerning the Parts thereof* (London, 1652), p. 53; Raymond Martin and John Baresi, *Naturalization of the Soul: Self and Personal Identity in the Eighteenth Century* (London, 2000), p. 14; Edward Holmes, *An Attempt to Prove the Materiality of the Soul, by Reason and Scripture* (Newcastle, 1789), p. 63; Walter Charlton, *A Natural History of the Passions* (London, 1701), pp. 64, 67; William Smith, *A Dissertation Upon the Nerves; Containing an Account* (London, 1768), p. 103; Nicolas Malebranche, *Father Malebranche his Treatise Concerning the Search After Truth. The Whole Work Complete. To Which is Added the Author's Treatise of Nature and Grace ... All translated by T. Taylor* (London, 1700), p. 129; John Turner, *A Physico-Theological Discourse Upon the Divine Being, or First Cause of All Things* (London, 1698); Charles Collignon, *An Enquiry into the Structure of the Human Body, Relative to Its Supposed Influence of the Morals of Mankind* (Cambridge, 1764), pp. 100-101.

construction of the inner worlds of individuals, therefore, 'proceeded neither from the necessity of material causes, nor the blind shuffles of an imaginary chance, but from an intelligent and good being, that formed it that particular way out of choice and design'.[459] Simply put, souls were like torches or candles, some of which 'burn brighter, and some fuel cast more heat and light that others; so the splendour of every soul shines in a different way'.[460] Thus, not all 'souls are equal, and that all men had souls alike to judge or reason with ... For as torches and lights, some shine more than others do, and give more light ... so the souls of men are of a different light, and the minds of men are far distant in gifts one from another'.[461] In keeping with this view, the physician, Thomas Morgan postulated that 'Intelligence, as well as sense, has its natural laws and boundaries, which it cannot pass; and these laws are the will and established constitution of the deity, acting constantly, steadily, and uniformly upon the principles of perfect order, truth, wisdom, and universal good'.[462] According to this theory, whilst God made all souls equal, he was also responsible for the discrete connections between the individual body and individual soul, varying the levels of psycho-social competence from one person to the next.

Another way in which the differences between the minds of individuals were explained was though the body, especially in philosophical and medical discourses. Cognitive

[459] Richard Bentley, *The Folly and Unreasonableness of Atheism Demonstrated from the Advantage and Pleasure of a Religious Life, The Faculties of Humane Souls* (London, 1699), pp. 242, 245.

[460] John Maubray, *The Female Physician, Containing All the Diseases Incident to that Sex, in Virgins, Wives, and Widows* (London, 1724), pp. 10-11

[461] Levinus Leminus, *The Secret Miracles of Nature in Four Books. Learnedly and Moderately Treating of Generation, and the Parts Thereof* (London, 1658), p. 43.

[462] Thomas Morgan, *Physico-Theology, or, A Philosophico-Moral Disquisition Concerning Human Nature, Free Agency, Moral Government, and Divine Providence* (London, 1743), p. 95.

functions were therefore explained in purely somatic terms. This involved pitting a dynamic body against an unchanging soul so that 'the Soul itself, suffered not at all, but only the functions of it flourish or decay accordingly'.[463] This way of thinking about the mind was usually faithful to ideas of the immaterial soul and the premise that all individuals were naturally endowed with innate ideas about the world from the time of their birth. Furthermore, although individuals possessed the potential for rationality, it was only through the growing organisation of the body that this potential was realised.[464] The body, according to this way of thinking, both restrained and facilitated the expression of reason and rationality. In a young child 'the soul hath need of organs and instruments of the body, to work withal, and that these Instruments are too weak, and little fit to exercise the operations of vegetation first, because those organs are first fitted and prepared, and afterwards the operations of sense and reason'.[465] It was only when bodily matter was 'refined and wrought up in a proper system' was it 'vastly more adapted for the use and society of the soul'.[466] When the body stopped growing it reached the stage of physiological maturity which was considered necessary to support the emergence of rationality, reflective thinking and consciousness.[467] Eighteenth-century doctors also advised that taking care of the body allowed for improvements in mental

[463] John Turner, *A Physico-Theological Discourse* (London, 1698), p. 98.

[464] MacKenzie, *Religio Stoici*; Ross, *Arcana Microcosmi*, p. 53; Thomas Stanley, *The History of the Chaldaick Philosophy* (London, 1662), pp. 25-27.

[465] Mosely, *Psychosophia,* p. 37.

[466] Anonymous, *An Enquiry into the Nature of the Human Soul, its Origin, Properties, and Faculties* (London, 1750), p. 8.

[467] Sir Alexander Crichton, *Enquiry into the Nature and Origin of Mental Derangement. Comprehending A Concise System of the Physiology and Pathology of the Human Mind,* Vol. 1 (London, 1798), p. 239. For details of the faculties associated with 'mature' thought, see pp. 386-407 in Crichton's volume.

powers: 'the perfection ... of the intellectual facilities', argued George Cheyne, was dependent on the 'soundness and health of the bodily machin', i.e. 'proper organs, springs, ropes, and pipes'. Another contemporary wrote that the effective functioning of the mind was dependent on 'the power of the faculties, whose exercise are the more conspicuous, the more the finest fibres of the brain, in which they lie enveloped'. The notion that the coarse body prevented the hidden powers of the soul from living up to its potential was subsumed in ideas of temperance and the sparse diet necessary to improve the functioning of the mind: slender, scant, thin, delicate fibres, make an incisive mind and gross and fat ones obstructed thinking. What this boiled down to, was the less there was of the body, the more efficient the functioning of the mind.[468]

Running parallel to these rather static conceptions of psycho-social competence was the growing belief amongst some contemporary theorists that the mind could be subjected to empirical investigation. Instead of seeing mental capacities as something triggered by either supranatural or bodily conditions, some writers began to see mental competence as something that was gained through experience. Although this idea did not properly originate with John Locke, the reading public who read his ideas in droves certainly

[468] Anonymous, *An Essay on the Soul of Man* (London, 1744), pp. 3, 34; Richard Blackmore, *A Treatise of the Spleen and Vapours; or Hypochondriacal and Hysterical Affections* (London, 1725), pp. 256-257; George Cheyne, *An Essay on Regimen. Together with Five Discourses, Medical, Moral and Philosophical* (London, 1740), pp. 161, 166; George Cheyne, *The Natural Method of Cureing Diseases of the Body, and the Disorders of the Mind Depending on the Body* (London, 1742), p. 82; Nicholas Robinson, *A New System of the Spleen, Vapours, and Hypochondriack Melancholy: Wherein all the Decays of the Nerves, and Lownesses of the Spirits, are Mechanically Accounted for* (London, 1725), p. 31; For more on the improvement of the mind in relation to the body, see Réne Descartes, *The Philosophical Writings of Descartes,* Vol. 1, trans. John Cottingham, Robert Stoothoff and Dugald Murdoch (Cambridge, 1984), p. 143.

believed this to be the case.[469] Amongst his contemporaries, however, Locke's ideas were popular for all the wrong reasons. Because he abandoned the concept of 'innate ideas', a stable idea of the immaterial soul, the 'materialist' and 'atheistic' overtones of his theories forestalled any positive engagements with his work until the middle of the eighteenth century. Locke's approach was nevertheless faithful to conventional theology. He accepted that people survived their bodily deaths and were justly rewarded or punished for what they had done during their lives. To show that there was such a being, or at least one prior to physical death, Locke demonstrated how persons originated in the process of normal human development. He achieved this by explaining how the individual was the by-product of the development of reflexive consciousness.[470] A constituent part of his idea was that the mind at birth was a *tabula rasa* which progressively acquired more sophisticated ideas and principles. This constituted a significant break with the concept of innate ideas. The mind, beginning with Locke, could be properly said to develop. He deployed the *tabula rasa* metaphor to specify that the newly-born child did not begin with determinate, explicit knowledge. Instead, such

[469] Ezell, 'John Locke's Images of Childhood', p. 141.

[470] Akihito Suzuki, 'Anti-Lockean Enlightenment?: Mind and Body in Early Eighteenth-Century English Medicine', *Clio Medica,* Vol. 29 (1994), pp. 342-343, 337; Nicholas McDowell, 'Dead Souls and Modern Minds? Mortalism and the Early Modern Imagination, from Marlowe to Milton', *Journal of Medieval and Early Modern Studies,* Vol. 40.3 (2010), p. 566. Noted criticisms of Locke on the basis of his atheistic leanings were made by Bishop Butler, John Sergeant, Samuel Clarke and Thomas Reid. Joseph Butler, *Analogy of Religion, Natural and Revealed, to the Constitution and Nature* (London, 1736); John Sergeant, *Solid Philosophy Asserted, Against the Fancies of the Ideists* (London, 1697); Howard M. Ducharme, 'Personal Identity in Samuel Clarke', *Journal of the History of Philosophy,* Vol. 24.3 (1986), pp. 359–83; A. Flew, 'Locke and the Problem of Personal Identity', *Philosophy*, Vol. 26 (1951), pp. 359–383; Thomas Reid, *Essays on the Intellectual Powers of Man*, ed., Derek R. Brookes (Pennsylvania, 2002); Martin and Baresi, *Naturalization of the Soul,* p. 19.

knowledge is formed through the combination of sensory experiences with the innate capacity of the mind for certain mental operations, like comparing and abstracting. Locke also suggested that innate capacities, which allowed for judgement, must be engaged for there to be any understanding of the meaning of such sensory experiences. He also argued that knowledge was accumulated from the ability to distinguish between experiences and abstract from them.[471]

As noted above, Locke's theories were not completely integrated into contemporary discourse on the mind until the mid-eighteenth century. From this point onwards, a number of theorists developed his concepts further. The idea, for example, that experience and not age alone was responsible for cultivating mental development was also situated in contemporary discourses about memory and speech. Each of the latter was considered important for developing mental competence. In his *Essays on the Intellectual Powers,* Thomas Reid observed that 'In the gradual progress of man, from infancy to maturity, there is a certain order in which his faculties are unfolded ... The external senses appear first: memory soon follows'. Reid then distinguished between the senses and memory on the grounds that the senses 'give us information of things only as they exist in the present moment', while memory gives us 'immediate knowledge of things past'. He also suggested that infants, before they acquired the capacity to reflect

[471] Locke, *An Essay Concerning Human Understanding,* pp. 15, 55; John Locke, *Some Thoughts Concerning Education* (London, 1693), pp. 31, 41, 81, 186; Martin and Baresi, *Naturalization of the Soul,* p. 23; Garber and Ayers, *The Cambridge History of Seventeenth-Century Philosophy,* p. 985; Robinson, *An Intellectual History*, p. 257; William Payne, *Learning and Knowledge Recommended to the Scholars of Brentwood School in Essex; In a Sermon Preached at their First Feast, June 29. 1682* (London, 1682), p. 11; Robert Duschinsky, 'Tabula Rasa and Human Nature', *Philosophy,* Vol. 87.4 (2012), pp. 509-529; John W. Yolton, 'Locke's Man', *Journal of the History of Ideas,* Vol. 62.4 (2001), p. 679.

on their own thoughts, tended to be totally absorbed in their perceptions and may not then distinguish memory from imagination, but that later, they were able to distinguish between perception, memory and the imagination.[472] Nevertheless, mental development was impeded when an individual was denied the stimulus of images, sights and sounds and did not have 'objects to enlarge their knowledge'. Equally, when individuals were deprived of speech they were unable to exercise important mental faculties. Without an understanding of speech and language, mnemonic retention was poor and memories were reconstituted as a fleeting series of images of equal unimportance. Because there was no way of developing a biography based on a linear sequence of events, a clear concept of self could not develop. If individuals did not continuously use these faculties they would fail to develop the capacity for rational and abstract thought. At best, 'many years elapse before the reasoning faculties are matured, even by careful cultivation'.[473]

As well as a greater emphasis on experience rather than innate ideas, mid eighteenth-century theorists managed to overcome many of the objections that had previously dogged interpretations of Locke's works. David Hartley, the son of a minister, blended physiology (vibrations in the brain), psychology (the association of ideas), Christian theology and empirically grounded speculations about the way mental systems worked and complex behaviours developed. Adding a more explicitly theological bent to Locke's 'atheistic' ideas, Hartley explained how a child's understanding of God, as a man like any

---

[472] Thomas Reid, *Essays on the Intellectual Powers of Man* (London, 1785), pp. 339-340, 344; Martin and Baresi, *Naturalization of the Soul,* pp. 127, 129; Samuel Johnson, *The Elements of Philosophy: Containing, I. The Most Useful Parts of Logic, Including both Metaphysics and Dialectic, or the Art of Reasoning* (London, 1754), p. 101.

[473] Smith, *A Dissertation Upon the Nerves*, pp. 106-108; James Mattrick Adair, *A Philosophical and Medical Sketch of the Natural History of the Human Body and Mind. To which is Subjoined, An Essay on the Difficulties of Attaining Medical Knowledge* (Bath, 1787), pp. 56-75, 217; Morgan, *Physico-Theology*, p. 78.

other, expanded to accumulate a slew of further, stronger, secondary ideas, eventually ceding to the reality as he saw it, 'that God cannot be seen, having no visible Shape, no Parts: but that he is a spiritual infinite being'.[474] Joseph Priestley, a follower of Hartley, also committed himself to what we would now term a gradualist position of cognitive development. Priestley supposed that children, unlike adults, were incapable of experiencing second-order reflections and as a consequence, their emotions were 'less complex'. Infants only gradually learnt adult modes of thinking, including the ability to conceptualise themselves as separate from the world. In postulating that children only gradually acquired the concept of themselves, he invited others to expand upon the idea that the self was something that was only gradually acquired. Priestley's student, William Hazlitt, responded in the nineteenth century. Hazlitt, who was also heavily indebted to Locke, theorised that the concept of self was inextricably bound to the growth of selfish motives in humans. He came to the conclusion that when very young children behaved selfishly it was because they were more acutely aware of what gave them pleasure. In older children and adults, selfish behaviour was under the control of a more coherent, well-rounded notion of the self. This development happened in three stages: firstly, young children acquired an idea of themselves as capable of experiencing both pleasure and pain. Secondly, children included their own pasts in their notions of self, and thirdly, they included their own futures.[475]

---

[474] David Hartley, *Observations on Man, His Frame, His Duty and His Duty and His Expectations* (London, 1749), pp. 475, 486-8; Martin and Baresi, *Naturalization of the Soul,* pp. 111-114.

[475] Joseph Priestley, *An Examination of Dr. Reid's Inquiry into the Human Mind on the Principles of Common Sense* (London, 1774); Joseph Priestley, *Hartley's Theory of the Human Mind on the Principle of the Association of Ideas* (London, 1775); Joseph Priestley, *Disquisitions Relating to Matter and Spirit. To Which is Added, the History of the Philosophical Doctrine Concerning the Origin of the Soul* (London, 1777); Joseph Priestley, *The Doctrine of*

Whilst developmental theories became a mainstay of mid eighteenth-century thought on the mind, questions remained about the applicability of such concepts to women. Previous to Locke, such questions were conceptualised within understandings of the humoural body and the immaterial soul. Until the eighteenth century, intellectual traits were grounded in women's allegedly cold and moist bodily complexion. According to this interpretation, the malleable nature of a woman's mind 'constituted the most visible manifestation of her mental inferiority'. Women were alleged to have less aptitude for active traits, such as courage, so they were also branded inferior to men in active intellect, including the exercise of speculative reason. Writers intent on restricting the educational opportunities of women also conflated 'delicacy' with 'weakness' and made it key to feminine character and intellect.[476] There were other, more positive conceptions of the female mind that conflicted with notions of women's mental inferiority, however, and these too were compatible with certain tenets of humoural theory. In some quarters, the softness of the female constitution was considered more suitable to cerebral pursuits than the dryness and hardness of the male constitution. By separating Aristotelian from

---

Philosophical Necessity Illustrated; Being an Appendix to the Disquisitions Relating to Matter and Spirit (London, 1777); Martin and Baresi, *Naturalization of the Soul,* pp. 135-136, 143-144; William Hazlitt, *An Essay on the Principles of Human Action: Being an Argument in Favour of the Natural Disinterestedness of the Human Mind* (London, 1805), pp. 34-35.

[476] Ian Maclean, *Woman Triumphant: Feminism in French Literature 1610-1652* (Oxford, 1977), pp. 11-19; Ian Maclean, *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life* (Cambridge, 1980), pp. 15, 51, 64; Ludmilla Jordanova, 'Naturalizing the Family: Literature and Bio-Medical Sciences in the Late Eighteenth Century', in Ludmilla Jordanova eds., *Languages of Nature: Critical Essays on Science and Literature* (London, 1986), pp. 20-25; Lorraine Daston, 'The Naturalized Female Intellect', *Science in Context,* Vol. 5.2 (1992), pp. 215-216; Michéle Cohen, *Fashioning Masculinity, National Identity and Language in the Eighteenth Century* (London, 1996), p. 80.

Galenic discourse, which was key to furthering the idea that women were not mentally deficient, some theorists refuted the view that women were monsters of nature. The Aristotelian viewpoint established the pervasive idea that the 'organs' of both sexes were 'similar and equal'.[477] Other contemporaries exploited the idea, originally proposed by Augustine of Hippo, that because both sexes had been created in the image of God, both possessed a rational soul. Some capitalised on the vagueness of the term 'soul' to assert that the 'mind has no sex'. Agrippa went on to suggest that 'all things are thus equal between men and women with respect to the soul, which is the intelligent part and that which makes learned men and philosophers'.[478]

The continuity in emphasis on a soul which was both immaterial and unchangeable also provided a particularly sound basis for contemporaries to argue that women were endowed with the equivalent of a rational, 'male' soul. Before the revolutionary contributions of prominent theorists like Descartes and Locke, this view was based on a theology of indifference. Individual and group differences, in terms of mental capacities, hardly featured at all in early seventeenth-century discussion. The apathy can be explained by what most philosophers and theologians regarded as the more important task of categorising the salient traits of humans and animals and how the species related. Although degrees of superiority and inferiority in the 'liveliness of our conceptions' or in the 'speed of mental combinations' were noted by contemporaries, 'uniformities rather

---

[477] Schiebinger, *The Mind has No Sex?,* pp. 166-168.

[478] Heinrich Cornelius Agrippa von Nettesheim, *Female Pre-eminence, or, The Dignity and Excellency of that Sex above the Male ... Done in English with Additional Advantages. By H.C* (London, 1670), pp. 1-13; Plato, *Plato his Apology of Socrates, and Phaedo, or, Dialogue Concerning the Immortality of Mans Soul* (London, 1675); Pierre Le Moyne, *The Gallery of Heroick Women written in French by Peter Le Moyne of the Society of Jesus; translated into English by the Marquesse of Winchester* (London, 1652); Schiebinger, *The Mind has No Sex?,* pp. 168-169.

than deviations, shared mechanisms rather than individual differences, commanded center stage'.[479] This view was buttressed by late seventeenth-century developments in neuroanatomy. Thomas Willis, the foremost pioneer in the field, presented a non-sexed human body as part of a complex set of interactions that involved the cerebral cortex, cerebellum and cranial nerves.[480]

Rene Descartes, a contemporary of both Willis and Locke, also expanded upon the idea that the minds of men and women shared an equal capacity for rational thought. He posited that any differences between the intellectual capacities of the sexes could be eradicated by the right method of education. Paul Hoffmann has credited Descartes with overturning the misogyny that was an inherent part of the ancients' conception of women and the nature of female physiology. Descartes arrived at the conclusion that the minds of the sexes were equal in their potential for development by proposing the separation of the body from the soul. This meant that contemporary theorists could no longer rely on the perceived weaknesses of the female body to explain the inferiority of the female mind. Although Descartes was by no means the first to propound a clear delineation between mind and body, his ideas were of utmost importance in undermining the theory that because women were temperamentally colder than men (where this applied), they also had less reason. If the mind operated independently of the body, as he suggested, then the deficiencies and weaknesses traditionally associated with

---

[479] Daston, 'The Naturalized Female Intellect', pp. 213-214; Thomas Reid, *Essays on the Intellectual Powers of Man*, ed., Derek R. Brookes (Pennsylvania, 2002), p. 540.

[480] James P. B. O'Connor, 'Thomas Willis and the Background to *Cerebri Anatome', Journal of the Royal Society of Medicine,* Vol. 96.3 (2003), pp. 139-143; Thomas Willis, *Willis' Oxford Lectures,* trans. and ed., Kenneth Dewhurst (Oxford, 1980); Robert L. Martensen, *The Brain Takes Shape: An Early History* (Oxford, 2004), pp. 160-161.

the female body did not automatically lead to a deficient, lesser mind, when compared to men's. In short, minds were created (at least in the realm of potentiality) to be equal. Cartesian dualism and the burgeoning science of neuroanatomy also allowed many contemporary women to argue that if there was any defect in women's ability to reason it was not the result of their innate physical weakness. As Mary Astell wrote in her 'Essay in Defence of the Female Sex' (1696): 'If there be any defect in women it cannot be in the Body (if I may credit the report of learned Physicians) for there is no difference in the Organ of those Parts, which have any relation to, or influence, over the Minds'.[481] Mary Wollstonecraft also responded to the charge that women were deficient in their ability to reason by pointing out that some women surpassed men in their abilities, and any shortcomings were the result of an inadequate education.[482]

Wollstonecraft and Astell's arguments about women's potential for developing the capacity for rational thought should have fit neatly with Locke's ideas of the mind as a *tabula rasa* that was transformed by experience. As it turned out this was not necessarily

---

[481] Réne Descartes, *Oeuvres de Descartes*, eds., Charles Adam and Paul Tannery (London, 1964-1974), Vol. 1, p. 2, Vol. 11, pp. 516-528; Michéle Le Doeuff, 'Women and Philosophy', *Radical Philosophy,* Vol. 17 (1977), p. 5; Paul Hoffmann cited in Schiebinger, *The Mind Has No Sex?,* pp. 174, 171-173; In defence of the female intellect, Margaret Cavendish, Duchess of Newcastle, Queen Christine of Sweden and Elizabeth of Bohemia all engaged with Cartesian ideas. Ruth Perry, 'Radical Doubt and the Liberation of Women', *Eighteenth-Century Studies,* Vol. 18.4 (1985), pp. 472-493; Willis, *Willis' Oxford Lectures,* pp. 160-161; Mary Astell, *An Essay in Defence of the Female Sex* (London, 1696), p. 13; Londa Schiebinger, 'Skeletons in the Closet: The First Illustrations of the Female Skeleton in Eighteenth-Century Anatomy', in Christine Gallagher and Thomas Laqueur eds., *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century* (Berkeley, 1987), p. 47; Martensen, *The Brain Take Shape*, pp. 160-161.

[482] Mary Wollstonecraft, *The Vindications: The Rights of Men and The Rights of Woman,* eds., D.L. Macdonald and Kathleen Scherf (Ontario, 1997, First published in London, 1792), p. 131.

the case. Whilst Locke's comments in *Thoughts on Education* (1693) reflected positively on women's potential for rational thought, he regarded experience as key in the transformation of the blank slates of the minds of the sexes into the intellectual equality which he envisaged. Locke, however, thought that women might never gain the sufficient experience to place them on par with men intellectually, because of the needs of a 'conjugal society' and their place within it. In other words, whilst males and females had similar capacities for highly developed thought, women's experiences – the pain of childbirth, the duration and frequency of pregnancy and the long dependency of children, which helped to dictate the form of conjugal society – precluded her from taking the time for doing so.[483] Thus despite the uniqueness of Locke's theorising on mental development, he drew on the rather old idea that pure abstract reason had to be separated from the demands of the body and also ordinary life. This idea in turn fed into pre-existing philosophical ideas that 'truth-seeking' must be separated from the practical routines of everyday life, which, to a certain extent, already underwrote distinctions between men and women.[484]

Running parallel to Locke's powerful ideas about the incommensurable nature of male and female thought was an equally important re-evaluation of the nature of the emotions as fundamentally opposed to reason, and as a harbinger of psychological stasis. Traditionally women were associated with the emotions and men with rational thought. Nevertheless, many writers argued that the emotions, as a constituent part of human motivation, did not allow for an easy privileging of the rational mind over the non-rational body. Instead, the passions began to be regarded as 'finely tuned perceptions of

[483] Melissa A. Butler, 'Early Liberal Roots of Feminism: John Locke and the Attack on Patriarchy', *The American Political Science Review,* Vol. 72.1 (1978), pp. 148-149.

[484] Geneviéve Lloyd, *The Man of Reason. 'Male' and 'Female' in Western Philosophy* (London, 1984).

our individual self-interest ... not so much the emotional background on which thought is superimposed, but rather an integral part of our thinking'.[485] Mary Wollstonecraft and Mary Astell embraced similar arguments about the intellectually stimulating power of the emotions to refute Locke's arguments about the uneducable nature of women who were bound to the reproductive prerogatives of their sex. Although both women attacked the male principles upon which rationality was grounded, it was a position that seemingly benefited only women from the middle and upper classes. This was not only the case because women of a more elevated status were more likely to access the educational opportunities that were an essential part of developing the mind.[486] Wollstonecraft, in particular, believed that women from the lower orders were excluded from developing the capacity for rational thought because their whole existence and identity was grounded in their primarily corporeal nature. The working-class woman, as Julie McGonegal argues, was constructed in Wollstonecraft's text as either a 'sexually provocative wanton' or a 'stalwart worker'. Her identity was effectively 'reduced to her body – the marker of her social class – and evaluated by its accordance with moral criteria'.[487]

Traditionally, scholars have associated the mind/body distinction with males and females, with masculinity aligned with the more privileged and valued side of the

[485] Susan James, *The Emotions in Seventeenth Century Philosophy* (Oxford, 1997); Genevieve Lloyd, 'The Emotions in the Seventeenth Century', *British Journal of the History of Philosophy,* Vol. 8.1 (2000), pp. 141-147.

[486] Karen Jones, 'Gender and Rationality', in Alfred R. Mele and Piers Rawling eds., *The Oxford Handbook of Rationality* (Oxford and New York, 2004), pp 301-302; Mary Astell, *A Serious Proposal to the Ladies for the Advancement of Their True and Great Interest* (New York, 1970, First Published 1694), p. 90; Wollstonecraft, *The Vindications*, p. 131.

[487] Julie McGonegal, 'Of Harlots and Housewives: a Feminist Materialist Critique of the Writings of Wollstonecraft', *Women's Writing,* Vol. 11.3 (2004), p. 349.

contrast (the mind).[488] Wollstonecraft, somewhat differently, utilised this dichotomy to elucidate the differences between women, with upper-class females erring on the side of mind and working-class women gravitating towards the body.[489] The basis for distinctions that separated superior and inferior women along these lines assumed the unquestionable weaknesses of the female body when compared with the female mind. For this reason, some, like Wollstonecraft, felt that women could only stake a claim to rational thought by denying the corporeal side of their nature. Nevertheless, not all prominent early modern women thought that equality with men could only be gained by denying the characteristics of their sex. For some, like the famous philosopher Anne Conway and the seventeenth-century author, Lucrezia Marinella, the key to effectively arguing this point lie in embracing their femininity rather than denying it. Conway described thought as both masculine and feminine in the sense that it could not exist if it were not embodied. She drew upon her own life experiences as a woman, and her experiences of pain as positive proof of these connections. Conway concluded that 'the distinction between spirit and body is only modal and incremental, not essential and substantial'. Marinella, on the other hand, went so far as to suggest that it was men, captivated by the beauty of women, who most clearly made the case for the potential of the female mind. Such a view depended upon the notion that the body reflected the brilliance of the soul. The beauty of women's bodies, therefore, reflected the superiority

[488] Londa Schiebinger, 'Has Feminism Changed Science?', *Signs,* Vol. 25.4 (2000), pp. 1171-1175.

[489] Lloyd, *The Man of Reason,* p.104; Geneviéve Lloyd, 'Maleness, Metaphor, and the "Crisis" of Reason', in L. Antony and C. Witt eds., *A Mind of One's Own: Feminist Essays on Reason and Objectivity* (Boulder, 1993), pp. 73-92.

and perfection of their minds. If women were so imperfect, why would men constantly gaze upon them, she wondered?[490]

As the above, suggests, the idea that the body was instrumental in cultivating the mind's potential ebbed and flowed throughout the seventeenth and eighteenth centuries. With eighteenth-century concepts of nervous sensibility, the importance of gender in determining the cognitive potential of both men and women was once more emphasised. Interpretations of nervous sensibility determined that the most intelligent individuals had '*more* nerves, *more* neural pathways, *more* exquisitely developed fibres and muscles capable of ever-finer graduations and distinctions than the average person'. Definitions of sensibility were also understood as a combination of the following syllogisms: that the soul was limited to the brain, the brain performed the work of the nerves and the more 'exquisite' and 'delicate' one's nerves were, the greater the ensuing degree of sensibility and imagination. As we have already seen in previous chapters, refined people were deemed to have been born with more 'exquisite' anatomies. The tone and texture of their nervous systems were also more 'delicate' than those of the lower classes. Sensibility, with its connotations of brisk, witty, and energetic exposition, also conformed more readily with eighteenth-century definitions of intelligence which was defined in terms of speed rather than depth of thought. Speed was an indicator of social as well as

[490] Paula Finden, 'Ideas in the Mind: Gender and Knowledge in the Seventeenth-Century', *Hypatia,* Vol. 17.1 (2002), pp. 183-196; Anne Conway, *The Principles of the Most Ancient Philosophy,* trans. and eds., Allison P. Coudert and Taylor Corse (Cambridge, 1996), p.39; Lucrezia Marinella, *The Nobility and Excellence of Women and the Defects and Vices of Men,* trans. and eds., Ann Dunhill and Letizia Panizza (Chicago, 1999), pp. 54, 81, 83.

psychological status. Typically, the most sensible were well bred, more intelligent and more 'nervous', than the 'thick-skinned (and often thick-headed) labouring masses'.[491]

Sensibility was inclusive of both men and women from the upper classes but it was within a distinctly female imagery that the characteristics of the 'nervous' type were subsumed. The archetype was a feminine-like character that was small-boned, white-skinned, with 'soft and yielding flesh'. 'She', was also fat rather than muscular, with a low, soft voice. In Samuel Richardson's best seller *Clarissa,* for instance, the heroine dies because of her nervous sensibility: 'The origin of your disorder', the doctor tells Clarissa, is that 'you were born with weak Nerves ... and then the Nerves have been wasted and relaxed by your sedentary life and *thinking attentively*'. As Robert Whytt wrote in 1765: 'In some, the feelings, perceptions and passions are naturally dull, slow and difficult to be aroused ... in others the opposite is the case on account of a greater delicacy and sensibility of the brain and nerves'. George Cheyne also argued that 'Persons of slender and weak Nerves are generally of the first Class: the Activity, Mobility and Delicacy of their Organs make them so'. He further went on to say that nervous debility only attacked persons of the upper classes, 'the brightest and most spiritual, and whose Genius is most keen and penetrating'.[492]

---

[491] George S. Rousseau, *Nervous Acts: Essays on Literature, Culture and Sensibility* (Basingstoke, 2004), pp. 171, 253-255, 56, 41; Anita Guerrini, 'The Hungry Soul: George Cheyne and the Construction of Femininity', *Eighteenth-Century Studies,* Vol. 32.3 (1999), pp. 281, 285; George Cheyne, *An Essay of Health and Long Life* (London, 1724); George Cheyne, *The English Malady: or, A Treatise of Nervous Diseases of All Kinds* (London, 1733); C.F. Goodey, *A History of Intelligence and 'Intellectual Disability': The Shaping of Psychology in Early Modern Europe* (Farnham and Burlington, 2011), p. 59.

[492] Rousseau, *Nervous Acts*, pp. 171, 164; C.U.M. Smith, 'Brain and Mind in the "Long" Eighteenth Century', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century*

Representations of heightened nervous sensibility, therefore, appealed primarily to both women and men of the upper classes. The privileging of a 'refined' manliness which closely mirrored 'civic' and 'progressive' interpretations of national character, perhaps explains why male and female sensibility was conflated in this way, given Philip Carter's assertion that the measure of refined manliness was the eradication of certain oppositional characteristics that pertained to cultural understandings of 'male' and 'female'.[493]

A definition of intelligent sensibility that could also be elided with effeminacy was far from acceptable to all, however. Many eighteenth-century contemporaries, usually male scholars, harked back to a classical definition of nervousness that was more closely equated with 'manly' and 'virile' modes of expression. Contemporary writers went further than simply abstracting these desirably 'nervous' and 'manly' characteristics. Indeed, the written discourses that prominent men produced were subject to the analysis of peers for signs that 'virile' modes of expression were being adhered to. 'Nervous selves', as eighteenth-century writers theorised, were unimaginable apart from their physical bodies and the literature that they produced. Here, the nerves functioned as 'a 'metonymy for the body of man', with 'vigour the chief sign of his maximum efficacy'. The opposite style of writing – weak and flaccid – was usually a term of feminine

---

Neuroscience (New York, 2007), pp. 20-21; Raymond Stephanson, 'Richardson's "Nerves": Physiology of Sensibility in Clarissa', *Journal of the History of Ideas,* Vol. 49.2 (1988), pp. 267-285; Robert Whytt, *Observations on the Nature, Causes Nervous, Hypochondriac or Hysteric, to which are Prefixed some Remarks on the Sympathy of the Nerves* (Edinburgh, 1765), pp. 114, 315; Cheyne, *The English Malady*, p. 182.

[493] Philip Carter, 'An "Effeminate" or "Efficient" Nation? Masculinity and Eighteenth-Century Social Documentary', *Textual Practice,* Vol. 11.3 (1997), pp. 429-443; Philip Carter, *Men and the Emergence of Polite Society: Britain 1660-1800* (Harlow, 2000); Alexandra Shepard, 'From Anxious Patriarchs to Refined Gentlemen? Manhood in Britain, circa 1500-1700', *The Journal of British Studies,* Vol. 44.2 (2005), p. 282.

opprobrium. Contemporaries reserved praise for the expositions of their peers only when the writing and arguments were 'brisk' and 'robust' but also 'muscular' and 'tight'. Truly masculine men, as it was asserted, did not write in a soft, flaccid, effeminate style. Lack of vigour was construed as 'nerveless': soft and feminine. By the end of this century this would be represented simply as a 'pointless kind of blank verse', as if to suggest that the female sex were also 'pointless'.[494]

Conclusion

Although developmental paradigms emerged with the theorising of John Locke, his ideas did not properly take hold until the middle of the eighteenth century. His belief that experience was crucial to the development of psycho-social competence emerged in response to previously static conceptions of the soul and the reductionist concept of innate ideas. Locke's ideas, therefore, represented a considerable break with traditional ideas of mental capacities and their emergence, which were in large part still wedded to vague conceptions of maturation, providence, and the changing nature of the body

[494] Rousseau, *Nervous Acts*, pp. 40-41; Marcus Tullius Cicero, *Offices - De Officiis, Laelius, Cato Major and Select Letters,* ed., S.E. Smethurst (London, 1953), pp. 232-233; Joseph Mede, *The Works of the Pious and Profoundly-learned Joseph Mede, B.D. Sometime Fellow of Christ's Colledge in Cambridge* (London, 1672), p. 847; Bishop William Warburton, *Doctrine of Grace: or, the Office and Operations of the Holy Spirit Vindicated from the Insults of Infidelity, and the Abuses of Fanaticism* (London, 1763), p. ix; Roy Porter, 'Nervousness Eighteenth and Nineteenth Century Style', in Marijke Gijswijt-Hofstra and Roy Porter eds., *Cultures of Neurasthenia: From Beard to the First World War* (Amsterdam and New York, 2001), pp. 31-49; Patricia Parker, 'Virile Style', in Louise Fradenburg and Carla Freccero eds., *Premodern Sexualities* (New York and London, 1996), pp. 201-222; W.F. Bynum, 'The Nervous Patient in Eighteenth- and Nineteenth-Century Britain: The Psychiatric Origins of British Neurology', in W.F. Bynum, Roy Porter and Michael Shepherd eds., *The Anatomy of Madness Essays in the History of Psychiatry,* Vol. 1 (London and New York, 2004), p. 91.

during the life-cycle. Subsequent theorists developed Locke's ideas further: from the stand-point of a rigorous defence of the immaterial soul and in dialogue with materialist theories of the brain and nerves. As it was apparent, however, these ideas were not always consistently applied to both sexes. Yet despite ending this part of Chapter 4 with the observation that the female intellect was thought of as both literally and metaphorically pointless, it would be simplistic to assume that debates on the nature of the sexed mind concluded as they began: with a denunciation of women's potential for developing rational thought. Although this argument was undoubtedly ever present during both the seventeenth and eighteenth centuries, albeit shifting in focus from the humoural to the nervous body, it was not the only argument generated in dialogue with the question of whether the mind was sexed. Contemporaries were quick to make use of the ambiguities in early modern thought to postulate that the mind had no sex. Both Mary Astell and Mary Wollstonecraft sought to reconcile female experience with the intellectual potential of women. Whilst this almost certainly represented a brief interregnum in the many assaults on the female intellect, the intellectual traffic was far from one-way. The problematic distinctions between the emotions and rationality contrived to produce a definition of nervous intellectual sensibility which was inclusive of women – albeit upper class ones. It is perhaps in light of the pervasiveness of the idea that 'nervousness' was not exclusive to either sex, that the 'robust', 'rational' and emphatically 'male' mind, was once more asserted. The seventeenth and eighteenth centuries, therefore, witnessed a constantly shifting tide in thinking about the mental capacities of the sexes which was neither wholly negative nor wholly positive. Early modern concepts of idiocy further characterised the discursive terrain of mental phenomena that was both inclusive and exclusive of certain types of people. It is to this that we will now turn.

Idiocy: Definitions, Meanings and Applications in Early Modern Thought

The very same concerns with charting the differences between humans and animals which allowed some contemporaries to argue that the mind had no sex, was also responsible for generating definitions of idiocy. Idiocy referred to individuals who were deemed to be without the capacity for rational thought. The idiot classification emerged out of an established contemporary hierarchy that ranked humans below angels but above animals. Identifying any condition that endangered humanity's place within the hierarchy assumed some importance in the seventeenth century. The development of the idiot classification was a fundamental part of this project. John Locke was particularly influential in identifying 'idiots', or those individuals who would never attain 'reason' and 'rationality', the gold-standard of the human intellect. Locke's observation that individuals developed mentally over time led him to the identification of specific instances of 'non-reason' and a special 'sub-kind' of human, such as the 'idiot'. The idiot scarcely put any ideas together: 'The defect ... seems to proceed from want of quickness, activity, and motion, in the intellectual faculties ... [They] cannot distinguish, compare and abstract'.[495]

The 'idiot' was also defined by his inability to engage in abstract thought. Seventeenth- and eighteenth-century ideas of idiocy were characterised by a set of descriptions and explanations which saw the condition as incurable and ineducable. Idiocy was either acquired from accident or innate from birth. The classification also tended to be reserved for individuals whose abnormal mental characteristics appeared to go against the grain

[495] Locke, *An Essay Concerning Humane Understanding,* p. 71; C.F. Goodey, 'Mental Retardation', in G.E. Berrios and Roy Porter eds., *A History of Clinical Psychiatry: The Origin and History of Psychiatric Disorders* (London, 1995), pp. 245, 247.

of natural law. The exclusion of sub-human types from the macrocosmic hierarchy that ranked humans below angels and above animals was justified in two ways. The first saw idiocy as primarily a mental state requiring classification by analogy with the nosology of bodily diseases. The second strand of thought was developed along materialist lines, where the psychology of idiocy was couched in medical explanations of head size, the humours and a number of hypotheses about the workings of the nerves. Whilst these ideas ran alongside each other during the early modern period, both ways of defining and interpreting idiocy, as we shall see, relied on the boundaries of human ('concept of man') 'being drawn short'. The history of idiocy and its application to certain groups fuelled the practices of social exclusion on the grounds of social incompetence.[496]

This section of Chapter 4 will focus on two aspects of early modern idiocy that are most relevant to the overall themes of this study. I will therefore analyse idiocy in terms of its applicability to age, gender and class. This discussion, as such, will concentrate on ideas of congenital idiocy, its causes and applications to specific groups, before concluding with a discussion of dementia and the hypothesis that this condition evolved from a sub-species of idiocy to a pathological condition in its own right.[497] I will firstly begin with a discussion of the definitions of idiocy, as these were understood by seventeenth- and eighteenth-century contemporaries.

---

[496] Goodey, 'Mental Retardation', pp. 240, 246-247; Clifford J. Drew, Donald R. Logan and Michael L. Hardman eds., *Mental Retardation: A Life Cycle Approach* (Columbus, 1998), pp. 55, 79; C.F Goodey, 'What is Developmental Disability? The Origin and Nature of our Conceptual Categories', *Journal of Developmental Disabilities,* Vol. 8.2 (2001), pp. 6-7, 9, 13; Jonathan Andrews, 'Identifying and Providing for the Mentally Disabled in Early Modern London', in David Wright and Anne Digby eds., *From Idiocy to Mental Deficiency: Historical Perspectives on People with Learning Disabilities* (London, 2002), p. 71.

[497] G.E. Berrios, 'Dementia during the Seventeenth and Eighteenth Centuries: A Conceptual History', *Psychological Medicine,* Vol. 17.4 (1987), pp. 829-837.

Idiocy: Conceptual Development and Application

Idiocy was defined in terms of an inability to process information, to think abstractly, or to reason logically. It was also identified with an attention deficit (known as 'mobility of opinion'). Terms synonymous with idiocy included 'foolishness', which was employed to denote a weakness of the intellect, or to identify some ridiculous aspect of an individual's behaviour. The pure definition of idiocy from birth made no allowance for individuals suffering severe or permanent mental impairment from brain damage, old age, disease, neurological disorder, or accident. In practice, most contemporaries recognised an 'acquired' type of stupidity or idiocy. Therefore, concepts of idiocy included congenital and senile mental disorders and anyone 'that by sickness, grief or other accident wholly loses his memory and understanding'. It was also not uncommon for the boundaries between terms like 'idiot' and 'lunatic', or 'fool' and 'madman' to collapse in their collective use. 'Wit' and its lack, alongside other terms like 'dullness', underlined both the extremities between right and wrong reason and the grey areas between the stupid, the mentally disabled, and the plain mad. [498]

One of the most precise distinctions of idiocy that also grew in importance during the early modern period was the distinction made between those who were mentally disabled from infancy (i.e. 'idiots'), and those who had suffered loss or impairment to their faculties subsequently (i.e. 'lunatics'). The concepts were most clearly defined in legal handbooks, where the distinction between lunatics and idiots was consistently

[498] Jonathan Andrews, 'Begging the Question of Idiocy: The Definition and Socio-Cultural Meaning of Idiocy in Early Modern Britain: Part 1', *History of Psychiatry,* Vol. 9.33 (1998), pp. 66, 67, 69, 81, 82; Samuel Johnson, *A Dictionary of the English Language* (London, 1756); John Walker, *A Critical Pronouncing Dictionary and Expositor of the English Language* (London, 1791); Sir Anthony Fitzherbert, *Natura Brevium, of the Most Reverend Judge Mr. Anthony Fitz-Herbert. Corrected and Revised by the Author* (London, 1652), p. 583.

maintained. Sir Edward Coke described an idiot as 'one who from his nativity ... is *non compos mentis*'. Commentators in the seventeenth century, such as Michael Drayton, provided a clear and detailed scheme to assist magistrates and others, proposing three kinds of people classifiable as *non compos mentis.* The crux of the classification involved the differentiation between the lunatic with his temporary loss of memory and the idiot's persistent failure to learn. This distinction was repeated in Brydall's more popular text of 1700. In other areas of congenital disability, legal thinking supposed no possibility of the idiot ever learning. Blackstone's formulation of the idiot betrayed the influence of John Locke's psychology in this respect. He wrote:

> A man is not an idiot if he hath any glimmering of reason so that he can tell his parents, his age or the like common matters. But a man who is born deaf, dumb and blind, is looked upon by the law as in the same state with an idiot; he being supposed incapable of understanding, as wanting those senses with furnish the human mind with ideas.[499]

[499] The Courts of Wards and Liveries employed two medico-legal categories for classifying the mentally disabled – 'idiocy' and 'lunacy'. The inspection of such persons was usually conducted by a commission before a county jury. Since the Chancery writs initiating such examinations specified the type of suspected disability beforehand, all petitioners offered a diagnosis in advance. Richard Neugebauer, 'A Doctor's Dilemma: the case of William Harvey's Mentally Retarded Nephew', *Psychological Medicine,* Vol. 19.3 (1989), p. 569; William Brydall, *Non Compos Mentis: or the Law Relating to Natural Fools, Mad-Folks and Lunatick Persons* (London, 1700), p. 6; Sir William Blackstone, *Commentaries on the Laws of England,* Vol. 1 (Oxford, 1765-9, 1783 edn), pp. 292-295. See also: Daniel Hack Tuke, *Chapters in the History of the Insane in the British Isles* (London, 1882), pp. 286-91; Lord Coke, *Coke's Lyttleton,* 247a, cited in Daniel Hack Tuke, *A Manual of Psychological Medicine: Concerning the History, Nosology, Description, Statistics, Diagnosis, Pathology and Treatment of Insanity. With an Appendix of Cases* (London, 1858), p. 94; Andrews, 'Begging the question of idiocy... Part 1', p. 82;

The brain of the idiot, according to Locke, was a *tabula rasa,* akin in a pre-developmental sense to a child, but without the same possibility of learning. The idiot reasoned poorly, wrongly, or hardly at all. As opposed to the lunatic's disordered view of the world, an idiot's perceptual powers were healthy, but he was still unable to reason.[500]

Definitions of idiocy that were inspired by Locke's development of the *tabula rasa* metaphor were also tested in the Courts of Wards and Liveries. The crucial conceptual distinction that arose from problems of property and title inheritance in these courts involved the one between idiots and lunatics. Legal doctrine distinguished between those who were unfit to inherit because of a supposedly innate mental incapacity (idiots) and those who could be temporarily deprived of their inheritance while they were judged to be out of their minds (lunatic).[501] Tests of memory and the ability to reason effectively from simple propositions were involved in identifying idiots. The components of these tests were recognised in practice by the Courts of Wards of the early modern period. Magistrates, Commissions of Idiocy (*de Ideota inquirendo*) and doctors would test subjects' basic arithmetic aptitude, their ability to remember the most basic aspects of identity (such as their name, age, birthday, place of residence, or the names of their parents), and their powers of reasoning. In exploring whether individuals had developed the necessary skills of numeracy and everyday language use, people were asked to add up sums of

---

Michael Dalton, *The Countrey Justice: Containing the Practice of the Justices of the Peace as well as out of their Sessions: Gathered for the Better Help of such Justices of Peace as have not been much Conversant in the Study of the Laws of this Realm* (London, 1666), p. 284.

[500] Locke, *An Essay Concerning Human Understanding*, Book II, pp. 127-128.

[501] Bernard Clarke, *Mental Disorder in Earlier Britain* (Cardiff, 1975), p. 58.

money, describe objects or animals, and count numbers backwards and forwards.[502] Being able to apply numerical skills in practical circumstances, was, as Peter Rushton reminds us, seen as a 'barometer of rationality that any competent person should be able to express in an increasingly monetarised society'.[503] Unruly appetites, expressed in particular ways (usually excessive food consumption) were also confirmed as a mark of congenital idiocy. Indeed, whilst he was making the distinction between the idiot and the lunatic, Locke speculated about whether idiots and beasts were the same species since they both lacked mental acuity.[504] Locke's view of idiocy relied on its close association with nature, but more particularly on seeing nature as a 'non-educative, if not, brutalising force'.[505] Conceived as almost invariably defective, if not completely lacking in organisation and capacity, idiots were motivated by instinct.[506]

When theorising about congenital idiocy was merged with enquiries that focused on the dissection table and the discussion of the pathological signs of mental disorder in post-mortem examinations, contemporaries continued to highlight the hopeless plight of the

---

[502] Fitzherbert, *Natura Brevium* (London, 1652), p. 583; Tuke, *A Manual of Psychological Medicine*, p. 94; Peter Rushton, 'Idiocy, the Family and the Community in Early Modern North-East England', in Wright and Digby eds., *From Idiocy to Mental Deficiency*, p. 51.

[503] Neugebauer, 'A Doctor's Dilemma', p. 570; Rushdon, 'Idiocy', p. 51.

[504] Locke, *An Essay Concerning Human Understanding,* ed., P. Nidditch (Oxford, 1975), p. 160.

[505] Alan Bewell, *Wordsworth and the Enlightenment: Nature, Man and Society in the Experimental Poetry* (New Haven and London, 1989), p. 57.

[506] Thomas Willis noted how the softness of the brain found in idiots was shared by children, puppies and birds: Thomas Willis, *Two Discourses Concerning the Soul of Brutes which is that of the Vital and Sensitive of Man* (London, 1683). This passage from Willis was quoted by Julien Offray de La Mettrie, *Man a Machine. Translated from the French of the Marquiss D'Argens* (London, 1748), pp. 99, 143-146; Ann Thompson, *Machine Man and Other Writings* (Cambridge, 1996).

congenital idiot. Thomas Willis, a towering figure in seventeenth-century neuroscience, stressed that idiocy was characterised by some defect of the brain: by its small size, by the 'excess of some manifest quality, as of moisture and coldness', by the thickness or earthiness of its texture, or by 'evil conformation, as to its Pores and Passages'.[507] Following Willis, one tradition would see idiocy as primarily a mental state demanding classification (like the various types of madness), where another sought to situate the phenomena within a distinctly materialist psychology of the nerves.[508]

In keeping with the latter approach, the famous Scottish physician, William Cullen, linked the relative tension and laxity in the nerves with certain pathological conditions, including idiocy.[509] The congenital idiot was, according to another contemporary,

> born with imperfect nerves, which are stopped up; and never, all their lives, unfold themselves ... A being may undoubtedly exist, without giving appearance of its existence ... some individuals have not originally all the series of subdivisions of the nerves; others have lost them through time; some have not got time to bring them to perfection; while others may have them all, though imperfectly formed in all their series; as we see in slow capacities, old men, children, and fools. [510]

[507] Willis, *Discourses Concerning the Soul of Brutes,* pp. 209-210.

[508] Goodey, 'Mental Retardation', p. 246.

[509] William Cullen, *The Institutions of Medicine. Part I. Physiology. For the Use of the Students in the University of Edinburgh* (London, 1772), p. 142.

[510] Smith, *A Dissertation Upon the Nerves,* pp. 52, 100-102.

Morgagni also observed how the cerebrums of idiots tended to be 'hard' and their pineal glands often 'vitiated'. The *dura mater* of their brains was thicker than the norm, adhering to the skull where the brain vessels were distended, or filled up with water or other fluids.[511] Most anatomists who had dissected the head and brains of the mentally deficient idiot reported similar findings. La Mettrie observed that although 'the imbecile does not lack brain', it was deficient in consistency 'being too soft'.[512]

Despite the distinctly 'nervous' tone of mid-late seventeenth- and eighteenth-century causes of idiocy, explanations for the condition typically comprised a mixture of new ideas with old. Early dissectors were content to endorse or supplement rather than revise ideas that had gone before them. Indeed, early modern anatomy was little more than a procrustean bed which provided an empirical basis for the elaboration of antiquital thought. The psychological classification of individuals at this time was 'an edifice built with medieval logic as its scaffolding, not to mention assorted late-classical bricks'. Contemporaries continued to link the texture and temperature of the brain to identifiable deficiencies in mental states. These were greatly reminiscent of humoural theory where specific imbalances in the four elements were linked to a specific mental impairment. The 'mind', itself, consisted in a balance of elemental particles of fire and water. If water predominated, the psyche moved slowly, if fire – too fast. The Hippocratic schema also passed into Galenic medicine. Galenists saw amentia (profound mental retardation), stultitia and fatuitas (folly, foolishness, silliness, stupidity), as signs of

[511] Giovanni Battista Morgagni, *De Sedibus,* cited in Jonathan Andrews 'Begging the Question of Idiocy: the Definition and Socio-Cultural Meaning of Idiocy in Early Modern Britain: Part 2', *History of Psychiatry,* Vol. 9.34 (1998), p. 182.

[512] The dura matter is the thick membrane that is the outermost of the three layers of the meninges that surround the brain and spinal cord: La Mettrie, *Man A Machine,* p. 99.

imbalance (towards coldness and humidity) in the four humours that they took to constitute the human subject and an under-supply of the 'animal spirits' that they understood as nourishing the intellect.[513]

Likewise, Thomas Willis placed considerable emphasis on the animal spirits in his discussion 'Of Stupidity or Foolishness'. For Willis, however, large and malformed craniums (along with vacancy or abnormality of face, deformity of body and disorders of gait) were equally significant as small ones. Social bias was also an inseparable part of Willis's hypothesis about the causes of idiocy, which in the context of the varying distribution of intelligence, revolved around 'the conservative assumption that one cannot have order without hierarchy, either in society or nature'.[514] Antecedent causes of idiocy were either 'original ... hereditary ... as when fools give birth to fools' and thus 'connate', the product of an ancestral line, or 'cogenite', caused by the parents' (but particularly the father's) poor performance at conception. Value judgements relating to status and class were interpolated in Willis' text when antecedent causes of idiocy were also illustrated. For 'original foolishness', he gave the example of 'the offspring of village

[513] Goodey, 'Mental Retardation', pp. 247, 240; Henry Cuff, *The Differences of the Ages of Mans Life: Together with the Originall causes, Progresse, and End therof* (London, 1640), pp. 200-203; William Coward, *Second Thoughts Concerning the Human Soul, Demonstrating the Notion of Human Soul, As Believ'd to be a Spiritual Immortal Substance, United to Human Body* (London, 1702), pp. 109-110; Conversely, when the fluids which enlivened the body and precipitated growth were called off too early the fluids were prematurely directed to the functions of the mind. These children were characterised by a diminutive stature enlivened by an incisive, genius-like mind: Charles Collignon, *An Enquiry into the Structure of the Human Body, Relative to its Supposed Influence of the Morals of Mankind* (Cambridge, 1764), pp. 30-31.

[514] Goodey, *A History of Intelligence,* p. 74.

and country people frequently liable to poor brain texture [in whose] families we may trace back many generations and find scarcely one bright or clever person'.[515]

Conversely, Willis's definition of congenital foolishness displayed an intrinsic bias towards his own elite patient group. Congenital foolishness, he argued, happened when the father was both wise and intelligent. His scholarly endeavours, moreover, caused the blood to keep too many animal spirits circulating around his brain when they should be directed instead to his 'spermatic bodies'. When 'the rational soul is concentrating to the utmost on giving birth to its intellectual offspring ... the corporeal soul becomes weaker and less fertile', and so the offspring is mentally deficient. Of this, William Harvey's 'mentally retarded' nephew and ward, William Fowke, provided one example and Christopher Wren's son, 'poor Billy', provided another. The wasting of the animal spirits in the course of intellectual pursuits (although Harvey's bodily matter was substituted *in loco parentis*) was held responsible for idiocy in a way that was not wholly critical of the aristocracy. Indeed, far from a move away from ascribing positive traits to hereditary, the transient nature of intelligence, in these instances, enabled Willis to explain the prevalence of idiocy within families that belonged to his own peer group. Without such an explanation (which was highly reminiscent of the 'changeling', a physical non-moral being, hierarchical ranked below the madness of normal humans and a type of idiocy which excuses hereditary), having an idiot in an upper class family would have been an acute embarrassment. Conversely, antecedent causes of idiocy explained the naturally

[515] Thomas Willis, *De Anima Brutorum quæ Hominis Vitalis ac Sensitiva est* (London, 1672), pp. 504-508.

degenerate nature of the lower classes in opposition to the virtue and blamelessness of Willis's own patients.[516]

Exclusion by social rank in these instances was also marked not only by a disqualification from learning, 'but the ideas which the process of knowing produced'. Idiocy was classed as the normal condition of women, racial and religious minorities and especially the lower classes.[517] The exclusions and boundaries aligning the social with the psychological were heavily loaded, if not inseparable from the honour-based society of elites. In contemporary faculty psychology, honour was inseparable from logic, rationality and intelligence. A leading member of the Royal Society asserted that knowledge was beyond 'vulgar apprehensions'. Usually, 'common people' had 'dull wits' characteristic of a 'brutish nature', the evidence being above all that they 'have no ... feeling of honour and renown'. Even when human reason and intelligence prevailed over the reductionism of honour, those that were excluded remained remarkably consistent in their social standing. The universalising claims of rational consent theory, where all 'men' were equal, were mediated by remarks that imputed ignorance to the masses that on the whole, should be 'constantly kept under the tuition of others'. The universal man of reason was an exception to the vast majority of the population who were condemned as mere idiots.[518]

---

[516] Willis, *De Anima,* p. 508; Neugebauer, 'A Doctor's Dilemma', pp. 569-572; C.F. Goodey, "'Foolishness" in Early Modern Medicine and the Concept of Intellectual Disability', *Medical History,* Vol. 48.3 (2004), pp. 289-310; C.F Goodey, 'The Psychopolitics of Learning and Disability in Seventeenth-Century Thought', in Wright and Digby eds., *From Idiocy to Mental Deficiency,* p. 96.

[517] C.F. Goodey, 'Behavioural Phenotypes in Disability Research: Historical Perspectives', *Journal of Intellectual Disability Research,* Vol. 50.6 (2006), p. 401.

[518] Goodey, *A History of Intelligence,* pp. 126-129; Seth Ward, *A Philosophicall Essay Towards an Eviction of the Being and Attributes of God* (Oxford, 1652), p. 34; John Locke, *Two Treatise of Civil Government,* ed., J.M. Dent

Until well into the eighteenth century, discourses of idiocy continued to mix psychology with social class.[519] The bifurcation of particular psychological dispositions along these lines, moreover, continued unabated with eighteenth-century ideas of nervous sensibility and fibre-based medicine. The recognition that the nerves were not merely inanimate conduits gave rise, as we have seen, to class-based ideas of sensibility. Nervous sensibility, as it was applied during the eighteenth century, was undemocratic and 'segregated the social rank and file anew' in accordance with a model of aristocratic life. Exquisite sensibility, to quote G.S. Rousseau, was 'Inherited like wealth or milk-white skin, nerves and their fibres were unique among the organic structures: ingrained, they could neither be bought nor stolen, copied or caught'.[520]

As well as the intrinsic social biases that were inseparable from the various formulations of idiocy during the early modern period, definitions of this human 'sub-species' also involved assumptions about the deterioration of mental capacities in old age. The earliest adjectival usage ('demented') has been dated by the *Oxford English Dictionary* (OED) to 1644, whilst the word 'dementia' first appeared in the vernacular in Blanchard's popular *Physical dictionary* (1726) as an equivalent of 'anoea' or 'extinction of the imagination and judgement'. Practicing physicians on the other hand, rarely referred to the concept, and

---

(London, 1924), p. 145; Nathaniel Wanley, *The Wonders of the Little World, or, A General History of Man in Six Books* (London, 1678), p. 66; Pierre Charron, *Of Wisdom. Three books. Written originally in French, by the Sieur de Charron. With an account of the author. Made English by George Stanhope* (London, 1707).

[519] James Boswell, *The Life of Samuel Johnson* (London, 1783), p. 238.

[520] Rousseau, *Nervous Acts*, pp. 254-255, 267; Whytt, *Observations*; Cheyne, *The English Malady*, p. 105; Smith, 'Brain and Mind', p. 21.

when they did, it was under categories such as 'lightheadedness' or 'witlessness'.[521] Usages of the concept of dementia can also be recognised under the name 'Lethargie', 'a notable forgetfulness of all things almost, that heretofore a man hath knowen, or of their names ... beginning to speake, forgetteth what he had said afore, and what hee meant to say after'.[522]

The most complete description of dementia was found in the work of Thomas Willis. He suggested that stupidity might be genetic – 'original', as when 'fools beget fools' – or caused by aging – 'some at first crafty and ingenious, become by degrees dull, and at length foolish, by the mere declining of age, without any great errors in living'. This was the result of a fault in the imagination and deemed an affliction of the corporeal soul, where the non-corporeal faculty of intellect or judgement was displaced. The causes of stupidity in general, and dementia specifically, were traced to 'a torpidity of the spirits', the heaviness of the blood and a lack of movement or activity in the brain. In addition, whilst Willis saw hope of recovery when mental disability arose from epilepsy or some other bodily affliction, he conceded in general that stupidity 'may not be cured', especially in circumstances where this condition was due to an hereditary cause or

[521] Berrios, 'Dementia', p. 831; Michael MacDonald, *Mystical Bedlam: Madness, Anxiety and Healing in Seventeenth-Century England* (Cambridge, 1981); Thomas Adams, *Mystical Bedlam or the World of Mad-Men* (London, 1615); 'demented', *OED Online*: Oxford University Press, March 2014. Web. 26 April 2014; Stephen Blanchard, *The Physical Dictionary Wherein The Terms Of Anatomy, The Names And Causes Of Diseases, Chirurgical Instruments, And Their Use, Are Accurately Described* (London, 1726), p. 21.

[522] Richard Cosin, *Conspiracie, for Pretended Reformation: viz. Presbyterial Discipline. A Treatise Discouering the Late Designments and Courses held for Aduancement hereof* (London, 1592), p. 73

emerged as a by-product of old age.[523] Another notable seventeenth-century physician, Thomas Sydenham, saw this condition as arising 'from weakness and vapidity of blood, brought on by over-long fermentation in the blood'.[524] Reports of cases of senile dementia, and the ways in which it was tested, was evident from the seventeenth century. One such example is provided by William Salmon in his 1694 book *Iatrica.* After reporting the case of Sir John Roberts of Bromley, Salmon concluded that 'age may be partly a cause of such decay in intellectuals'.[525]

In the eighteenth century, contemporary writers and medical men focused less on the blood and spirits for an explanation of the loss of cognitive functions in old age and more on the laxity or tightness of their nervous fibres.[526] A hundred years after the pathology of Thomas Willis became an established part of the intellectual terrain of stupidity and idiocy, William Cullen, with an emphasis on the nervous system that would not have been anathema to his famous predecessor, Willis, commented that the brain of those suffering from 'senile fatuity' had 'a certain rigidity of the brain'. He chose to classify amentia by their causes and the time of life at which they occurred. Consequently, there was 'Amentia (cogentia)', occurring congenitally from birth; 'Amentia (aquisita)', acquired from 'external causes' (such as disease and poison), and 'Amentia (senilis)', occurring or getting worse in old age. In his later works Cullen restricted this classification to just two

[523] Thomas Willis, *Dr. Willis's Practice of Physick, Being the Whole Works of that Renowned and Famous Physician: Containing these Eleven Several Treatises* (London, 1684), pp. 209-211; Willis, *Concerning the Soul of Brutes,* pp. 213-214; Andrews, 'Begging the Question of Idiocy... Part 2', pp. 179-180.

[524] Thomas Sydenham, *Processus Integri in Morbis Ferè Omnibus Curandis* (London, 1992), pp. 290-291.

[525] William Salmon, *Iatrica, seu, Praxis Medendi the Practice of Curing Diseases: being a Medicinal History of near Two Hundred Famous Observations in the Cure of Diseases* (London, 1694), pp. 724-730.

[526] Andrews, 'Begging the Question of Idiocy... Part 2', p. 180.

genera of fatuity: *fatuitas infantalis* (mental deficiency from birth) and *fatuita senilis* (senile dementia).[527] Memory, or rather its obliteration, was vital to the definition of 'senile fatuity'.[528] Indeed, an increasing incapacity to recall ideas was central to eighteenth-century definitions of dementia.[529]

Whilst it is possible to argue, on balance, that medical discourses of idiocy evolved to the stage where dementia was understood as a distinct condition which related solely to the loss of cognitive power in old age, elsewhere, the reasoning behind this condition, and even the condition itself, was not wholly embraced. Many contemporaries could not imagine how the brain could play a primary role in constructing the mental world of an individual. Indeed, many early modern philosophers sought to readdress what they saw as little more than an assumption that the mind necessarily declined with the body in old age. Timothy Nourse viewed the idea that cognitive powers declined in old age as the product of a psychological trick that individuals played on themselves. According to Nourse, individuals were complicit in reproducing the myth of cognitive plots which involved the ascent and decline of mental faculties between childhood and old age. As such, the idea that cognitive functions declined in old age was little more than a self-fulfilling prophecy. Nourse explained this in terms of an analogy with a sailor's lack of belief in the sea-worthiness of his vessel, and which, as a consequence of an ardent belief in the disastrous course of events, produced the ship-wreck he so feared. Similarly, the

[527] Andrews, 'Begging the question of idiocy... Part 1', p. 95; Cullen, *The Institutions of Medicine,* p. 142.

[528] William Cullen, *Synopsis Nosologiae*, cited in John Thomson ed., *The Works of William Cullen, M.D.* Vol. 1 (Edinburgh, 1827), pp. 316-317; Andrews, 'Begging the Question of Idiocy ... Part 1', p. 94.

[529] John Haslam, *Observations on Insanity with Practical Remarks on the Disease and an Account of the Morbid Appearances on Dissection* (London, 1798), pp. 20-22; Cullen, *The Institutions of Medicine,* p. 142; Andrews, 'Begging the Question of Idiocy ... Part 1', p. 95.

taken-for-granted belief in the body's decline in old age led to the presumption that a corresponding weakness in the mind was inevitable. This way of thinking, according to Nourse, was responsible for the production of deeply held beliefs in embedded plots about the rise and fall of cognitive functions according to age.[530]

The ideas of mental decline that were associated with dementia were also complicated by understandings of the immaterial soul that stressed continuity in the cognitive functions instead of change. Indeed, the argument for the pre-eminence of the mind during the time of old age was based on the premise that the more the mind was abstracted from matter and retired from the senses, as it was in old age, the more the soul was capable of exercising its intellectual faculties.[531] Edward Reynolds argued that individuals could 'revenge nature' at certain times of life through a conscious awareness of how the body enslaved the mind to its mutable will. Strategies could be devised to free the mind from its corporeal bondage, even in old age.[532] The physical maladies of old age, deteriorating eyesight and deafness, also enabled a retreat from the white-noise of sense perception to allow the individual to engage in intellectual thought. The mind became more powerful not less as the individual grew older. It also exercised itself with more clarity and

[530] Nourse, *A Discourse upon the Nature and Faculties of Man*, pp. 299-300.

[531] François de Salignac de La Mothe-Fénelon, *An Essay Founded upon Arguments Natural and Moral, Proving the Immortality of the Soul. Translated from the Original Manuscript of the Archbishop of Cambray* (London, 1730), p. 30; Marius D'Assigny, *The Art of Memory a Treatise useful for such as to Speak in Publick* (London, 1697), p. 17; Crichton, *An Enquiry into the Nature and Origin of Mental Derangement*, pp. 243-247.

[532] Edward Reynolds, *A Treatise of the Passions and Faculties of the Soule of Man with the Several Dignities and Corruptions thereunto Belonging* (London, 1640), pp. 5-11.

efficiency during old age than at any other time of life.[533] This assertion involved the idea of compensation, or more specifically, the idea that the body in its decaying state was inversely related to the capacity of the mind. As such:

> those that are strongest in mind, are commonly weakest in body, and the soul is seen to be full of liveliness in a languishing body, and to grow the more in force by the decay of the body, by growing of the soul I mean, (mistake me not) not that it increase or diminish, it is capable of neither, but its profiting in power and virtue.[534]

For some, the incongruence between the incorporeal mind and corporeal bodily matter established the existence of an immaterial soul. An immaterial substance was not subject to the laws of mortality.[535] If an immaterial substance was not subject to the laws of mortality, it was equally invulnerable to the changes wrought by age, or as this position was summed up by Walter Charlton, 'the intellect itself, since it has no parts, cannot be perfected by parts; being from the beginning, and of its own nature, a full and perfect understanding'.[536] Again this returned to the undoubted fact that individuals thought differently and continued to do so (within degrees), from infancy to death. The question of psychic causality remained contentious, nevertheless.

---

[533] Roger Coke, *Treatises of the Nature of Man First, Wherein the Nature of Man agrees with that of other Creatures, and herein of the Majesty, Wisdom, Providence, and Goodness of God* (London, 1685), pp. 8-35.

[534] Anonymous, *The Immortality of Mans Soule, proved both by Scripture and Reason* (London, 1645), pp. 4-5.

[535] Smith, *A Dissertation upon the Nerves*, p. 22.

[536] Charlton, *A Natural History of the Passions,* p. 64.

Conclusion

Idiocy, the reasons and causes of why individuals failed to develop mentally in terms of contemporary standards of rational thought, were well conceived by the seventeenth century, developing further in the eighteenth. The prevalence of older ideas of mental enfeeblement with newer ones, also suggests that contemporary theorising on ‘abnormal’ mental development was well in advance of ideas of ‘normal’ development as this was expounded by John Locke. Idiocy, during this time, was explained in terms of ideas of head-size, the humours, and hypotheses of the nerves, before the locus of the condition shifted to embrace concepts of nervous sensibility. The characteristics of the idiot, in contrast, would remain remarkably consistent throughout the seventeenth and eighteenth centuries. Who defined and who was defined by idiocy was a matter of power; where definitions in their application to specific groups of people were inseparable from the social biases they inspired. Dementia, in contrast to the persistence in representations of idiocy, would evolve considerably during the seventeenth and eighteenth centuries, as ‘amentia’, ‘dementia’, or both. It had an invariant core meaning which included cognitive failure and psychosocial incompetence. By the end of the seventeenth century, states of impaired cognition, which included foremost, ideas of idiocy, had been described in relation to the following polarities: congenital or acquired, temporary or permanent and affecting either the young or the old. The term 'dementia' and the concept of cognitive failure also came to denote a disorder of cognition that was both age-related and characterised by chronic, irreversible, mental incompetence. Nevertheless, many contemporaries, through either a rigorous defence of the immaterial soul or other ideas, disputed the belief that mental faculties inevitably declined in old age. These ideas remained contentious until well into eighteenth century, and possibly beyond.

In their entirety, ideas of mental development and decline as they related to the life-cycle have been the focus of this chapter. The first part of Chapter 4 opened with a discussion of the origins of developmental theories as they emerged with the seismic contribution of John Locke. Before Locke, as I have demonstrated, the emergence of mental faculties were wedded to vague conceptions of maturation and derived from static conceptions of the soul. After Locke, man entered the world as a *tabula rasa* where all that he would know would come from experience. Subsequent theorists, from the stand-point of irreconcilable theological convictions, would develop these ideas further. The emphasis on the development of 'man' would also bring into sharp focus the mental capacities (and indeed capabilities) of women. Developmental theories, whilst holding out the potential for equality between male and female minds, were in practice more ambiguous. The question of whether or not minds were sexed was unevenly dealt with during the seventeenth and eighteenth centuries. Initially, the proposition that the mind had no sex was the product of indifference, a default position cultivated in the face of more pressing theological concerns, like the ontological distinction between humans and animals. In the eighteenth century, equality in the minds of the sexes was imputed from ideas of nervous sensibility, as this concept applied to both men and women of the upper classes. The foundations for women's claims to rationality, though solid, were consistently challenged during this period. Locke's references to the needs of a 'conjugal society' simultaneously highlighted the potential of the female mind and provided an insuperable barrier to a woman's achievement of rational thought. As Cartesians were escaping the body via concepts of dualism, Locke reaffirmed the formidable claims on the life-cycle of the female body as an immovable obstacle to her psychic development. Still, claims for the equality in the minds of the sexes ebbed and flowed throughout this period. Female contemporaries, in particular, would challenge the male-based definition of rationality

from which women were automatically disqualified. Female experience, in typically feminine spheres of influence, were recast as legitimate routes to the experiential experiences which in developmental paradigms ended with the achievement of rational thought. In discourses of nervous sensibility, too, elite women were well placed to claim the exquisite nervousness of anatomy that made them intelligent as well as emotional beings. In response to the hegemony of this idea in distinctly female imagery, some contemporaries resorted to a definition of nervousness that was both complimentary and exclusive to men. This move perhaps constituted the greatest proof that women's claims to rational thought were a little too convincing for some.

CHAPTER 5: GENDER AND THE LIFE-CYCLES OF EARLY MODERN WOMEN AND MEN

Historical scholarship on the early modern life-cycle has focused on the reproductive body: for women, menarche, menstruation and menopause, and for men, puberty, fecundity and senescence in old age.[537] We are now aware that early modern people knew that these life stages did not occur at the same time or in the same way for all women and men. The relationship between the life-cycle and gender, however, is still a matter of contention among historians. Some have assumed that gender was not an important aspect of the sexed body, because they privilege the 'one sex' model of the body, which conflated the male and female form into two versions of the same anatomy. Jennifer Evans, for example, has argued that 'gender was not a crucial element in understanding sexual incapacity at the start of the [early modern] period'.[538] When chronologically the one-sex model was replaced by the two-sex model, however, has been a persistent matter for debate amongst early modern scholars. In *Making Sex,* Thomas Laqueur argued that by the 1800s men and women's bodies were no longer

[537] Select examples include: Sarah Toulalan, '"Age to Great, or to Little, Doeth let Conception": Bodies, Sex and the Life Cycle, 1500-1750', in Sarah Toulalan and Kate Fisher eds., *The Routledge History of Sex and the Body 1500 to the Present* (London and New York, 2013), pp. 279-295; Peter Laslett, 'Age of Menarche in Europe since the Eighteenth Century', *The Journal of Interdisciplinary History,* Vol. 2.2 (1971), pp. 221-236; J.B. Post, 'Ages at Menarche and Menopause: Some Medieval Authorities', *Population Studies,* Vol. 25.1 (1971), pp. 83-87; Lynn Botelho, 'Old Age and Menopause in Rural Women of Early Modern Suffolk', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 43-65; Patricia Crawford, 'Attitudes to Menstruation in Seventeenth-Century England', *Past and Present,* Vol. 91.1 (1981), pp. 47-73; Jennifer Evans, '"It is Caused of the Womans Part or of the Mans Part": The Role of Gender in the Treatment and Diagnosis of Sexual Dysfunction in Early Modern England', *Women's History Review,* Vol. 20.3 (2011), pp. 439-457; Judith C. Mueller, 'Fallen Men: Representations of Male Impotence in Britain', *Studies in Eighteenth Culture,* Vol. 28 (1999), pp. 85-102.

[538] Evans, '"It is Caused of the Womans Part or of the Mans Part"', pp. 441-442.

equivalent; instead, 'writers of all sorts were determined to base what they insisted were fundamental differences between the male and female sexes, and thus between men and women, on discoverable biological distinctions'.[539] As Karen Harvey has noted, while this theory continues to feature in a variety of historians' work, interpretations of Laqueur's thesis has never been without qualification or modification.[540]

In a recent special edition of *Signs* dedicated to this debate, Laura Gowing acknowledges that 'the regulation of sexual difference is one of the forces that gives the body its place in the world'.[541] As contemporaries struggled with a similar distinction between sex and gender, where sexual difference was still relatively fluid but ideas of gender relatively well defined, an alternative way of looking at the life-cycle and its applicability to early modern men and women emerges. As I will illustrate, it was rarely the case that the prerogatives of the life-cycle were thought applicable to both sexes in the same way. With this in mind, certain components of Joan Scott's definition of gender provides a useful cipher for understanding the early modern life-cycle, as it was applied to both sexes during the seventeenth and eighteenth centuries. Gender, as Scott defines it,

> is a constitutive element of social relationships based on perceived differences between the sexes, and gender is a

[539] Thomas Laqueur, *Making Sex Body and Gender from the Greeks to Freud* (London, 1992), pp. 5-6, 25.

[540] Karen Harvey, 'The Substance of Sexual Difference: Change and Persistence in Representations of the Body in Eighteenth-Century England', *Gender and History,* Vol. 14 (2002), pp. 202-223; Karen Harvey, *Reading Sex in the Eighteenth Century* (Cambridge, 2004); Michael Stolberg, 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Seventeenth Centuries', *Isis,* Vol. 94.2 (2003), pp. 274-299.

[541] Laura Gowing, 'Women's Bodies and the Making of Sex in Seventeenth-Century England', *Signs,* Vol. 47.4 (2012), p. 815. The special edition that revisits the one-sex/two-sex debate is contained within this volume.

> primary way of signifying relationships of power ... These concepts ... typically take the form of a fixed binary opposition, categorically and unequivocally asserting the meaning of male and female, masculine and feminine. In fact, these normative statements depend on the refusal or repression of alternative possibilities, and sometimes overt contests about them take place (at what moments and under what circumstances ought to be a concern of historians). Moreover, real men and women do not always or literally fulfill the terms either of their society's prescriptions or of our analytic categories ... the process of constructing gender relationships could be used to discuss class, race, ethnicity, or, for that matter, any social process.[542]

This chapter builds on the important work conducted by early modern scholars on the reproductive life-stages. My analysis focuses on the belief that sexual difference was fundamentally unstable in terms of how it related to medical models of the body that generated explanations for the physiological processes involved in the life-cycle. It is my contention that medical writers compensated for this instability by relating ideas of masculinity and femininity to an idealised life-cycle. This compensation could have been deliberate, given that representations of gender were often based on class, and, usually, favoured the upper classes. This did not always constitute one-way traffic, however, and one class or social group were not always advantaged over another. For men, the

[542] Joan Wallach Scott, 'Gender as a Useful Category of Historical Analysis', in Peter Angleton and Richard Parker, *Culture* (London, 1998), pp. 57-75. This was first published as Joan Scott, 'Gender: A Useful Category of Historical Analysis', *American Historical Review*, Vol. 9.5 (1986), pp. 1053–1075.

tendency of medical writers to associate the idealised life-cycle with the upper classes was informed by concepts of gender that also emphasised the contingent nature of a man's status. Whether a man was favourably placed in relation to the physiological changes of puberty and virile manhood was also dependent on his mastery of self-control. Medical models of the body, therefore, were heavily influenced by ideas of gender that operated within a very narrow framework of what ideal manhood constituted. These ideas related to humoural models of the body in the seventeenth century and notions of fibre-based constitutions and nervous sensibility in the eighteenth. Hence ideas of the life-cycle that took the form of a binary opposition might look as if they were universally applicable but on closer inspection the terms on which they were predicated can be seen to exclude certain sorts of people. The same applied to the female life-cycle which was narrowly defined in terms of seventeenth- and eighteenth-century ideas about femininity, which also intersected with contemporary understandings of menstruation, menarche, and menopause. Indeed, the lack of any universalising experience of the life-cycle in early modern medical discourse also dispelled the idea that all women were subject to growing reproductive and sexual competence from the time of puberty. I shall argue that whilst some of these ideas changed over time, the idea that some early modern men and women would not 'successfully' experience the life stages associated with puberty, adulthood, and old age, remained constant throughout the period.

The sources utilised for this research are predominantly vernacular printed medical texts. These outlined the conventions and debates of medical theory circulating amongst medical practitioners that related to puberty, ideas of reproductive and sexual competence in male and female adulthood (and conversely infertility and impotence) and the declining reproductive fecundity that was expected in old age. These ideas will be

applied to the female and male life-cycles. It is to the female life-cycle that we will firstly turn.

The Life-Cycles of Early Modern Women

The process of growing from a girl to a woman was a gradual one. It involved the channels of a girl's body gradually opening to make 'a way through and a way outside'.[543] Menarche was considered fundamental to this development. Girls experienced menarche when their bodies ceased growing. This happened somewhere between the ages of 12 and 20; although the onset of the menses at 12 years old was considered extremely rare and a portent of an extraordinarily short life-span.[544] The life-cycle was characterised by

[543] Helen King, *Hippocrates' Woman: Reading the Female Body in Ancient Greece* (London, 1998), p. 71.

[544] Nicholas Culpeper, *A Directory for Midwives: or, A Guide to Women, in their Conception, Bearing and Suckling their Children* (London, 1662), pp. 21, 67; Jane Sharp, *The Midwives Book, or, The Whole Art of Midwifery Discovered* (London, 1671), p. 216; John Freind, *Emmenologia: Written, in Latin, By the Late Learned Dr. John Freind. Translated into English by Thomas Dale* (London, 1729), p. 1; Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-280; Post, 'Ages at Menarche', pp. 83-87; Laslett, 'Age of Menarche', pp. 221-236; Sara Read, 'When Menopause is not Climacteric', *Notes and Queries,* Vol. 59.2 (2012), pp. 224-226; Anonymous, *Aristotle's Master-Piece, or, The Secrets of Generation Displayed in all Parts thereof* (London, 1694), pp. 2-4; Alessandro Massaria, *De Morbis Foemineis, The Woman's Counsellour: or the Feminine Physician ... Translated out of Massarius de Morbis Mulier. By R.T. Philomathēs* (London, 1657), pp. 14-15; James Hart, *Klinike, or The Diet of the Diseased, Divided into Three Bookes. Wherein is Set Downe at Length the Whole Matter and Nature of Diet for those in Health, but Especially for the Sicke* (London, 1633), p. 327; Lazare Rivière, *The Practice of Physick, Wherein is Plainly Set Forth the Nature, Cause, Differences, and Several Sorts of Signs* (London, 1655), p. 506; Levnius Leminus, *The Touchstone of Complexions. Generallye Appliable, Expedient and Profitable for all Such, As be Desirous & Carefull of their Bodylye Health* (London, 1576), p. 43; Ambrose Paré, *The Works of Ambrose Paré, Chyrurgeon to Henry II. Francis II. Charles IX. and Henry III. Kings of France* (London, 1691), p. 566; Daniel Sennert, *Practica Medicinae, or Practical Physick ... trans. Nicholas Culpeper and Abdiah Cole* (London, 1684), p. 133; George Hakewill, *An Apologie of the Power and Prouidence of God in the Government of the World, Or An*

periods of non-reproductive and reproductive viability. Non-reproductive viability dominated the beginning and end of the reproductive life-cycle. Where barrenness and unfitness for sexual activity was only a temporary state in the young body, remedied by a period of sexual development, for post-menopausal women it constituted a permanent end to the reproductive life-cycle. As Sarah Toulalan puts it, 'Young bodies and old bodies were both significantly different from each other – one just at the beginning of life and yet to grow towards maturity, the other having passed the pinnacle of physical development and now declining towards death'.[545] Menarche marked the beginning of the female reproductive life-cycle and ideally (apart from the disruption caused by pregnancy and lactation) many women would have years of an uninterrupted menstrual cycle until the physiological function of menstruation ended with the menopause.[546]

The word 'menopause' originated from the Greek words *menos* (month) and *pausos* (ending), and simply means the cessation of monthly menstruation, although the term 'menopause' was not used by doctors until 1821. Before this time, female reproductive senescence was variously referred to as 'the time the Courses are about to leave them', or

---

Examination and Ensure of the Common Errour (Oxford, 1627), pp. 162-163; James Hodges, *The Ladies Dispensatory: or Every Woman her own Physician. Treating of the Nature, Causes, and Various Symptoms, of all the Diseases, Infirmities, and Disorders, Natural or Contracted, that Most Peculiarly Affect the Fair Sex* (London, 1739), p. 20; Alexander Hamilton, *Outlines of the Theory and Practice of Midwifery* (Edinburgh, 1787), p. 53.

[545] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-280; John Marten, *Gonosologium Novum: or, A New System of All the Secret Infirm and Diseases, Natural, Accidental, and Venereal in Men and Women* (London, 1709), p. 90.

[546] Sara Read, *Menstruation and the Female Body in Early Modern England* (Basingstoke, 2013), p. 171.

'the cessation of the flowers'.[547] Until the latter part of the eighteenth century, writers explained the permanent cessation of the menses as the result of an age-related difficulty in excreting superfluous blood. According to the humoural system, aging was a process of drying out. As such, it was considered natural that without the excess blood which made up the menstrual plethora, women became less moist. Later on, the menopause was explained in terms of the weakening of the expulsive, excretory powers of the body, including the hardening of the aging fibres, the narrowing of the small uterine vessels, or a combination of these and other factors, including the thickening of the blood.[548]

In both the seventeenth and eighteenth centuries, the permanent cessation of the menses was thought to occur between the ages of 44 and 60.[549] The post-menopausal state

---

[547] Frances B. McCrea, 'The Politics of Menopause: The "Discovery" of a Deficiency Disease', *Social Problems,* Vol. 31.3 (1983), pp. 111-123; Wulf H. Utian, 'Menopause—a Modern Perspective from a Controversial History', *Maturitas,* Vol. 26.2 (1997), pp. 73-82; John Pechey, *A Collection of Chronical Diseases viz. the Colick: the Bilious Colick: Hysterick Diseases* (London, 1692), p. 82; Levinus Lemnius, *A Discourse Touching Generation. Collected out of Laevinus Lemnius, A Most Learned Physitian* (London, 1667), p. 356; Guillaume Mauquest de La Motte, *A General Treatise of Midwifry: Illustrated with Upwards of Four Hundred Curious Observations and Reflexions Concerning that Art ... translated into English by Thomas Tomkyns, Surgeon* (London, 1746), p. 15; Daniel Sennert, *The Institutions or Fundmentals of the Whole Art of Physick and Chirurgery, divided into Five Books ... Made English by N.D.B.P. Late of Trinity Colledge in Cambridge* (London, 1656), p. 21; Sara Mendelson and Patricia Crawford, *Women in Early Modern England, 1550-1720* (Oxford, 1998), p. 25.

[548] Friedrich Hoffman, *Medicina Rationalis Systematica: A System of the Practice of Medicine* (London, 1738), p. 230; Robert James, *A Medicinal Dictionary; Including Physic, Surgery, Anatomy, Chymistry, and Botany, in All their Branches Relative to Medicine*, Vol. 2 (1743-1745), 'menses'; Michael Stolberg, 'A Woman's Hell? Medical Perceptions of Menopause in Preindustrial Europe', *Bulletin of the History of Medicine,* Vol. 73.3 (1999), p. 409.

[549] Toulalan, "Age to Great, or to Little, Doeth let Conception', pp. 279-280; Botelho, 'Old Age and Menopause', pp. 43-65; Susannah R. Ottaway, *The Decline of Life: Old Age in Eighteenth-Century England*

suggested a loss of femininity but it came with the compensation of male rationality. Menopause also 'signalled the re-assimilation of the female body to the male (and hence more tractable)' body. Consequently, the aging patterns of elderly men and women would converge and they would share the same physical characteristics and culturally defined attributes of old age. Men, like women,

> would eventually begin to stoop and lean upon a stick. Their skin would eventually and gradually acquire the looseness and opacity that had manifested itself in women at the menopause ... and henceforth they would share the same physical characteristics and culturally defined old age attributes.[550]

Contemporaries, nevertheless, acknowledged that a typical representation of the female life-cycle, the ebb and flow of reproductive viability and senescence which began with menarche and ended with menopause, was not experienced by all women. As Jane Sharp stated, 'the terms sometimes flow too soon, sometimes too late, they are too many or too

---

(Cambridge, 2004), p. 36; Read, *Menstruation and the Female Body in Early Modern* England; William Buchan, *Domestic Medicine; Or, A Treatise on the Prevention of Cure of Diseases by Regimen and Simple Medicines* (London, 1784), pp. 578-584; On Buchan, see Roy Porter, 'The People's Health in Georgian England', in Tim Harris ed., *Popular Culture in England, c. 1500-1850* (New York, 1995), pp. 25-27; Joannes Groenveld, *The Grounds of Physick, Containing so Much of Philosophy, Anatomy, Chimistry, and the Mechanical Construction of a Humane Body* (London, 1715), p. 48; Freind, *Emmenologia,* p. 1; Sharp, *The Midwives Book,* p. 134.

[550] Lesley Dean-Jones, *Women's Bodies in Classical Greek Science* (Oxford, 1996), p. 107; Margaret Pelling, 'Thoroughly Resented? Older Women and the Medical Role in Early Modern England', in Lynette Hunter and Sarah Hutton eds., *Women, Science and Medicine, 1500-1700: Mothers and Sisters of the Royal Society* (Stroud, 1977), p. 83; Pat Thane, *Old Age in English History. Past Experiences, Present Issues* (Oxford, 2000), p. 54; Botelho, 'Old Age and Menopause', pp. 51-52.

few, or are quite stopt that they flow not at all'.[551] The 'suppression of the menses' was a stable part of many medical treatises of the period. Within this category of menstrual disorders, prominent physicians outlined the difficulties in establishing a regular menstrual cycle that would give meaning to the ascent and decline of reproductive viability and senescence marked by the terms 'menarche' and 'menopause'. At the core of the occlusion of these important stages in a woman's reproductive life was the difficulty in distinguishing a menstrual disorder from the permanent cessation of the menses. Indeed, although seventeenth- and eighteenth-century physicians treated the menopause as separate from a temporary non-menopausal suppression, in practice, distinctions were often blurred. As Michael Stolberg has argued, 'menopausal disorders were a special manifestation of the more general health hazards associated with any irregularity of menstruation'.[552]

At the heart of Stolberg's statement is not simply a blurring of boundaries between periods of reproductive viability and senescence, but a complex negotiation of what was regarded as 'natural' in terms of the expression of functions associated with the female body. In contrast with our understandings of menarche and menopause as the 'natural' result of hormonal and 'age related changes in ovarian function', 'natural' in early modern understandings of the body was inseparable from the world at large and a woman's place within it. The causal mechanisms which determined menarche, the establishment of a regular menstrual cycle and the permanent or temporary cessation of the menses were often identical. Bodily processes were determined in the first and last instance by climate, diet, and a woman's relative physicality in her working life. Hence,

[551] Sharp, *The Midwives Book,* p. 253.

[552] Stolberg, 'A Woman's Hell?', p. 407; Etienne van de Walle, 'Two Thousand Years of Menstrual Regulation', *The Journal of Interdisciplinary History,* Vol. 28.2 (1997), pp. 183-203.

variations in the regularity of a woman's menstrual cycle and the quantity of a woman's menstrual plethora 'differ as women do, according to plenty, or less plenty of good diet, and labour, or idleness, or the like'.[553] A woman's life-style, contemporaries believed, played a significant role in shaping her particular experience of the menstrual cycle and her expectations of menarche and menopause. Life-style and ideas of a woman's character and behaviour explained why some women were excluded from the typical revolutions in reproductive competence that defined the life-cycle.

Primarily, the idea that some women did not experience clearly defined periods of reproductive viability and senescence was predicated on contemporary humoural understandings of gender. Explanations for the menses relied on the assumption that blood and other superfluous fluids accumulated because women had less natural heat, concocted food less efficiently, and lived a less active life than men.[554] Mid-seventeenth-century characterisations of women's physiology were also cited as a natural basis for the division of labour between men and women, whilst also providing a pervasive interpretative framework for medical writers to assert significant physiological differences amongst women.[555] The idea that women's experiences of the life-cycle varied

[553] Sharp, *The Midwives Book,* p. 288; Freind, *Emmenologia,* p. 1.

[554] Stolberg, 'A Woman's Hell?', p. 407.

[555] Anonymous, *The Compleat Doctoress or, A Choice Treatise of all Disease Incident to Women with Experimentall Remedies against the Same* (London, 1656), p. 4; Helkiah Crooke, *Mikrokosmographia: A Description of the Body of Man. Together with the Controuersies thereto belonging* (London, 1615), pp. 272-273; Henry Cuff, *The Differences of Ages of Mans Life: Together with the Originall Causes, Progress, and End thereof* (London, 1607), pp. 106-107; Nicolaas Fonteyn, *The Womans Doctor, or, An Exact and Distinct Explanation of all Such Diseases as are Peculiar to that Sex* (London, 1652), p.1; Alexandra Shepard, 'Manhood, Credit and Patriarchy in Early Modern England *c.*1580-1640', *Past and Present,* Vol. 167 (2000), pp. 76-79; Wendy Churchill, 'The Medical Practice of the Sexed

remained powerful until the eighteenth century. According to this understanding, the menstrual cycle not only depended upon the sexed body, but on the proper conduct of women. But what if a woman's life did not conform to this ideal? Contemporary physicians, as we shall see, were far from reluctant in acknowledging that a woman's inability to generate a menstrual plethora was a natural consequence of a life-style that was far removed from the idle and sedate existence that characterised her gender in abstract. Indeed, the acceptance in early modern medical discourse that many women could not and did not live the life of ease that was conducive to regular periods was far from unusual. In recognising the full extent of discussions of menstrual disorders in early modern medical discourse and how these related to ideas of gender, contemporary writers raised the possibility that the life-cycle, as it unfolded from puberty to menopause, with reproductive viability confined to the middle part of a woman's life, was not applicable to all women.

In this chapter, I will draw out the many barriers early modern women faced in successfully passing through puberty and establishing the regular menstrual cycle that arguably made menarche and menopause meaningful events in a woman's life. This argument can be traced to a number of ideas, with one of the most important involving contemporary understandings of menstruation. Medical writers explained the generation of the menstrual plethora in two-ways: either as a natural product of the female body, or in terms of the generation of superfluous humours. In terms of explanation, the latter

---

Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 15.1 (2005), pp. 3-22.

owed much to presumptions about a woman's sedentary life-style. According to this idea, women menstruated because unlike men, who worked and worked hard, they were not afforded the same opportunities to dispose of superfluous humours through the sweat of their labours. As a universal female phenomenon, this explanation of the menses relied on the seamless transition from sex to gender, or the assumption that because women worked less hard than men, they alone would experience periodic bleeding. Indeed, it is my contention that because the reproductive and non-reproductive life-cycle was inextricably bound to contemporary ideals of femininity, many women were not thought to proceed through each reproductive life stage successfully. Medical writers consequently established the exclusionary nature of their models when women failed to live up to these ideals. Their conclusions were made possible by particular models of the body that separated a woman's sex from her gender. Scholars have traditionally addressed this in terms of the 're-assimilation' of the post-menopausal female body to the male. For women deprived of the characteristics of femininity that constituted menstruation as a 'natural' product of their bodies, however, the identification with the male body could begin sooner.

Missed periods or a failure to establish a regular menstrual cycle has particular consequences for how we view the female reproductive life-cycle and its applicability to early modern women. Crucial to my interpretation of the female reproductive life-cycle as an ideal, available to some women but not others, is the sex-gender system that was at heart of contemporary ideas of the female body and its associated functions. My analysis of the life-stages that comprised the early modern life-cycle, therefore, also includes contemporary understandings of the middle-years of a woman's life. Whilst the middle years of a woman's life, in terms of the accepted functions of her body, have been analysed in an impressive body of scholarship addressing menstruation, pregnancy and

infertility, it has not yet been incorporated into an analysis of the female reproductive life-cycle.[556]

The years between menarche and menopause, as I will demonstrate, were crucial to understanding the beginning and end of a woman's reproductive life. Indeed, because contemporaries saw menstrual disorders as common, they also asserted the non-linear nature of the life-cycle for certain women. By virtue of their class, marital status or particular menstrual disorder, some females found themselves on the periphery of womanhood at menarche, or on an accelerated path to reproductive senescence with menopause. For women who were deprived of regular periods their progress through each life-stage was more oblique. Traditionally the life-stages of menarche and particularly, menopause have been approached from the perspective of aging.[557] Whilst this remains an important avenue of enquiry, the realisation that many women's

[556] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-295. Select examples of works on menstruation, pregnancy and infertility include: Beth Hindson, 'Attitudes Towards Menstruation and Menstrual Blood in Elizabethan England', *Journal of Social History,* Vol. 43.1 (2009), pp. 89-114; Crawford, 'Attitudes to Menstruation', pp. 47-73; Evans, '"It is Caused of the Womans Part or of the Mans Part"', pp. 439-457; Sarah Toulalan, '"The Act of Copulation being Ordain'd by Nature as the Ground of all Generation": Fertility and the Representation of Sexual Pleasure in Seventeenth-Century England', *Women's History Review,* Vol. 15.4 (2006), pp. 439-457; Laura Gowing, 'Secret Births and Infanticide in Seventeenth-Century England', *Past and Present,* Vol. 156.1 (1997), pp. 87-115; Sharon Howard, 'Imagining the Pain and Peril of Seventeenth-Century Childbirth: Travail and Deliverance in the Making of an Early Modern World', *Social History of Medicine*, Vol. 16.3 (2003), pp. 367-382.

[557] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-295; Mendelson and Crawford, *Women in Early Modern England,* p. 3. In response to Lynn Bothelo's view that both menopause and old age occurred around the age of 50, Sarah Read has argued that menopause was both gradual and more likely to cease completely nearer the age of 60. Read, *Menstruation,* p. 173; Botelho, 'Old Age and Menopause', pp. 43-65.

experiences of menstruation were far from reliably periodic in nature necessitates the asking of more basic questions of our subject matter. I will therefore approach the stages of the female life-cycle on the basis of their recognisable nature, given the contemporary belief that many women were deprived of the physiological markers that constituted menarche, and following a period of reproductive stability, menopause. I will begin with a discussion of menarche and the barriers young females faced in 'successfully' traversing this life-stage.

Early Modern Women: Menarche, Menses & Menopause

The age at which a young female would begin to menstruate was influenced by climate, diet and physical activity. Girls from the upper classes with their more sedentary life-style were thought to mature earlier than girls sustained in their physical labours by a sparse diet.[558] Blood was produced from food, and the quality and quantity of food ingested influenced the quality and quantity of the menstrual blood which was made.[559] Females who ate rich, moist foods, were thought to concoct even more blood than those 'among the ranke of meane people, where euerie one must worke for a liuing, and are not pampered with full and daintie fare'. By contrast, young females, particularly if they led

[558] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-280, 283; Post, 'Ages at Menarche', pp. 83-87; Laslett, 'Age of Menarche', pp. 221-236; Read, 'When Menopause is not Climacteric', pp. 224-226; Sharp, *The Midwives Book,* p. 288; Culpeper, *A Directory for Midwives*, p. 67; Anon, *Aristotle's Master-Piece,* pp. 2-4; Massaria, *De Morbis Foemineis,* pp. 14-15; Hart, *Klinike,* p. 327; Rivière, *The Practice of Physick,* p. 506; Leminus, *The Touchstone of Complexions,* p. 43; Paré, *The Works of Ambrose Paré*, p. 566; Daniel Sennert, *Nine Books of Physick and Chirurgery Written by that Great and Learned Physitian, Dr Sennertus* (London, 1658), p. 133; Hakewill, *An Apologie*, pp. 162-163; Hodges, *The Ladies Dispensatory*, p. 20; Hamilton, *Outlines*, p. 53.

[559] Sharp, *The Midwives Book,* p. 288; Helen King, *The Disease of Virgins, Green Sickness, Chlorosis, and the Problems of Puberty* (New York, 2000), p. 67; William Cullen, *The First Lines of the Practice of Physic, for the Use of Students in the University of Edinburgh* (Edinburgh, 1786), p. 195.

an active life-style sustained by a meagre diet, had little in the way of a plethora to dispose of, 'because the menstruum is wasted, and vanisheth by their continuall exercise, and paines taking'.[560] Poorly nourished lower status females 'not only missed their menses during the winter months when food resources were stretched tight, but were also expected to miss their menses during this season'. Ages of menarche put at 12, 13 and 14 years old, therefore, were likely concluded from the tendencies of the higher classes in society. Girls from 'humble families' would have had to wait until 18, 19 or 20 years of age for the onset of the menses.[561]

Where late menarche was an accepted as part of the life-cycle of females from the lower classes, moreover, this was not the case in young women from more privileged backgrounds. If the menses failed to appear between the ages of 13 and 16, the body was considered diseased. In the *Disease of Virgins,* Helen King illustrates how a collection of symptoms presented in girls, from strange eating habits and lethargy to a failure to start their periods, was colloquially known as white fever or greensickness. White fever and greensickness were named for the pallor or 'green hue' of sufferers' complexions. Greensickness appeared to have been the name of choice among lay people, and as such, was the term that medical vernacular appropriated when it renamed the disease

[560] Fonteyn, *The Womans Doctor*, pp. 4-9; Anon, *The Compleat Doctoress*, p. 4; John Leake, *Medical Instructions Towards the Prevention and Cure of Chronic Diseases Peculiar to Women; In which, Their Nature is Fully Explained,* Vol. 1 (London, 1781), p. 83.

[561] Peter Laslett, *The World We Have Lost* (London, 1983), p. 88; Laslett, 'Age of Menarche in Europe', pp. 221-236; Post, 'Ages at Menarche', p. 84; Alexandra Lord, '"The Great *Arcana* of the Deity": Menstruation and Menstrual Disorders in Eighteenth-Century British Medical Thought', *Bulletin of the History of Medicine,* Vol. 73.1 (1999), p. 43; William Forster, *A Treatise on the Causes of Most Diseases, and the Cure of them. First, by a Right Use of the Non-Naturals Chiefly by Diet* (Leeds, 1745), p. 150.

'Chlorosis' in the seventeenth century. It was attributed to the effects of menarche on the virginal body and the dangers of retained menses or female seed once the girl had reached menarche.[562]

It was also not uncommon for contemporary physicians to attribute a girl's failure to start menstruating to the reproductive organs cohering too closely together. This obstructed the flow of blood from inside to outside the body. It was traced to an anatomical deformity of the womb from birth, where, if the passage leading to the vagina was too straight, the 'courses' were stopped. Some medical writers saw this as less a disorder of the few and more of a common characteristic of the sexual anatomy of the young female at the time of encroaching puberty. In other words, the menstrual plethora generated at the time of menarche, though a credible somatic sign of impending womanhood, was denied its proper expression by the still immature nature of the female anatomy.[563] Helkiah Crooke described in words that were common in other midwifery texts throughout the early modern period, how 'These folds are in young women smoother and narrower and the passage straighter, that it will scarce admit a finger'. This was usually remedied at puberty when automatically 'the passages are open for the seede and monthly courses'.[564] For some young females anatomical immaturity was not always remedied by simply growing up. Indeed, this could become a more permanent

[562] King, *The Disease of Virgins,* pp. 9, 97; Read, *Menstruation*, pp. 64-70; Ursula Potter, 'Navigating the Dangers of Female Puberty in Renaissance Drama', *Studies in English Literature 1500-1900,* Vol. 53.2 (2013), pp. 421-439; N.H., *The Ladies Dictionary, Being a General Entertainment of the Fair-Sex. A Work Never Attempted before in English* (London, 1694); Crawford, 'Attitudes to Menstruation', p. 53; Leake, *Medical Instructions,* pp. 62-63.

[563] Sharp, *The Midwives Book*; Anon, *The Ladies Dispensatory,* p. 186.

[564] Crooke, *Mikrokosmographia*, pp. 234-235, 65; Sharp, *The Midwives Book,* p. 54; Nicholas Venette, *Conjugal Love Reveal'd: In the Nightly Pleasures of the Marriage bed, and the Advantages of that Happy State* (London, 1720), p. 20.

problem if the menstrual retention was not identified within six months of the disorder occurring and treated with a combination of suppurating plasters and emollients.[565] Left untreated, or due to the stubbornness of a particular menstrual disorder, some females found it difficult to traverse menarche and establish a regular menstrual-cycle.[566]

The 'straightness of the womb' which prevented the menses from 'coming down' in these cases, was simultaneously viewed as a disorder of female pre-pubescence and later life. Usually this was associated with young pre-pubescent and old post-menopausal female bodies.[567] Some contemporary writers also applied the still immature nature of the female anatomy to the retention of the menses in older unmarried women. John Pechey postulated that 'the difficulties of the flowers', where the menses either ceased altogether, or flowed 'drop by drop', was 'a Disease more incident to Maids than married Women, because the Veins of the Womb are less open in them, than in those who brought forth Children'.[568] The virginal status of the never-married woman and the girl on the periphery of puberty were similarly conflated. Their wombs 'grow feeble or remain weak on account of being exempt from, and deprived of, their own characteristic functions'. According to this thinking, even the strongest girls would suffer in this way at puberty or later if they did not marry, because the function of a woman was to give birth.

---

[565] Sharp, *The Midwives Book,* pp. 260, 269; Culpeper, *Culpeper's Directory,* p. 2. For general cures of menstrual suppression see, Massaria, *De Morbis Foemineis*, pp. 21-41.

[566] Hamilton, *Outlines*, p. 54; Anonymous, *Every Lady Her Own Physician; or, The Closest Companion Containing Ample Instructions for the Prevention and Cure of all Disorders Incident to the Fair Sex; the Whole Being Rendered Familiar and Intelligible* (London, 1788), p. 4; Crawford, 'Attitudes to Menstruation', pp. 47-93.

[567] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 288-289.

[568] John Pechey, *The Compleat Midwife's Practice Enlarged, In the Most Weighty and High Concernments of the Birth of Man* (London, 1698), p. 221.

If she failed to fulfil this function, her redundant womb would weaken.[569] In these circumstances, a failure to establish a regular menstrual cycle from the expected time of menarche was linked to the continuing sexual immaturity of the body and an incomplete transition to adult womanhood. The absence of menarche, according to the prominent contemporary physicians, Alexander Hamilton and William Cullen, was a condition 'hardly ever appearing separate from the retention of the menses'. This meant that regardless of age, the definition acted to reinforce suppression or retention as a disorder of female puberty.[570]

Consequently, although many females were successful in generating a menstrual plethora they were unable to excrete it naturally through the body. Due to the association of the suppression of menses with a recalcitrant puberty, females, old or otherwise, suffering from this disorder, were considered from a medical perspective as anatomically and sexually immature. Without the menstrual blood to 'moisten the parts', sexual intercourse also remained difficult for women. With this in mind, it is somewhat paradoxical that sexual intercourse was suggested as a solution to the continuing immaturity of the female body. Penile penetration was thought to ease the passage of the menses through the body, however, where otherwise it would flow to the neck of the womb and remain there rather than be 'purged by the Courses'. Sexual relations (within marriage) were viewed as a solution to stubborn menstrual disorders from the time of

[569] Hippocrates [Attributed], *On the Disease of Virgins, with a commentary provided by G. Tardy* (London, 1648); King, *The Disease of Virgins,* p. 109; Crooke, *Mikrokosmographia*, p. 271; Amy M. Froide, 'Old Maids: The Lifecycle of Single Women in Early Modern England', in Botelho and Thane eds., *Women and Ageing*, pp. 89-110.

[570] Cullen, *The First Lines*, pp. 33, 36; Hamilton, *Outlines*, pp. 126-128; See also Cathy McClive cited in Toulalan, '"Age to Great, or to Little, Doeth Conception"', p. 281.

puberty to a woman's adult years.[571] The friction generated by the sexual act heated the womb and 'the parts adjacent, opens and loosens the passages, so that the terms may better flow to the womb'. 'Benefit of marriage' (sexual intercourse) was also considered the principle cure for greensickness. In the plays of the period, biological ripeness was suggested by the 'fullness of blood' in the young body, an allusion to the concept of puberty as marked by the sudden movement of blood through bodily channels too narrow to permit easy movement.[572] The menstrual plethora, although successfully generated, 'wanders up and down the Veins, and begets obstructions'.[573] When the menses were suppressed at puberty, as they were in the above instances, the very capacities a girl was naturally endowed with at this time of life – fitness for intercourse and the periodic generation of a menstrual plethora that was conducive to the generation of healthy children – turned out to be not so natural after all. Moreover, an unsuccessful puberty might never be resolved. Some, like the Swiss physician, Felix Platter, conflated the general causes of the suppression of the menses (which could be encountered at any time in the life-cycle) with disorders that occurred at menarche. As a further indication that contemporaries thought menopause could also be occluded by a failure to establish a regular menstrual cycle from a young age, the failure to consistently 'exercise' the reproductive organs in a sexual sense, was also associated with a permanent state of pre-pubescence.[574]

---

[571] Sharp, *The Midwives Book,* pp. 268-269.

[572] Ursula Potter, Roger Bartrop and Stephen Touyz, 'Pubertal Process and Green-Sickness in Renaissance Drama: A Form Fruste of Anorexia Nervosa?', *Australasian Psychiatry,* Vol. 17.5 (2009), p. 383.

[573] Pechey, *The Compleat Midwife's Practice,* p. 204.

[574] Felix Platter, *Platerus Golden Practice of Physick: Fully and Plainly Discovering, I. All the Kinds. II. The Several Causes of Every Disease. III. Their Most Proper Cures ... By Felix Plater, Chief Physitian and Professor in Ordinary at*

Consequently, if medical intervention failed to yield a more accommodating entry to a woman's body, thus enabling the menstrual plethora to flow, sexual intercourse within marriage was asserted as a solution to its stubbornly immature state. If the female body did not mature naturally after the expected time of puberty, within reason of age, it could be artificially induced to do so. Yet even allowing for carnal interventions as a response to menstrual inertia, some women's bodies continued to resist the movement to a state of anatomical, sexual maturity. According Platter, some women's bodies were neither 'attracted nor bored nor pierced by nature'. The veins of the womb continued to be closed up in women who 'never had them [the courses] and are barren'. For the same reasons, when 'there is a defect in the Womb apparent, or close, so that they cannot, or at least with difficulty, they endure a Man, and will not retain him long'.[575] The 'weakness of the part' could be unduly compact or hard and very difficult to cure because it was the natural condition of the womb. Finally, retention may arise from the 'menstrual material' being too thick or sticky, or from the presence of other humours. In the description of 'thwarted menarche', the anonymous author of the Hippocratic *On the Disease of Virgins,* suggested that the problem lay with the increased blood in the body – due to 'food and the growth of the body' – and with the blockage of the 'mouth of the exit'.[576]

At various points in the life-cycle, all women were subject to menstrual disorders, both temporary and permanent. Yet it is also noticeable that where a recalcitrant menses were thought curable, it was based on the pre-condition that although the menstrual plethora

---

Basil. Abdiah Cole, Doctor of Physick, and the Liberal Arts. Nich. Culpeper, Gent. Student in Physick, and Astrology (London, 1664), p. 175; Stolberg, 'A Woman's Hell?', p. 407.

[575] Platter, *Platerus,* pp. 162, 168.

[576] Hippocrates, *On the Disease of Virgins,* cited in King, *The Disease of Virgins,* p. 70; Galen, *On Disease and Symptoms,* ed., Ian Johnson (Cambridge, 2006).

was suppressed, it was nevertheless present within the womb. Because several theories of menstruation were prominent at this time, the idea that all females were capable of generating a menstrual plethora could not be taken for granted. Even though menstruation could be explained in terms of a natural plethora, or as a consequence of chemical changes described as fermentation, which happened when the blood became too hot, medical writers generally subscribed to an explanation for the menses that originated from a particular strand of Galenic medicine. The core idea which explained menstruation in this understanding of the process was that 'the liver produced blood from chyle'. Although this system was partly refuted by William Harvey's discovery of the circulation of the blood, and by anatomical developments later in the seventeenth century, the connection between dietary and menstrual systems remained: the liver made blood from food.[577]

Indeed, if not for the prevalence of the Galenic theory of menstruation in early modern medical thought, it would have been possible for contemporaries to argue that regular menstruation was a universal experience that defined the reproductive lives of all women. Generally, the traditional Galenic position on menstruation made this difficult to assert.[578] Hence it was purported in medical treatises that too much exercise or a light diet meant that there was less blood to be lost in this way. Conversely, too much leisure

[577] King, *The Disease of Virgins,* pp. 71-72; Thomas Willis, *Of Fermentation of the Inorganical Motion of Natural Bodies* (London, 1659); Johannes Baptista van Helmont, *Oriatrike, or, Physick Refined and the Whole Art Reformed & Rectified: Being a New Rise and Progress of Phylosophy and Medicine ... Now Faithfully Rendered into English, in Tendency to a Common Good, and the Increase of True Science; by J.C. sometime of M.H. Oxon* (London, 1662).

[578] Including: Sharp, *The Midwives Book;* Pechey, *The Compleat Midwife's Practice;* Thomas Tryon, *A Way to Health Long Life and Happiness, or, A Discourse of Temperance, and the Particular Nature of all Things Requisite for the Life of Man* (London, 1621); Alessandro Massaria, *De Morbis Foemineis.*

or an over-abundant diet meant that there was more to be lost. Finally, if the other parts of the body were too strong and attracted too much blood from the liver, less was able to reach the womb.[579] Certain elements of this theory also explained why some young female's experienced an unsuccessful menarche. Ideally, the menstrual plethora began its production when a child stopped growing and there was a surplus of humours to dispose of. This depended on a young female being well nourished, however, and in those instances where she was not, no surplus humours were generated. For these young females, no surplus humours equated to a lack of menstrual blood. Moreover, the blood that was previously diverted to the nourishment of the growing body continued even after the time a girl was supposed to have started menstruating.[580] As a consequence, there were females, as Platter observed, 'in which as nature before they are ripe to conceive; breeds no more blood then will nourish the body, so she keeps the same course, when they are fit to conceive; there are barren; and without other conveniences'.[581]

Platter thought this physiological plateau rare, applying to only a minority of women. His peers, by contrast, were far from sure that the failure of the reproductive life-cycle to unfold in an orderly fashion, marked by defined periods of reproductive viability and senescence, was a marginal phenomenon. In seventeenth-century gynaecological and hygienic literature, persistent references to the individual's conduct in relation to the non-naturals provided a pervasive frame-work for contemporaries to envisage a

---

[579] P.D. Gluckman and M.A. Hanson, 'Changing Times: The Evolution of Puberty', *Molecular and Cellular Endocrinology,* Vol. 254-255 (2006), pp. 26-31; Judy L. Cameron, 'Nutritional Determinants at Puberty', *Nutrition Reviews,* Vol. 54.2 (1996), pp. 17-22; Philippe Morice, Patrice Josset, Charles Chapron and Jean Bernard Dubuisson, 'History of Infertility', *Human Reproduction Update,* Vol. 1.5 (1995), pp. 497-504.

[580] Pechey, *The Compleat Midwife's Practice,* pp. 219-220; Similarly, Massaria, *De Morbis Foemineis,* pp. 47-48.

[581] Platter, *Platerus,* p. 146.

spectrum of life-cycles marked by either a complete lack of a menstrual plethora, or in some cases, an over abundance.[582] The common observation that some women suffered more from premenstrual and menstrual disorders than others had already prompted detailed discussions in older writing. Lack of physical exercise, copious nutritious food and childlessness were identified as predisposing factors. In the late eighteenth century this debate intensified, taking up contemporary concerns with unhealthy, 'unnatural', excessively refined and 'effeminate' life-styles of the urban classes. From this perspective, premenstrual and menstrual disorders and indeed, as some argued, menstruation itself, were man-made and self-inflicted.[583]

In the context of this discussion, certain bodily types were thought to suffer more than others from generative difficulties and the production of a regular menstrual plethora. Fat bodies were held up for particular opprobrium. Through the combination of a lack of exercise and over-eating these women not only became fat but were also assumed to suffer from a range of generative difficulties. For the purpose of augmenting an already corpulent physique, fat bodies were understood to divert blood and nutrition from both the production of generative materials and the nourishment of a conception in the womb. Contemporaries viewed the bodies of such women as inherently unable to fulfil their generative or maternal role.[584] Thin, overworked and undernourished females were also

---

[582] Including: Massaria, *De Morbis Foemineis;* Sharp, *The Midwives Book*; John Pechey, *A General Treatise of the Diseases of Maids Bigbellied Women, Child-Bed-Women, and Widows, Together with the Best Methods of Preventing or Curing the Same* (London, 1696); Fonteyn, *The Womans Doctor.*

[583] Michael Stolberg, 'The Monthly Malady: A History of Premenstrual Suffering', *Medical History,* Vol. 44.3 (2000), p. 313.

[584] Sarah Toulalan, '"To[o] Much Eating Stifles the Child": Fat Bodies and Reproduction in Early Modern England', *Historical Research,* Vol. 87.235 (2014), pp. 65-93; R.C. Robinson, *Household Servants in Early Modern*

identified as having similar difficulties in fulfilling the menstrual and reproductive prerogatives of their sex. Mainly this was identified by physicians and midwives as being due to the fact that lower-class women were not able to generate a menstrual plethora. In this sense, there was a great deal of continuity with the idea that a recalcitrant menarche stemmed from the diversion of food resources to the nourishment of the body and the consequent lack of superfluous humours to be turned into menstrual blood. This was not a temporary suppression of the menses to be established again at some later point either. Some medical writers thought this condition analogous to either an inability to establish a regular menstrual cycle after menarche, or as a permanent suppression of the menses akin to the menopause.[585]

Whilst there was no suggestion that upper-class females were somehow less womanly for their generative struggles, lower class, particular labouring females, saw their similar experiences recast as 'other' in relation to a concept of menstruation that relied on a particular idea of their gender. They found themselves wholly set-apart from the rationale that women menstruated because they 'were made to stay at home, and to look after household employments, and because such business is accompanied with much ease'.[586] Given the fact that a diversity of spatial domestic and working arrangements characterised relations between the sexes at this time, it is unlikely that this

---

England (Manchester, 2010); Tim Meldrum, *Domestic Service and Gender 1660-1750: Life and Work in the London Household* (Harlow, 2000).

[585] Pechey, *The Compleat Midwife's Practice,* pp. 219-220; Felix Platter thought that females born with a 'man-like constitution' were deprived of a menstrual plethora. Platter, *Platerus,* pp. 162, 172; Massaria, *De Morbis Foemineis,* pp. 18-19; Sharp, *The Midwives Book,* p. 290.

[586] Fonteyn, *The Womans Doctor,* p.1.

representation applied to the vast majority of women.[587] Nevertheless, it was only labouring women who were thought of as more like men due to their generative struggles. Supposedly, unlike the vast majority of women, they were more physically active and thus able to purge the natural accumulation of any excess fluid from their bodies via perspiration.[588]

Hence, through a combination of thinking which drew on pervasive ideas of gender and the one-sex model of the body, labouring women were thought to develop 'man-like' constitutions. Physicians and midwives also viewed such women as inhabiting a different gender, unlike their upper-class counter-parts. The labouring woman's malnourished and physically broken body was logically viewed as crossing the Rubicon, which in its purportedly oppositional character, separated the sexes along distinct lines of character and life-style. It was inevitable then, given the fluid nature of the humoural body, that when contemporary writers were confronted with anomalies to the feminine ideal that provided the rationale for menstruation, they asserted the masculine characteristics of such women. This observation extended from the lack of a menstrual plethora to the sterility of their bodies which arose as a result. Hence the causes of the suppression of the menses 'which causes women many times, not to have their purgations at all, is the viciousness of the whole body, that it sends not blood sufficient to the womb for this matter to be digested of ... as often happens in some rustic women; whereby their temperament becomes too hot and dry, almost inclining to the nature of men'.[589]

---

[587] Amanda Vickery, 'Golden Age to Separate Spheres? A Review of the Categories and Chronology of English Women's History', *The Historical Journal,* Vol. 36.2 (1993), pp. 383-414.

[588] Lord, '"The Great *Arcana* of the Deity"', pp. 45; Stolberg, 'A Woman's Hell?', p. 407.

[589] Massaria, *De Morbis Foemineis,* p. 19; Anon, *Every Lady Her Own Physician,* p. 7.

According to John Pechey, a 'woman is fleshy, laborious, and her parts are so disposed that every member takes up and expels what is convenient for it, so that there is no room for a menstruous purgation, these are of a hot constitution ... their loins and buttocks are large, so are the breasts and shoulders, they have a great voice, are strong and hairy'.[590] Jane Sharp and Alessandro Massaria, whilst more restrained in attributing 'man-like' characteristics to women, nevertheless saw a masculine constitution and infertility as an inevitable consequence of a woman's physical endeavours: 'which causes women many times, not to have their purgations at all ... whereby their temperament becomes hot and dry, almost inclining to the nature of men'.[591] 'Some laborious Country Women', as Sharp went on to say, 'become so hot and dry like Men, that they have hardly any courses at all ... Blood is wanting either because it is not made, or not dispersed where it should, but turned to other uses'.[592]

In the eighteenth century, menstruation began to be recognised as a natural and universal product of the female body. The alteration in emphasis should have entailed the disappearance of explanations for menstruation that rested on the narrow conceptions of femininity that I previously discussed. The transition from one model of the menstrual plethora to another was far from seamless, however.[593] The fact that eighteenth-century physicians continued to write about impediments to menstruation and conception in humoural terms indicates that not everyone embraced the idea of a

[590] John Pechey, *A General Treatise of the Diseases of Maids,* pp. 14-15.

[591] Massaria, *De Morbis Foemineis,* pp. 18-19.

[592] Sharp, *The Midwives Book,* p. 290; Herman Boerhaave, *Dr. Boerhaave's Academical Lectures on the Theory of Physic,* Vol. 5 (London, 1742-1746), pp. 116-117.

[593] Lord, '"The Great *Arcana* of the Deity"', pp. 44-45.

natural plethora.[594] Indeed, although writers referred to a 'woman's constitution' being naturally endowed with 'the power to prepare a larger quantity of vital blood', they also continued to rely on the non-naturals and the construction of females as the weaker sex to explain menstruation. Hence in John Freind's revised eighteenth-century treatise *Emmenologia,* 'a great quantity of Humours' was thought to accumulate in a woman's body 'by [her] living continually at home and not being used to hard Labour'. The French physician and professor of medicine, John Astruc, seemed an obvious proponent of the natural plethora theory when he stated that a 'Woman may inure herself to Labour' and 'still carries about with her, her *moist temperament and weakly Disposition'.* He nevertheless went on to say that 'if an athletic Life, and a dry Constitution happen to any one, it may, perhaps, be doubted, whether that Woman will be subject to the *Menstrua*'.[595]

Contemporary interpretations of the cessations of the menses, therefore, varied from comparisons with virgins who had not yet begun to menstruate, to a premature but nevertheless permanent cessation of the menstrual cycle, and finally, to causes that emphasised the marginalisation of women in the feminine ideals of behaviour and character that helped to shape the reproductive life-cycle.[596] Whilst in these cases the lack of a regular menstrual cycle may have made menopause opaque, for women who had always periodically generated and disposed of a plethora, menopause was not always recognisably clear-cut either. A woman's periods, as Sara Read informs us, 'did not end in

[594] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', p. 283.

[595] King, *The Disease of Virgins,* p. 72; Freind, *Emmenologia,* pp. 13, 15-16, 52; See also: Leake, *Medical Instructions,* pp. 46, 49-52, 83; Boerhaave, *Dr. Boerhaave's Academical Lectures …* Vol. 5, pp. 116-117.

[596] Pechey, *A General Treatise of the Diseases of Maids,* pp. 14-15; Massaria, *De Morbis Foemineis,* pp. 18-19; Sharp, *The Midwives Book,* pp. 290-291, 314-316; Hippocrates, *Diseases of Women 1*, trans. Ann Hanson, *Signs,* Vol. 1.2 (1975), p. 575.

an orderly way'.[597] This mainly applied to eighteenth-century symptoms of menopause which expanded from earlier seventeenth-century notions of the cessation of the menses. The symptoms of menopause in eighteenth-century medical thought included excessive premenopausal uterine bleeding, an exaggeration of an irregular catamenia, or a more severe blood loss than a woman had usually experienced during her regular periods. In general, an approaching menopause was indicated by the irregular appearance of the menses. Menopause, nevertheless, was experienced in different ways by different women: 'In some women the menses cease without accident ... in others the cessation brings on strong hysteric fits. In some there happen floodings that are long obstinate and dangerous'. According to another writer, 'when the menses are about to go off, for the most part they appear irregularly, both in time and quantity ... sometime very sparingly at other times immoderate in quantities'.[598]

Even when the menopause ended there was no guarantee that the menses could not start again. With this in mind, John Leake advised fellow medical professionals not to prescribe emmenagogues to older women who were not were not 'able without reluctance, to perceive this infallible sign of approaching age'.[599] Leake did not say that that the treatment would be ineffectual anyway, which begs the question of why he warned other

[597] Read, *Menstruation,* p. 171.

[598] John Astruc, *A Treatise on the Diseases of Women; In Which it is Attempted to Join a Just Theory to the Most Safe and Approved Practice* (London, 1762), pp. 332-334; John Fothergill, *On The Management Proper at the Cessation of the Menses* (London, 1776), pp. 5, 160-186; Joel Wilbrush, 'Menorrhagia and Menopause: a Historical Review', *Maturitas,* Vol. 10.1 (1988), pp. 5-26; Anonymous, *An Account of the Causes of Some Particular Rebellious Distempers viz. the Scurvey, Cancers in Women's Breasts, &c. Vapours and Melancholy &c. Weaknesses in Women* (London, 1670), p. 52; Read, *Menstruation,* p. 171.

[599] Leake, *Medical Instructions,* p. 70.

physicians of post-menopausal women. In this instance a great deal can be explained by certain elements of continuity with seventeenth-century thinking on menstruation which continued in the eighteenth. The environmentally engaged nature of the menstrual process continued to be emphasised and intersected with the long-standing debate about whether (or not) women were naturally endowed with a menstrual plethora. Where seventeenth- and eighteenth-physicians leaned heavily on concepts of femininity as a reason for the menses, the menopause was also struck with an air of impermanence.

Uncertainty on the part of some contemporary physicians over whether menopause represented a true end to a woman's reproductive life was responsible for the subtext that although a woman should cease her terms somewhere between 44 and 60 years of age, this was not always the case. In these instances, it was more that the menses *should not* rather than *could not* be [re]called either side of menarche and menopause. Hence Felix Platter advised physicians not to 'meddle' with the menses 'til fourteen, and when they are evil coloured; And if they stop after forty four they *must not* be recalled'.[600] John Freind also described cases where, through a combination of impediments to perspiration and cold weather, 'the Menses being immediately renewed in these Persons, altho' they seem to have been over'. In instances where physicians subscribed to a theory of menstruation which combined a woman's sex with expectations, however unrealistic, of her gender, the menopause was treated little differently from a menstrual suppression caused by an inadequate diet, too much sweating, the passions – 'Affrights, Terrors, Sadness' – and as we have already seen, exercise. In distinguishing these conditions from one another, the real difference seemed to lie in the treatment of menstrual disorders

[600] Platter, *Platerus,* p. 162.

rather than in their permanence. In the case of older women still experiencing their periods, physicians were required to *enforce* the menopause as a condition of old age by 'interception, and incrassation or thickening thereof, and a closing up of the Vessels'.[601]

Conclusion

From menarche to menopause, seventeenth- and eighteenth-century writers had clear ideas of how the female life-cycle should proceed. The contingent nature of these life-stages within understandings of the body that were fluid and heavily dependent on certain ideas of femininity meant that these were not always inclusive of all women. If a woman did not live up to contemporary physicians' expectations of her gender, which although unrealistic, was nevertheless crucial to explanations for the menstrual plethora, life-cycle change was either less pronounced or entirely displaced. This observation was made of the time of puberty, the establishment of a regular menstrual cycle and menopause. Indeed, it is feasible to suggest that the clarity of a life-cycle marked by defined periods of reproductive viability, and in the latter part of life, reproductive senescence, was entirely absent for some women.

These conclusions were understandable when models of the body, as they applied to early modern women, were relational to both masculinity and femininity. The idea that a woman became more masculine the more her body was engaged in hard physical work also involved an acknowledgement of the effects of poverty on the physiological characteristics and biological processes that made a woman a woman. Consequently,

[601] Freind, *Emmenologia,* pp. 1-3, 15-16, 74; Pechey, *The Compleat Midwife's Practice,* pp. 219-220, 224; Platter, *Platterus,* p. 161; Leake, *Medical Instructions,* pp. 73, 75; Richard Brookes, *The General Practice of Physic; Extracted chiefly from the Writings of the Most Celebrated Physicians* (London, 1754), p. 256.

contemporaries did not see the life-cycle as necessarily unfolding in a linear fashion. A woman's failure to menstruate could be interpreted as a disorder symptomatic of an unsuccessful puberty, or, even if this was premature, a disorder of menopause. Although ideas of a 'natural' plethora were asserted in the eighteenth century, contemporaries still struggled to divorce woman's body from the expectations of her gender. Menopause was both struck by an air of impermanence and arguably entailed a basic problem of recognition for women who never experienced a regular menstrual cycle. The core of these ideas, including the departures and displacements inherent in the female life-cycle, were a constituent part of seventeenth- and eighteenth-century interpretations of the male life-cycle also. It is to this that we will now turn.

The Life-Cycles of Early Modern Males

'Puberty', the term now used to refer to a number of developmental stages the body goes through in its transition from childhood to adulthood, was also in use in early modern discourse. At the beginning of the seventeenth century this term mainly applied to boys. In Edward Phillips's dictionary, puberty was defined as 'youth, the age when hairs begin to grow on the privy members'.[602] Although some regarded male puberty as a more sudden affair than female puberty, many contemporaries interpreted male puberty as a multi-layered process involving a number of different physical criteria, the most important of which was the generation of seed or semen, which was considered complimentary to menarche in females.[603] In *The Historie of Life and Death,* for instance, Francis Bacon explicitly associated menstruation in women with the development of

[602] Read, *Menstruation,* p. 39; Edward Phillips, *The New World of English Words, or A General Dictionary* (London, 1658), 'puberty'.

[603] King, *The Disease of Virgins,* p. 84.

beards in men – both signs of reproductive capacity. Bacon located the transition to adulthood for both men and women in the development of reproductive ability: 'To be able for generation' was the first consequence of puberty, followed by 'the flowing of the menstrual, to have hairs about the legs and arm-holes, to put forth a beard'.[604]

Like female puberty, definitions of male puberty also depended on fluids beginning to flow from inside to outside or 'the mouth of exit' of the genitalia. In terms of the physiology involved, de Baillou cited the Hippocratic treatise, *On generation* to explain that

> as boys and girls grow, the vessels which extend in the boy's case to the penis and in the girl's to the womb, open out and become wider in the process of growth; a way is opened up through the narrow passages ... That is why when they reach puberty, sperm can flow in the boy and the menses in the girl.[605]

For boys, the process of 'ripening' to produce fully fertile and procreative seed took place over a period of time as the body developed and matured.[606] The first emission of seed or semen from the erect penis was usually thought to occur between the ages of 14 and 15. Some writers suggested that a boy could experience his first emission as early as 10 and

[604] Francis Bacon, *The Works of Francis Bacon,* Vol. 1, ed., Basil Montague (Philadelphia, 1842), p. 511.

[605] de Baillou cited in King, *The Disease of Virgins,* p. 84.

[606] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', p. 286.

as late as 20 years old.[607] Similarly, the loss of fertility was a process that took place over time as the quality and quantity of seed declined in older age with some men retaining their procreative ability for longer than others. Not only did the 'force and heat of Procreative matter' diminish in old age so that 'the Seed by little becoming unfruitful' was unfit for generation, but its watery consistency meant that it could not be retained in the womb long enough for a conception to ensue.[608] Male fertility was thought to decline between the ages of 40 and 65, though as Sarah Toulalan has argued, some men remained 'vigorous in their old Age' and fathered children into their seventies and eighties. Other men, however, would become impotent, whether they were capable of the sexual act or not, and unable to 'beget children'.[609]

So precarious was a man's generative potential that writers of medical literature ended up prescribing in great detail a man's sexual behaviour and the responsiveness of his physiology. Indeed, despite assertions that the male life-cycle was confirmed by invariable 'laws of nature', anecdotes about 'imperfect' males proved just as prominent in medical discourse. The rhetoric of the male life-cycle reflected not only an intense 'desire for a stable category of "manliness"', but opportunities for the marginalisation of male's

---

[607] Sarah Toulalan, '"Unripe Bodies": Children and Sex in Early Modern England', in Kate Fisher and Sarah Toulalan eds., *Bodies Sex and Desire from the Renaissance to the Present* (Basingstoke, 2011), p. 137; Hakewill, *An Apologie*, pp. 209, 161-162; Bernard Lynch, *A Guide to Health Through the Various Stages of Life. Wherein are Explained, I. The Different Degrees and Changes of Age* (London, 1744), p. 1; Marten, *Gonosologium Novum,* p. 12.

[608] Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 285-286; Paré, *The Workes of Ambrose Parey*, p. 566.

[609] Hart, *Klinike,* p. 327; Hakewill, *An Apologie,* p. 164; Anonymous, *Aristotle's Master-Piece,* p. 4; Jacques Ferrand, *Erotomania, or, A Treatise Discoursing of the Essence, Causes, Symptomes, Prognosticks and Cure of Love or Erotic Melancholy* (London, 1646), p. 136; Toulalan, '"Age to Great, or to Little, Doeth let Conception"', p. 285.

excluded from this ideal.[610] Contemporary ideas of manhood underwrote the reproductive and sexual functions of the sexed body. Ideas of the 'naturalness' of the male life-cycle, which centred on a man's growing virility due to its uneven distribution, also reflected a hierarchy of manhood that separated superior from subordinate men. This was nevertheless not a static hierarchy that automatically favoured upper-class males over lower-class ones. Claims to honourable manhood, as early modern scholars have found, depended on a man's self-mastery of his natural inclination to excess.[611]

Success in the life-cycle, interpreted primarily in terms of growing reproductive and sexual competence from puberty onwards, reflected these ideas too. Consequently, certain men were more favourably placed in relation to the life-cycle than others. A life-cycle defined by a prolonged period of reproductive fecundity before the privations of old age set in, was dependent on a man's conformance with the prescribed behaviours of moderation in his adult years. The middle-years of a man's life, as they were in a woman's, were particularly important for determining the precise shape of the life-cycle

[610] Whilst this is applied to contemporary ideas of male impotence by Judith Mueller her comments are just as applicable to the male reproductive life-cycle as a whole. Mueller, 'Fallen Men', pp. 87-88, 92; Marten, *Gonosologium Novum,* p. 14.

[611] Alexandra Shepard, *The Meanings of Manhood in Early Modern England* (Oxford, 1995); Elizabeth A. Foyster, *Manhood in Early Modern England: Honour, Sex and Marriage* (Harlow, 1999), esp. pp. 1-41. Scholarship on male fertility and impotence is important here as well. The following are important in this chapter: Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-295; Evans, '"It is Caused of the Womans Part or of the Mans Part"', pp. 439-457; Toulalan, '"The Act of Copulation being Ordain'd by Nature as the Ground of all Generation"', pp. 439-457; Mueller, 'Fallen Men', pp. 85-102; Thomas A. Foster, 'Deficient Husbands: Manhood, Sexual Incapacity, and Male Marital Sexuality in Seventeenth Century New England', *The William and Mary Quarterly,* Vol. 56.4 (1999), pp. 723-744.

and whether this would unfold in an orderly way. As was the case of menstruation in women, ideas of the production of a seminal plethora relied on concepts of gender that separated men along the lines of class. Unlike ideas of the female reproductive life-cycle, however, there was far less continuity between seventeenth- and eighteenth- century interpretations of the male life-cycle. Where in the earlier century medical writers tended to stress variations in the life-cycle in terms of the depth of bodily changes a man may undergo at puberty and manhood, marginal men, as these were increasingly termed, found themselves excluded from concepts of normative sexual and reproductive development in the eighteenth century. This will be examined through the figure of the haemorrhoid sufferer, the continuing debates in early modern historiography about the one-sex/two-sex models of sexual difference and prominent seventeenth- and eighteenth-century medical models of the body.[612] The next part of this chapter begins with an analysis of male puberty – its contingent, sometimes exclusionary nature, before proceeding through each life-stage in turn.

Early Modern Men: Puberty, Sex and Reproduction

In theory, the prerogatives of the reproductive life-cycle were endangered when a male was born. Medical writers identified three diseases caused in this way: the swelling of the navel, which 'may happen when the Navel is not well bound'; the inflammation of the navel, which occurred when 'the Ligature is not rightly made' and the 'gaping of the navel', whereby the 'navel would not come together' because of 'the unskilful cutting' of the umbilical cord. By cutting an umbilical cord too short, 'which if it be too much abbreviated, draws up the Bladder, and consequently shortens the Yard', the 'harvest of generation' was spoilt. One author explained that 'Children are disposed to Diseases

[612] For a list of scholarly contributions to the one-sex/two-sex debate, see, Chapter 3, note. 5.

because of the Cutting of the Navel String ... whereby pains and inflammations may follow'.[613] Hernias in young male children were also thought to hinder the procreative thrust of the penis at puberty, although this was only thought the case when expediency was not shown in treating such disorders, which included the binding of the abdomen in a 'good Truss made of Linnen'.[614]

In these cases, physicians were confident that with the right treatment boys could recover from these injuries to live a full, sexually and reproductively viable life. However, this depended on the immature male body meeting a number of conditions that smoothed the path to a successful puberty. The two aspects of male puberty that were determinate of success in terms of a boy's growing reproductive viability and sexual competence, was his first experience of an erection and the production of seed or semen. This was thought to occur between the ages of 14 and 20, but depended on the pre-pubescent male enjoying

> the benefit of the nourishment of meats ... whence it follows they grow strong, and are abundantly filled with naturall and vitall spirits, by the by the motion and agitation whereof the obscene and secret parts swell, and are frothy and lustfull;

[613] J.S., *Paidonnosemata; Or Childrens Diseases both Outward and Inward* (London, 1664), p. 4; Robert Pemell, *De Morbis Puerorum, Or a Treatise of the Diseases of Children* (London, 1653), p. 47; John Pechey, *A General Treatise of the Diseases of Infants and Children* (London, 1697), p. 35; Hannah Newton, 'Children's Physic: Medical Perceptions and Treatment of Sick Children in Early Modern England, c. 1580–1720', *Social History of Medicine,* Vol. 23.3 (2010), p. 464.

[614] John Muys, *A Rational Practice of Chirurgery, or, Chyrurgical Observations Resolved According to the Solid Fundamentals of Philosophy* (London, 1686), pp. 153-155; Pechey, *The Compleat Midwife's Practice,* pp. 21-22.

> when the remotest parts, as the feet, arms, shoulders, ankles, hips, thighs, neck, cheeks, are later watred with alimental and vitall juice. When therefore the secrets by the office of the Liver, are filled and fatted with exquisite and wholesome nutriment, they first of all recover and get strength, that upon the least lustfull thought, the Cods swell, and shew what force they have.[615]

Contemporaries thus anticipated that nutrition would be a major influence on the relationship between reproductive competence and other components of the life course. Chyle, the base humour for the metamorphosis of sexed fluids into either menstrual blood or semen, relied on life-style for its viability. Humoural theory, which remained dominant in the eighteenth century, meant keeping one's internal flows – the four humours (blood, phlegm, black bile and yellow bile) and the four primary physical qualities (hot, cold, dry, wet) – in balance. The humours were subject to alterations, with age, sex and lifestyle changing the balance over time.[616]

Like menarche and the menstrual plethora in females, the quantity of viable generative materials in males was most closely related to diet and the expenditure of energy both prior and subsequent to the time of puberty. Excluding the physical environment, the availability of food and the stress induced by the risk of predation, constituted two of the

---

[615] Lemnius, Levinus, *The Secret Miracles of Nature in Four Books. Learnedly and Moderately Treating of Generation, and the Parts Thereof* (London, 1658), p. 185.

[616] Lisa Wynne Smith, 'The Body Embarrassed? Rethinking the Leaky Male Body in Eighteenth-Century England and France', *Gender and History,* Vol. 23.1 (2010), p. 29.

most important environmental considerations when contemporaries were evaluating the relative availability of seed or semen at puberty. For this to be generated in quantity sufficient to stimulate an erection, whilst also retaining procreative force, necessitated 'something of blood that remained over and above' the amount needed to nourish the body and balance out the physical stresses of a particular life-style.[617] Hence the preparation for the flowing of the seed or semen was related to 'the ouer-plus of the nourishment of the particular parts of our bodie'. Where this was inadequate, 'Ill diet causeth ill blood' and 'ill blood will never make good seed'.[618]

With this in mind, delayed puberty was usually associated with poor childhood nutrition and boys from the lower classes.[619] Similar to girls approaching menarche, boys from poorer backgrounds were thought either to arrive at puberty late (when compared to their wealthier peers), or to engage with the physiological changes associated with puberty on a far more superficial level. Successful puberty necessitated a certain preparation in childhood and even at this young age, pubertal development, filtered often through the more benign, value-free language of the non-naturals, was traceable to contemporary ideas of superior and subordinate manhood. This imbued the reproductive life-cycle with a certain variation which was dependent on a young male's upbringing. During childhood, the immature body had to be carefully micro-managed to encourage the nourishment that would eventually provide for the production of seed or semen to be

[617] Isbrand van Diemerbroeck, *The Anatomy of Human Bodies; Comprehending the Most Modern Discoveries and Curiosities in that Art* (London, 1694), p. 147.

[618] Crooke, *Mikrokosmographia,* p. 198; Sharp, *The Midwives Book,* p. 87.

[619] Herbert Moller, 'The Accelerated Development of Youth: Beard Growth as a Biological Marker', *Comparative Studies in Society and History,* Vol. 29.4 (1987), pp. 754, 756.

equally dispersed throughout the body. Through what contemporaries termed 'masculine' exercises: the driving of 'Children up or down in their coaches', the friction of the rubbings of the body by attentive nurses and frequent changes in clothing appropriate to the different seasons, ideas of what constituted successful puberty excluded all but the most privileged of young males.[620]

Writers like Will Greenwood and James Hart associated the growing virility of puberty exclusively with upper-class males. According to Greenwood, 'Idleness' and 'want of imployment ... fosters itself by a writ of Privilege in the hearts of young men, who abounding with much blood, and consequently with great store of Vitall spirits, are more fiery and ardent, making them full of wanton and youthfull desires'.[621] In his condemnation of sexual relations in youth, Hart disabused his readers of the idea that puberty, as a time of growing sexual and reproductive competence, applied equally to all males. Although he did not explicitly favour elite males in his discourse, the association of vigorous post-pubescent male sexuality with idleness, a rich diet and a general reluctance in finding 'some laudable vocation ... profitable either to Church or Common-wealth', made this a somewhat obvious conclusion. Hart's description of successful puberty, although situated in negative tropes of unruly male sexuality, would simultaneously have appealed to notions of superior upper-class male virility.[622]

---

[620] Francis Glisson, *A Treatise of the Rickets: Being a Disease Common to Children. Wherin (among many other things) is Shewed* (London, 1651), pp. 349-354.

[621] Will Greenwood, *[Apographe storges], or, A Description of the Passion of Love Demonstrating its Original, Causes, Effects, Signes, and Remedies* (London, 1657), pp. 84-85; Levinus, *The Secret Miracles of Nature,* p. 135.

[622] Hart, *Klinike,* p. 327; J.H. Smyth also referred to a 'gentleman' as 'naturally endowed with a robust constitution' which should 'preserve perfect manhood': J.H. Smyth, *A New Treatise on the Venereal Disease, Gleets, Seminal Weaknesses, the Dreadful Effects of Self-pollution* (London, 1780), p. 36.

By way of contrast, young working males deprived of the adequate nourishment that was conducive to the production of a seminal plethora, were at risk from a preternatural drying up and wasting of the seed before puberty.[623] At best, these young males faced a considerably delayed puberty compared to their better off counter-parts. A young male's first erection, itself 'pricked' by the production of seed or semen at puberty, was deemed 'most common and evident among young and lusty persons, high fed, and living idly; for such as are continually imployed, it scarse touches them till they come to the age of 24 or 25 years of age, and then but very lightly'.[624] 'Barrenness', as John Marten also argued, 'was occasioned when a man [or woman] came to the School of Venus with Coldness, as before mention'd living poorly'. As he went on to say, 'Without good Meat and Drink, Venus will be Frozen to Death'.[625] If nutritional deprivation was severe enough, young males were thought to by-pass puberty completely in favour of an accelerated path to impotent old age. A tacit acceptance of disorderliness in the life-cycle, being regarded as 'contrarye to the order of age and course of Nature', was generally accepted, and in turn was reflected in an outward countenance that was associated with the privations of the elderly male body. Malnutrition brought on the wretched impotence associated with old age, which, 'as it happen that any, eyther old or young ... their bodies become and are

[623] Joannes Jonstonus, *The Idea of Practical Physick in Twelve Books. Viz. 1. The Art to Preserve Health. 2. Of the Preternatural Disorders of Mans Body, and their Signs ... Englished by Nich. Culpeper, Gent* (London, 1657), pp. 63-64.

[624] Albrecht von Haller, *A Dissertation on the Sensible and Irritable Parts of Animals* (London, 1755), p. 45; Greenwood, *[Apographe storges],* p. 83.

[625] Marten, *Gonosologium Novum*, p. 139; Michael Etmullerus, *Etmullerus Abridged: or, A Compleat System of the Theory and Practice of Physic* (London, 1703), p. 547.

leane, wrynckled, slender, illfavoured, thinne and lancke, and their lymmes weake and crooked'.[626]

Hence the bracketing of reproductive fecundity in manhood by periods of non-reproductive viability in childhood and old age was considered an ideal for only some men. The anonymous author of *Aristotles's Master-Piece* argued that this was only a general representation of the male reproductive life-cycle, but as to 'particulars, it often happens otherwise'. As a reflection of the environmentally engaged nature of physiological processes in early modern culture, it was diet, climate and the intensity of bodily movements that stripped certain ages of their reproductive prerogatives. Therefore, young males could find themselves 'exhausted in their Youth, and their Yard Shrivel'd up'.[627] The seed of young 'striplings', presuming any was made at all, was of poor quality and of a 'more liquid and flexible consistence thereof, so that it cannot stay in the womb, but will presently flow out again'.[628] Eventually atrophy of the testicles ensured: 'because either little or no [seminal] juice is made, or else is not perceived; juice is not made, or

[626] Lemnius, *The Touchstone of Complexions,* pp. 27-28; Smyth, *A New Treatise,* p. 35; Giambattista Morgagni, *The Seats and Causes of Diseases Investigated by Anatomy; In Five Books, Containing A Great Variety of Dissections, with Remarks ... Translated from the Latin of John Baptist Morgagni, Chief Professor of Anatomy, and President of the University at Padua, by Benjamin Alexander, M. D,* Vol. 2 (London, 1779), p. 644.

[627] Anonymous, *Aristotle's Master-Piece,* p. 4; Hart, *Klinike,* p. 327. In general terms this was alluded to by Lemnius, *The Touchstone of Complexions,* pp. 25-27.

[628] Sharp, *The Midwives Book,* pp. 87-88; Paré, *The Workes of that Famous Chirurgion,* p. 223; Crooke, *Mikrokosmographia,* p. 198; Laqueur, 'The Rise of Sex', pp. 803-804.

very little is made'.[629] Felix Platter termed these 'imperfect men' because they 'spend no seed in the act'.[630]

Speculations by physicians about the presence, or indeed absence, of adequate viable generative materials in the male body, also fuelled the idea that an erection of the penis at around the time of expected puberty was a misleading sign of growing reproductive fecundity. The erection of the penis was either symptomatic of growing sexual competence relating to the generation of seed or semen in the seminal vessels, or the more benign consequence of an 'abundance of spirits filling the hollow Nerves'.[631] Whilst this was an obvious sign of temporary or permanent impotency, there appeared to be equal concern that one of the characteristic signs of male maturity – the proudly erect penis – was unreflective of a male's true reproductive potential.[632] What seventeenth- and eighteenth-century physicians termed a 'priapisme' only mimicked puberty: 'an erection of the Yard without any desire of Venery, arising from a windy Spirit filling up the hollow Nerve of the part', or a 'Satyriasis', which was described as the swelling of the seminal vessels in the body of a young male without the production of seed or semen'.[633]

---

[629] Sennert, *Nine Books of Physick,* pp. 82-83.

[630] Platter, *Platerus,* p. 168.

[631] William Cowper, *Myotomia Reformata: or An Anatomical Treatise on the Muscles of the Human Body* (London, 1694), pp. 31-34; Alexander Ross, *Arcana Microcosmi, or, The Hid Secrets of Man's Body Discovered in an Anatomical Duel between Aristotle and Galen Concerning the Parts thereof* (London, 1652), p. 45; Crooke, *Mikrokosmographia,* p. 248.

[632] Platter, *Platerus,* p. 168; According to John Marten, an erect penis was unreflective of sexual desire and reproductive competence: John Marten, *Compendious Treatise of all the Degrees and Symptoms of the Venereal Distemper, In Both Sexes, with Remedies for their Respective Cures* (London, 1735), p. 186.

[633] Jonstonus, *The Idea of Practical Physick,* p. 64; Marten, *A Compendious Treatise,* p. 186.

The well-nourished male body was just as likely to deceive in its growing maturity as an under-nourished one. The very same 'exercises' that contributed to an even distribution of nourishment throughout the male body also brought on an erection which was stimulated by nothing more than the literal gravity of a sedentary life-style that was posited as the ideal preparation for a vigorous and virile manhood. Temperamentally cold, fat bodies were likely to be less fertile because they were unable to produce seed of good enough quality or quantity to allow a conception to take place. This was because, as Ambrose Paré commented, 'the more bloud goeth into fat, by so much the less is remaining to be turned into seed'. What seed was produced, moreover, was likely to have been of poor quality.[634] Therefore, the 'lying down' that was considered 'conduceth not a little to their [boys] erection', was doubted as a true sign of reproductive competence and puberty by another. It was referred to instead, as an 'unnatural erection of the Yard'. In these cases, a boy's erection was not the consequence of the generation of seed or semen but the filling up of the penis with fat or air and just as easily as it could be seen as a sign of impending maturity, it could also be interpreted as a disorder of continuing pre-pubescence, the legacy of which continued to make its presence felt in adulthood.[635]

Generally, then, both malnourished and sometimes over-nourished, sedentary bodies, were denied the growing reproductive and sexual competence that was associated with

[634] Sarah Toulalan, '"To[o] Much Eating Stifles the Child"', pp. 67, 75; Marten, *Gonosologium Novum,* pp. 23, 53.

[635] Glisson, *A Treatise of the Rickets,* p. 350; Cowper, *Myotomia Reformata,* pp. 229-230; Hippocrates [Attributed], The *Whole Aphorisms of Great Hippocrates Prince of Physicians: Faithfully Translated into English for the Benefit of Such as are Ignorant of the Greek & Latine Tongs* (London, 1610); Paré, *The Works of Ambrose Parey,* p. 567; Toulalan, '"To[o] Much Eating Stifles the Child"', pp. 65-93; Marten, *Gonosologium Novum,* p. 34.

puberty. It is quite tempting to see this as a double condemnation of the reproductive faculties of males at the top *and* bottom of the social scale. In practice, however, comparisons made between men of different classes also generated conflicting notions of male virility and the type of man this applied too. Some, including the anonymous author of *Aristotle's Master-Piece,* plumped for a conception of a fertile man that was more likely to appeal to the elite, described as corpulent, with little hair and an even temper. Others, like Nicholas Fonteyn, associated male virility with strength and musculature: 'The man ought to be of a strong constitution, well set, full of *muscles,* and neither too slender, nor too thick'.[636] These differences of opinion can be explained by the demands of a system of gender that on the one hand, condemned the excesses and effeminacies of the upper classes (which took the form of admonishments about moderating diet and avoiding luxurious living) and on the other hand, acquiesced to the idea that if the production and emission of male semen defined the sex of men in pre- and early modern Europe, then not all individuals could be called manly or belong to and represent the class of patriarchs.[637] These propositions generated contradictions until well into the eighteenth century, where contrasting discourses about elite and lower- class male sexuality coexisted at the same time, however uneasily.[638]

---

[636] Anon, *Aristotle's Master-Piece,* p. 188; Fonteyn, *The Womans Doctor,* p. 131; Philip Barrough, *The Method of Physick Containing the Causes, Signes, and Cures of Inward Diseases in Mans Body, from the Head to the Foote* (London, 1652), pp. 199-200; Culpeper, *Directory for Midwives,* pp. 48-49; John Archer, *Every Man His Own Doctor. In Two Parts. Shewing I. How Every One May Know His Own Constitution and Complection* (London, 1671), p. 7.

[637] Toulalan, '"To[o] Much Eating Stifles the Child"', p. 67; Patricia Simons, *The Sex of Men in Premodern Europe: A Cultural History* (Cambridge, 2011).

[638] Robin Ganev, 'Milkmaids, Ploughmen, and Sex in Eighteenth-Century Britain', *Journal of the History of Sexuality,* Vol. 16.1 (2007), pp. 40-67

Given contemporary observations of the class-based nature of puberty, it is also somewhat unsurprising that the bodies of 'poor men that are in want of Food' were sometimes held up for opprobrium for their lack of virility. Although these men's bodies generated a small amount of seed or semen (or none at all) depending on the perspective of individual writer, there was some doubt about whether this was enough to be classified as viable generative materials conducive to the production of healthy children and manly vigour. Because sufficient blood converted into semen was responsible for the 'pricking' of an erection, the sexual performance of poor men was perceived as insufficiently vigorous for successful procreation: they may 'do the feat, but they who have more blood do it to better purpose'.[639] Poor men typically had inferior temperaments: either a phlegmatic, melancholic or choleric complexion. Men of a sanguine temperament, in contrast, had no such trouble expressing the sexual and reproductive capabilities that were idealised in contemporary conceptions of virile men. They naturally abounded in the blood that provided for a particularly potent, persistent erection, and a prolific amount of seed or semen. The sanguine temperament did not having an obvious parallel in the class hierarchies of early modern society. In a number of ways, however, physicians associated sanguine men with upper-class men.[640] Yet even for elite men whose position conferred advantages in terms reproductive and sexual competence, superior virility still relied on the conformance to some behaviours and the avoidance of others. This was also informed by the notion that early modern men and women could be detached from the masculine 'hot' and female 'cold' temperaments. In the Galenic-Hippocratic model, which

[639] Platter, *Platerus,* pp. 169-170; van Diemerbroeck, *The Anatomy of Human Bodies,* p. 131; Sennert, *Nine Books of Physick,* p. 82; Marten, *Gonosologium Novum,* pp. 25-26.

[640] Greenwood, *[Apographe storges],* pp. 84-85; Hart, *Klinike,* pp. 326, 328; Marten, *Gonosologium Novum,* p. 106; Smyth, *A New Treatise,* p. 36.

continued to be relevant throughout the eighteenth century, successful conception depended upon women's temperaments being cold and moist and men's hot and dry.[641] The mutability of the temperaments, which was the focus of previous chapters, nevertheless meant that men could encounter sterility at different points in the life-cycle as a result of a humoural imbalance.[642]

The deviation from properly constituted asymmetrical gender roles in the female life-cycle was just as important in contemporary interpretations of the reproductive life-cycles of men. Men were represented within discourses of masculinity that both complemented and opposed those of femininity. Where women were conceptualised as sedentary, men were 'hotter, because his body was made to endure labour and travel, as also that his mind should be stout and invincible'.[643] Although too much physical labour was damaging to defined and prolonged periods of fecundity in manhood, the conception of manhood also privileged activity. Thus, idleness was thought equally destructive to the reproductive life-cycle of elite men. Men who lived the sedentary life-style associated with females were thought to take on the same cold 'female' constitution. Like women deviating from their properly constituted cold temperament, colder men were infertile and their sexual efforts derisory.[644] Traditionally, this was embodied in the classical

[641] Toulalan, "'The Act of Copulation being Ordain'd by Nature as the Ground of all Generation'", p. 525.

[642] Toulalan, "'To[o] Much Eating Stifles the Child'", p. 73.

[643] Crooke, *Mikrokosmographia,* pp. 272-273; Henry Cuff, *The Differences of the Ages*, pp. 106-107; Linda Nicholson, 'Interpreting Gender', *Signs,* Vol. 20.1 (1994), p. 81.

[644] William Vaughan, *Approved Directions for Health, both Naturall and Artificiall: Deriued from the Best Physitians as well Moderne as Auncient* (London, 1612), pp. 64-150. In this book Vaughan followed the emphasis of the Hippocratic corpus on environmental influences as the constitutional building blocks of the body. In this also, Vaughan, like many of his contemporaries, placed greater purchase on the alterable nature of the

figure of the eunuch, but as men were represented across the spectrum of all four temperaments, a description of impotency that involved a 'loss of vigour, courage, and masculine heat', could arbitrarily be applied to many men.[645]

Indeed, whilst want and hard work provided a template for the diminished lower-class male body, 'luxury and gluttony' performed much the same function in encouraging the effeminacies of a cold temperament in the upper-class males. Both life-styles encouraged the impotence and infertility that was associated with old age. Whilst these men were not always thought of as completely impotent and infertile, as opposed to women who departed from their properly constituted cold temperament, a number of physical and emotional characteristics nevertheless singled out certain men as sexually incapacitated. 'Weakly Men get most Girls, if they get any Children at all', wrote Nicholas Culpepper, because men of a 'cold Constitution' were not as virile as men with a 'hot' temper.[646] The weakly man's penis, moreover, was stubbornly flaccid, 'from a faulty unpreparedness in

---

temperaments according to habit and custom. This was the outcome of an evolution in the meaning of the term *êthos*, from its original reference to 'dwelling place', to its later denotation of 'habits and customs'. In terms of the relationship between the *chumoi,* or temperament, and *êthos,* the temperament was held to have a secondary role. Jacques Bos, 'The Rise and Decline of Character: Humoral Psychology in Ancient and Early Modern Medical Theory', *History of the Human Sciences,* Vol. 22.3 (2009), p. 437; Anon, *Aristotle's Compleat Master-Piece*, p. 50. Successful generation here was linked to the relative vigour of both men and women in the sexual act.

[645] Ross, *Arcana Microcosmi*, pp. 44-45; Adrian von Mynsicht, *Thesaurus & Armamentarium Medico-Chymicum: or A Treasury of Physick. With the Most Secret Way of Preparing Remedies Against all Diseases ... Faithfully Rendred into English by John Partridge Physician to His Majesty* (London, 1682), p. 176; John Smyth extended this to all but men of a 'hale constitution': Smyth, *A New Treatise,* p. 43.

[646] Culpeper, *Directory for Midwives,* pp. 48-49.

the *Genital Juice,* falling short of its stimulating Quality'.[647] 'Easily hurt by cold things' too, these men also lacked strength and hardiness.[648]

Contemporary writers associated specific features of the sexually incapacitated man's body, including pallor, hairlessness, and softness, with a lack of speed and endurance. All the definitions of impotence pointed to notions of weakness, deficiency, or powerlessness. Seventeenth- and eighteenth-century meanings of impotence were related to a number of aspects of power including: 'want of strength or power to perform anything; utter inability or weakness; helplessness', and 'wholly lacking sexual power'. The word also had specific connotations for a man's character. Impotence could mean 'not master of oneself; unable to restrain oneself' and was 'frequently used to denote moral weakness, inability to follow virtuous courses or to resist temptation'. These deficiencies, taken together, indicate that impotence meant more than just sexual incapacity. Manhood incorporated the characteristics of strength, power, mastery, and morality, whereas impotence embodied the absence of these qualities.[649] Self-mastery defined early modern manhood. Unless a man could control his worst excesses, he was not fit to be a mature man and thus assume responsibility for governing others.[650] Readings of this nature also illustrated how honourable manhood could be endangered through the loss of sexual control.[651] Though, as we shall see, the broadly defined theme of 'control' and its loss would have a profound impact on the positioning of different

[647] Marten, *Gonosologium Novum,* p. 43.

[648] Archer, *Every Man His Own Doctor,* p. 7.

[649] *OED,* s.v. 'impotence'; Foster, 'Deficient Husbands', pp. 732-733; Marten, *Gonosologium Novum,* p. 34.

[650] Shepard, *The Meanings of Manhood*, pp. 77-80.

[651] Foyster, *Manhood*, pp. 1-40.

types of men in relation to the life-cycle, the urge to moderation in a man's expression of his sexuality would remain constant over time. This control manifested itself in a number of ways which not only concerned impotence, but also the prerogatives of manliness that intersected with ideas of variation in the reproductive life-cycle of males. A focus on the sexual conduct of men, and how this altered the terms on which the reproductive life-cycle was based, continued throughout the seventeenth and eighteenth centuries.

Sexual potency was an unstable category. It was required not only a 'proper Conformation' of the body but also a 'difficult exercise of the will'. Contemporaries warned of the dangers of corruption in the bodily humours if the seed was retained for too long, far more prominent in medical discourse, however, were reminders about the dangers of a misuse of sexual potency.[652] As most medical writers of the period assumed that a man had a limited store of seed, he also had to moderate his sexual relations and carefully ration his generative materials.[653] Men were reminded that 'Seasonable and moderate venus, alleviates nature, and helps digestion: but immoderate ... dries the body, hurts the brain and nerves, causeth trembling, dulls the sight, debilitates all the faculties, hastens old age, and shortens life'.[654] Largely due to these influences, reproductive

[652] Mueller, 'Fallen Men', p. 90.

[653] This common view is found in, Anonymous, *Aristotle's Last Legacy, Unfolding the Mysteries of Nature in the Generation of Man* (London, 1749), p. 51; Mueller, 'Fallen Men', p. 91; John Marten, *Gonosologium Novum*, p. 41. For an extended discussion of this view which derives from the ancient notion of the 'incontrovertibility' of bodily fluids see, Thomas Laqueur *Making Sex: Body and Gender from the Greeks to Freud* (Cambridge, 1990).

[654] Everard Maynwaringe, *Vita Sana & Longa. The Preservation of Health and Prolongation of Life. Proposed and Proved* (London, 1669), pp. 98-99; Lemnius, *The Secret Miracles of Nature,* p. 186; Hart, *Klinike,* pp. 326-327; John Harris, *The Divine Physician, Prescribing Rules for the Prevention, and Cure of Most Diseases, As Well of the Body, As the Soul* (London, 1676), p. 38; Marten, *Gonosologium Novum,* p. 50.

fecundity was relational, as we have seen, to aging. The conduct and control of men, hence the desirable attributes of manhood, mattered in determining whether reproductive senescence occurred prematurely, or as it was hoped, only in old age. In other words, reproductive senescence could begin its decline before the age of 45, but if a man ordered his life correctly, he could retain potency until 80 years old.[655]

The male life-cycle was also relational to the female life-cycle. Where the male seed was hot and dry and the female cold and moist, successful conception was assured. However, because a woman were supposed to crave seed for her orgasm that also came with the heating of her colder nature, the prerogatives of *her* life-cycle came at the expense of *his.* He who 'vainly strives to please her', according to John Marten, 'is hastening himself to the Grave'.[656] Hence both seventeenth- and eighteenth-century contemporaries expressed sentiments about the dangers of immoderate venery.

Sexual acts that were considered dangerous to a man's health expanded during the eighteenth century to include growing concerns with masturbation and the consequences of semen loss during any kind of excessive sexual activity. The idea that pressure and a 'violent and unnatural use, forcing and irritation' of the genitals and their

---

[655] Greenwood, *[Apographe storges],* p. 83; Marten, *Gonosologium Novum,* p. 95; Etmullerus, *Etmullerus Abridged,* p. 562; Georges Louis Leclerc Buffon, *Barr's Buffon. Buffon's Natural History, Containing A Theory of the Earth, a General History of Man, of the Brute Creation, and of Vegetables, Minerals,* Vol. 4 (London, 1797), p. 57.

[656] Marten, *Gonosologium Novum,* p. 90; Women were sometimes cast as thieves stealing the life-force of men to supplement their traditionally deficient temperament. A good example of this is found in Archer, *Every Man His Own Doctor,* pp. 103-104. Archer reminded his male readers that sex was no more than a honey-trap for which men would suffer 'the evacuation of your own heat and vigour ... for a toy of no value'. Sarah Toulalan, '"Age to Great, or to Little, Doeth let Conception"', pp. 279-295.

glands caused seminal incontinence and genital discharge was widely accepted at this time.[657] Indeed, eighteenth-century writers like their seventeenth-century predecessors, continued to draw the same parallels between a man's moral weakness and the lack of self-control that was associated with a corresponding loss of physical control. In a society where honour and status depended to a large degree on conformance with accepted standards of self-control, men who behaved otherwise were no longer masters over their own bodies. The straining and excessive relaxation of the genital fibres caused by injudicious sexual engagements (lone or otherwise) meant a man could literally became incontinent, 'dissolving, in extreme cases, into watery excreta flowing from all orifices at once'.[658]

Sexual and reproductive competence did not necessarily equate to mastery over one's own body, however, and not all men were favourably placed in a life-cycle that emphasised a persistently virile state from puberty until old age. To a certain degree, this was encouraged by a gradual shift towards a two-sex model of the body, which separated male and female anatomy, and where gender became important in the labelling of generative dysfunction. With the introduction of the term 'impotence', as Jennifer Evans

[657] Masturbation was discussed in the seventeenth century but it was not until the eighteenth century, with *Onania, or the Heinous Sin of Self-Pollution, and All its Frightful Consequences, in Both Sexes, Considered With Spiritual and Physical Advice for Those Who Have Already Injur'd Themselves by This Abominable Practice* (London 1716) that the moral and religious aspects of masturbation began to be discussed. Michael Stolberg, 'An Unmanly Vice: Self-Pollution, Anxiety, and the Body in the Eighteenth Century', *Social History of Medicine,* Vol. 13.1 (2000), pp. 1-21; Anon, *The Crime of Onan [ ] or the Heinous Vice of Self-Defilement with All Its Dismal Consequences* (London, 1723), p. 36.

[658] Stolberg, 'An Unmanly Vice', p. 10.

has argued, it became more acceptable to label a man as sexually incapable.[659] The distinctiveness of both genders has also been emphasised as a consequence of the shift from a one-sex to a two-sex model of the body, which scholars have variously linked to an increasing stress on opposites rather than hierarchy. According to some, this contributed to a 'new framework of gender relations' that can be incorporated into a more general sexual revolution and which was linked to the rise of a separate spheres ideology.[660] Although such thinking was not new to the eighteenth century – there appears to be some merit in the idea of the two-sex model, given the ways in which contemporaries approached anomalies in the reproductive life-cycle. During the seventeenth century, men of a naturally cold temperament, or men who descended into a state impotence and infertility as a result of a loss of mastery over their bodies, were conceptualised as specific instances of variations *within* the life-cycle, albeit weak examples. This was characterised by the generation of only female children and the less than pronounced physiological changes that took place during puberty and manhood. Mid-late eighteenth-century writers, in contrast, took a more radical approach to the differences that existed amongst men in respect of reproductive and sexual competence.

Eighteenth-century writers sought to exclude inferior men from the reproductive prerogatives associated with manhood in a number of ways, although the most prominent involved comparisons with the male haemorrhoidal sufferer. This comparison

[659] Evans, "'It is Caused of the Womans Part or of the Mans Part'", pp. 439-457.

[660] Harvey, 'The Substance of Sexual Difference', pp. 202-223; Anthony Fletcher, *Gender, Sex and Subordination in England 1500-1800* (New Haven and London, 1995), pp. xvii-xviii, 291, 402; Robert B. Shoemaker, *Gender in English Society, 1650-1850: The Emergence of Separate Spheres?* (Abingdon and New York, 1998), pp. 85, 31-5, 313-314; Tim Hitchcock, 'Redefining Sex in Eighteenth-Century England', *History Workshop Journal,* Vol. 41 (1996), pp. 72-90; Tim Hitchcock, *English Sexualities, 1700-1800* (Basingstoke, 1997), p. 49.

relied on the one-sex model of the body, where men's and women's bodies were similarly aligned and given certain conditions, perceived as interchangeable. Where definitions of 'man' and 'woman' still relied on gendered ideals of behaviour and life-style, as well as sex, it was somewhat inevitable that the unalterable lines of opposition that constituted the two-sex model of the body would dissolve into hierarchies that cut across differences between men and women, but also those between men. Hence the body of the male haemorrhoid sufferer was analogous to the plethoric, menstruating female body, and also incorporated the characteristics of men with colder temperaments from the seventeenth century. The haemorrhoid sufferer was also depicted negatively: piles were a mark of an 'undisciplined man'. Men with bleeding piles also had melancholic tendencies, bulky bodies with a loose, spongy texture, and lived sedentary lives. Immoderation in the non-naturals and gluttony in particular, triggered the piles. In 1779 John Freind saw men as falling 'easily' into the distemper when they had 'too *idle* a life', while William Cullen advised men against strong liquor, overeating and sedentary lifestyles to prevent the plethora. Significantly, like haemorrhoidal bodies, other leaky males – those suffering from seminal or urinal fluxes – were sometimes paralleled with menstrual flows, overly lax fibres and ruined constitutions that were unable to share in the dividends of manhood.[661] Suggesting a similar but more permanent means of marginalising men that did not live up to the expectations of virile manhood (and arguably preventing the falsification of the life-cycle by these instances of the male 'other'), some eighteenth-

[661] Smith, 'The Body Embarrassed?', pp. 31-35; Brookes, *The General Practice of Physic,* pp. 137, 143; Freind, *Emmenologia,* p. 67; Cullen, *The First Lines,* p. 305; Anne C. Villa, 'Sex, Procreation and the Sedentary Life from Tissot to Balzac', *Eighteenth-Century Studies,* Vol. 35.2 (2005), pp. 225-257.

century writers connected 'a sedentary life, high feeding ... or venereal incentives', with early death – as 'it prognosticats fast living, an universal Weakness, and a short Life'.[662]

Eighteenth-century medical discourse also involved overlapping models of the body that incorporated older notions of the humours and newer ideas of fibre-based constitutions. The unfolding fibres of the nervous body privileged the more robust constitutions of lower-class boys in the achievement of a successful puberty, but at the expense of a prolonged period of virility in manhood. Their wealthier, constitutionally speaking, more delicate counter-parts, on the other hand, were less vigorously virile (if indeed sexually vigorous) from puberty, but faced longer periods of sexual and reproductive fecundity from manhood onwards.[663] For those who were stuck in the trough of older notions of the humours, or early eighteenth-century notions of fibre-bases constitutions, the continuity that either deprivation or plenty brought to the development of sexual and reproductive competence was struck from a very young age. Concerns with upper-class degeneracy in the eighteenth century also meant that some writers did not always favour one class of males over another in this respect. Sometimes contemporary physicians favoured the reproductive potential of upper-class males and sometimes they viewed lower-class males as more likely to be virile for longer periods of time.[664]

---

[662] Etmullerus, *Etmullerus Abridged,* p. 563; Boerhaave also addressed this more broadly in terms of the reproductive capacities of both sexes: *Boerhaave, Boerhaave's Academical Lectures ...* Vol. 5, pp. 39-119.

[663] Premature aging in fibre-based medicine was an inevitable trade-off of a more active, physical life style. For more on this, see Chapter 3. Also: James Mattrick Adair, *Commentaries on the Principles and Practice of Physic. Illustrated by Pathological Tables and Practical Cases. Being An Attempt, on a New Plan, to Connect the Several Branches of Medicine, and to Place the Practice of it on a Rational and Solid Foundation* (London, 1772), pp. 70-82.

[664] The idea that conduct in youth determined the course, for better or worse, of the reproductive life-cycle can be found in G. Archibald Douglas, *The Nature and Causes of Impotence in Men, and Barrenness in Women*

The idea that the physically hardworking, lower-class male, was better equipped for a successful puberty and a prolonged period of virility in manhood involved the displacement of the plethoric model of semen production. Whilst lower-class males were thought to generate less semen than men with more sedate life-styles in the seventeenth century, the adoption of an alternative model in the eighteenth century allowed for a partial reversal of this thesis. The idea stemmed from concepts of the body's production of blood. A persistent topic as the century wore on was quantity: the precise number of such units or 'spirits' in the bloodstream. It was theorised by the physicians Thomas Fuller and Samuel Tissot, that the blood so crucially involved in the alchemy of semen production was *increased* not *diminished* by exercise. Men who worked and worked hard, were feasibly more prodigious than men who lived a life of ease. Exercise and motion – even more than diet – was thought to raise the blood-count. The idea was straightforward: hard motion stirred the brain to produce ever more spirits. The message also clearly endorsed exercise: the rustic's hard labour over the sedentary man's inertia. It was, according to G.S. Rousseau, an extension of a paradigm that celebrated the 'noble peasant' and denigrated 'sedentary arm-chair types'. Whilst the 'sweaty farmer and

---

Explained (Dublin and London, 1758), p. 25; Similar sentiments were reflected in eighteenth-century treatises on masturbation, see above, note 123. Select examples in favour of the reproductive/sexual potential of lower-class males included: Sir John Floyer, *The Art of Preserving Old Men's Healths, Explain'd: in Twenty Chapters* (London, 1738), p. 6; Etmullerus, *Etmullerus Abridged,* pp. 547, 556. J. H. Smyth highlighted the dangers of 'too laborious or sedentary life' in decreasing fertility/sexual potency. Nevertheless, his prescriptions concerning diet and gentle exercise were more applicable to men with a sedentary life-style: Smyth, *A New Treatise,* p. 43. William Cullen thought poverty and wealth were equally destructive to the reproductive/sexual potency of men: Cullen, *The First Lines,* p. 246.

laborer' were extolled, 'scholars and students are displayed as weak, degenerate creatures, even if no theory of degeneration is yet in place'.[665]

This was also a feature of the less scientific but no less powerful eighteenth-century trend of viewing labourers, primarily because of their closeness to the land, as more fertile. Because labouring men were exposed to fresh air and physical exercise (a key theme in medical writing in the 1700s), they were thought of as more virile and less likely to suffer from impotence and infertility until old age than their urban (usually wealthier) counterparts.[666] Eighteenth-century medical treatises held that a prolonged period of virility in manhood was dependent upon health, prescribed exercise and a good diet. Hard beds and fresh air were also considered healthy and conducive to increased sexual potency. Conversely, luxuries such as feather pillows and soft blankets were deemed bad for a man's health.[667] This advice was not without a broader context either. The sexual and reproductive vigour of rural labourers assuaged the concerns of many eighteenth-century contemporaries that England was becoming depopulated. The constant need for healthy people to fight wars and feed the population was part of the reason why working-class men were construed as more virile. While views about health and depopulation contributed to positive representations of the lower-class male life-cycle, the luxuries inherent in urban society, which was also topical at the time, provided opportunities to

[665] George S. Rousseau, *Nervous Acts: Essays on Literature, Culture and Sensibility* (Basingstoke, 2004), pp. 23-24; Thomas Fuller, *Medicina Gymnastica: Or a Treatise Concerning the Power of Exercise, With Respect to the Animal Oeconomy* (London, 1705), p. 21; David Auguste Samuel Tissot, *An Essay on Diseases Incidental to Literary and Sedentary Persons. With Proper Rules for Preventing their Fatal Consequences* (London, 1768).

[666] Ganev, 'Milkmaids, Ploughmen', pp. 43-49.

[667] Roy Porter and Lesley Hall, *The Facts of Life: The Creation of Sexual Knowledge in Britain, 1650-1950* (New Haven, 1995), pp. 112, 33.

denigrate the ineffectual sexual and reproductive efforts of the upper classes. The love of luxury, and the destruction it wrought to the body, also destroyed virility and strength. By way of contrast, in the bodies of the poorest members of eighteenth-century society, 'the prolific powers of nature have free scope to display themselves'.[668]

The 'natural' potency of the lower-class male, as it was constructed by eighteenth-century writers, had a downside however. The large penis that was associated with the labouring male was also associated with stupidity. Even when he was criticising the upper classes, writers like John Howlett hinted at an implicit disdain for the lower classes as either too promiscuous or too foolish to restrain their sexuality.[669] This would have been of little consequence if more contemporary writers believed that semen was increased by activity – sexual or otherwise – but in most cases, seventeenth-century ideas of the seminal plethora remained prominent. Thus deprived of the control that properly constituted ideas of manhood and the rationing of a seminal plethora that was finite, the lower-class male was thought ill-equipped to regulate a life-style that required careful moderation.[670] The callosity in the 'office of generation', which encouraged impotence

[668] Ganev, 'Milkmaids, Ploughmen', pp. 46-48; James Graham, *A Lecture on the Generation, Increase, and Improvement of the Human Species* (London, 1780), p. 4.

[669] John Howlett, *An Examination of Dr. Price's Essay on the Population of England and Wales and the Doctrine of Increased Population in This Kingdom Established by Facts,* ed., A.M. Kelly (New York, 1968, First published in London, 1781), pp. 27-29; For more examples in contemporary popular literature see, Ganev, 'Milkmaids, Ploughmen', pp. 51-52.

[670]As previous chapters have shown, moderation in the non-naturals was a ubiquitous piece of advice that regime writers offered to their readers. In this context see: Anon, *Aristotle's Compleat Master-Piece*, pp. 51-52. Moderation was extolled here but it was weighted in favour upper-class sexuality. As it was noted by this author, 'Without good Drink and Feeding high, Desire to Venus soon will die'. Anonymous, *Aristotle's*

and infertility, continued to be viewed as the natural consequence of a body that was over-worked and under-nourished (or otherwise old). In these instances, regime writers were adept at taking the reduced circumstances of certain men and attributing certain physical phenomena, like impotence and infertility, to a misuse of human agency. Consequently, it was the working man's failure to understand his own limits that deprived him of the prolonged period of reproductive fecundity that he would otherwise have had in his middle-years. In eighteenth-century ideas of nervous sensibility, as we saw in Chapter 3, not all men were thought to understand the limits of moderation. A number of eighteenth-century writers continued to assert that only the idle or the wealthy elite (or both) could be trusted to know intuitively which behaviours suited their particular constitution, and those which would exceed and destroy it. Only a great delicacy in the confirmation of the nerves of the upper-class male allowed him to understand where the ease and pleasure of exercise left off and a dangerous excess took over.[671] In the case of the labouring classes (the frequently cited counter-point against which the elite body was defined), the robust nature of the body's fibres, with their ensuing lack of sensibility, prevented the mind from understanding the limits of the body's physical endurance which it often exceeded.[672] As a consequence, a working man's

---

Book of Problems, with Other Astronomers, Astrologers, Physicians, and Philosophers, Wherein is Contain'd Divers Questions (London, 1776), p. 27; Etmullerus, *Etmullerus Abridged,* p. 547

[671] Boerhaave*, Boerhaave's Academical Lectures ...* Vol. 5, p. 128; Fothergill, *Rules for the Preservation of Health,* p. 59; Buffon, *Barr's Buffon,* p. 87; Adair, *Medical Cautions,* p. 391.

[672] Cullen, *First Lines,* pp. 245-246; George Rousseau, 'Temperament and the Long Shadow of Nerves in the Eighteenth Century', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), p. 364; Adair, *Medical Cautions,* p. 404.

'vigour' would shine, albeit briefly, and only before the privations of premature old set in and a man lost what once made him a man.[673]

Conclusion

Ideas of subordinate and inferior manhood were at the heart of contemporary interpretations of the male reproductive life-cycle. Communicated in different ways, and through different models of the body, as these changed over time, some men were more likely to fulfil for longer the reproductive prerogatives that originated with puberty and concluded with old age. Ideas of the normative male life-cycle also reflected the class biases that permeated early modern society. This was communicated both explicitly and implicitly through medical models of the body that dominated seventeenth- and eighteenth-century medical discourse. Ideas of the generation of the seminal plethora were deeply embedded in the ideas of self-control and rationality that underpinned ideas of manhood. Primarily, these elevated standards could only be met by men from the upper classes, not as it would seem by those from the lower orders. Nevertheless, even men who were well placed in relation to these ideals were responsible for continually earning the right to the status of honourable manhood. With its admonishments about the dangers of excess and the destruction this wrought to a man's reproductive stability ideas of perfect manhood were inseparable from contemporary understandings of the successful fulfilment of each stage of the life-cycle.

These points constitute elements of continuity in seventeenth- and eighteenth-century medical thought. There were elements of departure, here, too. I have argued that men

[673] Smyth, *A New Treatise,* p. 35; Cullen, *First Lines,* pp. 177, 245-246; Buchan, *Domestic Medicine*, p. 46.

who struggled to fulfil the prerogatives of early modern manhood were, discursively at least, treated more severely for their failures in the eighteenth than in the seventeenth century. In the earlier period contemporaries allowed for the phenomenon of lesser men, expressed in terms of their weak efforts at physical change during puberty and the production of female children. In the eighteenth century, amidst concerns about the 'leaky' male body, *vis-á-vis* the figures of the masturbator and the haemorrhoid sufferer, men were relegated to the status of the feminine. In many respects, the sex-gender system that mediated contemporary understandings of variations within or departures from the expected flow of the reproductive life-cycle in women were evident in interpretations of the male life-cycle as well. To all intents and purposes an essentially unstable system of sexual difference, shored up by particular ideas of gender, also formed the basis for the exclusion of those that failed to live up to these ideals. In other respects, the male reproductive life-cycle was very different from the female life-cycle. The satisfaction of the reproductive imperatives of the female body endangered a man's reproductive fecundity to such an extent that some contemporaries believed that the fulfilment of *her* life-cycle came at the expense of *his.* Relational too, was the male life-cycle to aging. Unlike females departing from their traditional cold temperament to take on a hotter male temperament, men were thought to age sooner, with the consequence that defined periods of reproductive fecundity before the impotence of old age set in, was an inherently moveable feast.

CHAPTER 6: AGE, RAPE AND THE BODY: A CASE STUDY

The ideas of the female life-cycle that we encountered in Chapter 5 were also important in the adjudication of rape. The testimony of medical witnesses, such as midwives, physicians and surgeons played a crucial role in determining whether the frequently cited genital injuries discovered on the bodies of female rape victims were consistent with forced penile penetration. The age of the victim was crucial in determining medical witnesses' expectations in this respect. I refer here to contemporary understandings of female sexual development. Indeed, how age and aging was understood in relation to bodies of young female children and mature women influenced medical witnesses' expectations of what the raped body should look like. This will be demonstrated in a case study of rape trials that featured in the *Proceedings of the Old Bailey* from 1674. The *Proceedings* illuminate how the development of forensic medicine in the early modern period was inseparable from questions about a woman's nature and the nature of her body.[674] This was true for females of all ages, as I will demonstrate in the case study that forms the basis for Chapter 6: Age, Rape and the Body.

In recent years historians have demonstrated how in different ways, early modern attitudes to rape reflected cultural understandings of age and the life-cycle.[675] This has

---

[674] Robert B. Shoemaker, 'The Old Bailey Proceedings and the Representation of Crime and Criminal Justice in Eighteenth-Century London', *The Journal of British Studies,* Vol. 47.3 (2008), pp. 559-580; Julia Rudolf, 'Gender and the Development of Forensic Science: A Case Study', *English Historical Review,* Vol. 123.503 (2008), pp. 924-946.

[675] For example: Sarah Toulalan, '"Unripe Bodies": Children and Sex in Early Modern England', in Kate Fisher and Sarah Toulalan eds., *Bodies, Sex and Desire from the Renaissance to the Present* (Basingstoke, 2011), esp. pp. 140-144; Sarah Toulalan, '"Age to Great, or to Little, Doeth let Conception": Bodies, Sex and the Life

proved a natural avenue of enquiry given that a 1576 Act defined rape as 'the unlawful and carnal knowledge and abuse of any woman above the age of ten years against her will, or of a woman-child under ten years with her will, or against her will'.[676] However, early modern scholars have contested the meaning of the Act and how this pertained to the protection of children, the age of discretion and how this in turn related to broader contemporary understandings of childhood and sexuality. Some scholars have taken the age distinctions of the Act literally: as an insuperable chronological barrier that separated children from adults at the age of ten years. This has also been taken to reflect contemporary indifference to children's sexuality by lowering the age of consent by two years, from twelve to ten years.[677]

Cycle, 1500-1750, in Sarah Toulalan and Kate Fisher eds., *The Routledge History of Sex and the Body 1500 to the Present* (London and New York, 2013), pp. 279-295; Julie Gammon, '"A Denial of Innocence": Female Juvenile Victims of Rape and the English Legal System in the Eighteenth Century', in Stephen Hussey and Anthony Fletcher eds., *Childhood in Question: Children, Parents and the State* (Manchester, 1999), pp. 74-75; Garthine Walker, 'Everyman or a Monster?: The Rapist in Early Modern England, c. 1600-1750', *History Workshop Journal,* Vol. 76.1 (2013), pp. 5-31; Martin Ingram, 'Child Abuse in Early Modern England', in Michael, J. Braddick and John Walter eds., *Negotiating Power in Early Modern Society: Order, Hierarchy and Subordination in Britain and Ireland* (Cambridge, 2001), pp. 63-84; Sarah Toulalan, '"Is He a Licentious Lewd Sort of Person?": Constructing the Child Rapist in Early Modern England', *Journal of the History of Sexuality,* Vol. 23.1 (2014), pp. 21-52; Antony E. Simpson, 'Vulnerability and the Age of Female Consent: Legal Innovation and its Effect on Prosecutions for Rape in Eighteenth-century London', in G.S. Rousseau and Roy Porter eds., *Sexual Underworlds of the Enlightenment* (Manchester, 1987), pp. 181-205.

[676] Statue of Elizabeth I, 1576, 18, cap. 7. See also, Samuel Carter, *The Infants Lawyer: Or the Law (Ancient and Modern) Relating to Infants* (London, 1697), p. 253; Sir Edward Coke, *The Third Part of the Institutes of the Laws of England* (London, 1817), p. 60.

[677] Jennie Mills, 'Rape in Early Eighteenth-Century London: A Perversion "So Very Perplex'd"', in Julie Peakman ed., *Sexual Perversions, 1670-1890* (Basingstoke, 2009), pp. 140-166; Gammon, '"A Denial of Innocence"', pp. 75-95.

Close scrutiny of the Act by certain early modern scholars has overturned these assumptions. The idea that children aged ten and eleven were unprotected by the law and expected to demonstrate consent has been revised considerably. Indeed, far from being acceptable, sex with girls of ten or eleven was still a misdemeanour even if the child had consented and it was a felony if she did not. Although there were ambiguities about whether the 1576 Act lowered the age of consent by two years from that set by the First Statute of Westminster (1285), the 1576 Act was intended to clarify the standards of proof applicable to females of various ages. According to jurists, such as Matthew Hale, carnal knowledge of a girl between the ages of ten and twelve years constituted rape no matter what the circumstances. He cited as his authority the First Statute of Westminster, as that alone specifically referred to this age-group. Since the latter statute placed the age of consent at twelve, he argued, subsequent legislation, which did not address the age of consent *per se*, must be considered to follow the statute on this point. The 1576 Act therefore reflected continuity on the age of consent for girls.[678]

Whilst some are of the opinion that the court did not highlight the provisions made in the 1576 Act for the protection of girls of 10 and 11 years old, statistics from the Old Bailey suggest otherwise.[679] The age of the victim mattered: men accused of the rape of girls under the age of 14 were more likely to be convicted than men accused of raping females aged 14 and over. Indeed, between the years 1674-1749, the conviction rate for

[678] Garthine Walker, 'Everyman or a Monster?', p. 19; Simpson, 'Vulnerability and the Age of Female Consent', pp. 183, 186; Sir Matthew Hale, *Historia Placitorium Coronae. The History of the Pleas of the Crown,* Vol. 2, eds., Sollom Emlyn and George Wilson (London, 1800), p. 631; Edward H. East, *A Treatise of the Pleas of the Crown,* Vol. 2 (London, 1803), p. 434.

[679] Simpson, 'Vulnerability and the Age of Female Consent', pp. 186-187.

girls aged 9 and younger was 17.1 per cent. In trials where the girls raped were 12 or 13 it was 23.08 per cent, much higher than for adult women and girls aged 14 years and over at 13.73 per cent.[680]

Therefore, men accused of the rape of young girls faced a greater chance of being convicted than men accused of raping females that were over the age of fourteen. In general, however, prosecutions remained rare. Whilst early modern scholars have agreed that convictions for rape were low, they have disagreed on the reasons why women and children were either more or less likely to secure convictions against their attackers.[681] Some historians have pointed out general impediments to prosecutions that included the idea that women were implicated in the very acts for which they sought justice from the courts.[682] Others have gone so far as to suggest that juries knowingly acquitted men on

[680] Garthine Walker, 'Rape, Acquittal and Culpability in Popular Crime Reports in England, *c.* 1670-*c.* 1750', *Past and Present,* Vol. 220.1 (2013), p. 134.

[681] The Conviction rate for rape at the Old Bailey during the period 1700-1799 was 16 per cent: Gregory Durston, 'Rape in the Eighteenth-Century Metropolis: Part I', *Journal for Eighteenth-Century Studies*, Vol. 28.2 (2005), p. 168; Donatella Pallotti, '"A Most Detestable Crime": Representations of Rape in the Popular Press of Early Modern England', *LEA-Lingue e Letterature d'Oriente e d'Occidente,* Vol. 1 (2012), p. 288; Laurie Edelstein, 'An Accusation Easily to be Made? Rape and Malicious Prosecution in Eighteenth-Century England', *The American Journal of Legal History,* Vol. 42.4 (1998), p. 367; Jennine Hurl-Eamon, *Gender and Petty Violence in London, 1680-1720* (Columbus, 2005), p. 33; Garthine Walker, 'Rereading Rape and Sexual Violence in Early Modern England', *Gender and History,* Vol. 10.1 (1998), p. 1.

[682] For a succinct summary of this historiography, see Walker, 'Rape, Acquittal', pp. 115-118; Laura Gowing, *Domestic Dangers: Women Words, and Sex in Early Modern London* (Oxford, 1996), pp. 59-110; Walker, 'Rereading Rape', pp. 1-25; Garthine Walker, *Crime, Gender and Social Order in Early Modern England* (Cambridge, 2003), pp. 55-60; Antony E. Simpson, 'The "Blackmail Myth" and the Prosecution of Rape and its Attempt in

the basis that sex and violence were regarded as inseparable, thus, 'it was probably thought unreasonable to hang a man ... for doing what comes "naturally"'.[683] Another reason suggested for the infrequent prosecution of rape involves the assumption that juries were more likely to give accused men the benefit of the doubt, and in some cases, that not-guilty verdicts affirmed male innocence. These interpretations invariably privilege female culpability and even complicity over the potential guilt of accused men to such an extent that it is the small number of successful prosecutions achieved over the period 1674-1800 that begin to require an explanation. [684]

Whilst there is little doubt that both adult women and children faced formidable, sometimes insurmountable, barriers to securing convictions against their attackers, the reasons for acquittals were not reducible to any one cause.[685] These obstacles tended to be specific to the age of the victim and also conveyed the idea that rape, for a number of reasons, could not be proved. Rape was, as Mathew Hale argued, 'an accusation easily to be made and hard to be proved'. He also went on to say that 'In some cases ... evidences go far to prove a person guilty, though there be no express proof of the fact committed by him'. Hale's words stemmed not from misogyny or bigotry but from his concerns with

---

Eighteenth-Century London: The Creation of a Legal Tradition', *The Journal of Criminal Law and Criminology,* Vol. 77.1 (1986), pp. 105-150.

[683] Gregory Durston, *Victims and Viragos: Metropolitan Women, Crime and the Eighteenth-Century Justice System* (Bury St. Edmonds, 2007), pp. 170-172; Edward Shorter, 'On Writing the History of Rape', *Signs,* Vol. 3 (1977), pp. 471-482; Mills, 'Rape in Early Eighteenth-Century London', pp. 141, 149.

[684] Gwenda Morgan and Peter Rushton, *Rogues, Thieves and the Rule of Law: The Problem of Law Enforcement in North-East England, 1718-1820* (London, 1998), p. 57; Hurl-Eamon, *Gender and Petty Violence*, p. 40; Mills, 'Rape in Early Eighteenth-Century London', pp. 151-154.

[685] Walker, 'Rape, Acquittal', pp. 115-142.

'balancing the demands of evidentiary proof and a defendant's presumption of innocence against the conflicting desire to convict those accused of heinous crimes such as rape'.[686]

Contemporary newspapers and the Old Bailey Proceedings appear to have reflected Hale's opinion on rape. Acquittals were regularly explained in terms of 'the evidence not being clear enough' or 'not being strong enough' to convict.[687] The body of the rape victim was often at the centre of the quest for evidence of non-consensual sex, but for a number of reasons, these standards of proof could not be met. Some have put this down to the poor state of contemporary medical knowledge and the inability of practitioners to determine whether penetration had occurred. As a consequence, evidence derived from the body of a rape victim 'was frequently useless'.[688] If an absolute determination of rape involves the clear and consistent identification of penile penetration then arguably the state of our own culture's medical knowledge is equally poor, because even now there is no absolute standard by which the physical signs of rape become clear, apparent and indisputable. Indeed, medical professionals still disagree about the likelihood of sustaining injuries after a rape or sexual assault. Moreover, it has been found that recent complainants, whose physical examinations do not confirm significant genital injuries, may find that their allegations are not investigated thoroughly. Likewise, prosecutors are

[686] Edelstein, 'An Accusation Easily to be Made?', pp. 355-356; William Blackstone, *Commentaries on the Law of England,* Vol. 4 (London, 1769), p 215; Matthew Hale, *The History of Pleas of the Crown* (London, 1736), pp. 635-636, 289.

[687] Walker, 'Rape, Acquittal', p. 126.

[688] Antony E. Simpson, 'Popular Perceptions of Rape as a Capital Crime in Eighteenth-Century England: The Press and the Trial of Francis Charteris in the Old Bailey, February 1730', *Law and History Review,* Vol. 22.1 (2004), p. 60; Simpson, 'The "Blackmail Myth"'; Stephen Landsman, 'One Hundred Years of Rectitude: Medical Witnesses at the Old Bailey', *Law and History Review,* Vol. 16.3 (1998), pp. 445-494.

more reluctant to proceed to trial where the doctor describes no clear evidence of rape. Amongst medical practitioners, too, there is little in the way of consensus that first time sexual intercourse does not always damage the hymen. Recent studies confirm that rape is consistent with a wide range of genital injuries and even a complete absence. The importance of prior sexual activity in older girls and mature adult women and the contested nature of the effects of sexual activity on the hymen in adolescents, testifies to the ambiguity of rape as a distinct bodily presence.[689]

Indeed, a great deal of the ambiguity and uncertainty regarding the interpretation of physical signs of rape as rape stems from the lack of any sure physiological basis from which practitioners can judge the crime. Medical witnesses adjudicating the physical signs of rape, regardless of historical context, are involved in reconciling an assertion of rape with the physical evidence it leaves behind. A judgement of rape, therefore, involves reconciling a past that has gone with the physical evidence that lives on through the body of the victim. Rape, however, 'can only appear in social space as an aftershock, can only exist ... as image translated into signs'.[690] Physicians, surgeons, and midwives in the early modern period were largely responsible for the identification and interpretation of signs left on the female body. They searched children's and women's bodies, both the surfaces visible to anyone, and the private parts visible only to those with sufficient experience to examine them for physical signs of rape. The practice of medical

[689] Catherine White and Iain McLean, 'Adolescent Complainants of Sexual Assault; Injury Patterns in Virgin and Non-Virgin Groups', *Journal of Clinical Forensic Medicine,* Vol. 13.4 (2006), pp. 172-180; J. Adams, K. Harper, S. Knudson and J. Revilla, 'Examination Findings in Legally Confirmed Child Sexual Abuse: It's Normal to be Normal', *Pediatrics,* Vol. 94.3 (1994), pp. 310-317; C. Lincoln, 'Genital Injury: Is it Significant? A Review of the Literature', *Medical Science Law,* Vol. 41.3 (2001), pp. 206-216.

[690] Mieke Bal, *Looking In: The Art of Viewing* (Amsterdam, 2001), p. 100.

jurisprudence, however, the path from identifying signs to achieving certain knowledge of rape was obstructed by the multitude of meanings that these signs could have. Stephen Robertson's observation that 'Uncertainty coloured both the presence and absence of signs [of rape]', is as applicable to the early modern period as it is to the nineteenth, twentieth or twenty first century. On the one hand, early modern medical jurists warned that the presence of rape could not always confirm rape, whilst on the other hand they cautioned that the absence of signs of could not always rule out the possibility that a young or adult woman had been raped.[691] Making rape known involved a process of 'show-and-tell', the replication of rape's rhetoric through the evidence of the body. This implies 'that visual evidence carries the burden of proof, and that subsequent official proclamations are made possible by that initial visual evidence'. This was also an ideal, however, when this potentially involved the breakdown of physical signs and the possibility of alienation from the anticipated referents that constituted rape as a distinct bodily phenomenon.[692]

During the course of this chapter I will explore the relationship between the signs of rape as these were constituted in the testimonies of medical witnesses at the Old Bailey during the period 1674-1800. Although midwives, physicians and surgeons, were not medical experts in the sense that they were regarded as a distinct legal entity as they are today, as witnesses, these men and women provided important evidence in a rape trial. With the

[691] Stephen Robertson, 'Signs, Marks, and Private Parts: Doctors, and Evidence of Rape in the United States, 1823-1930', *Journal of the History of Sexuality,* Vol. 8.3 (1998), pp. 364-365. Particularly illuminating on the relationship between medical knowledge and uncertainty is Kathryn Montgomery Hunter, *Doctors' Stories: The Narrative Structure of Medical Knowledge* (Princeton, 1991), esp. pp. 28-38.

[692] Kim Solga, 'Rape's Metatheatrical Return: Rehearsing Sexual Violence among the Early Moderns', *Theatre Journal,* Vol. 58.1 (2006), pp. 53-62.

'Adversarial Revolution', the standing of medical men and women also grew in importance during this period. The participation of lawyers from the 1730s onward slowly reshaped the processes of criminal trials as they increasingly took over the cross-examination of witnesses and argued points of law. The practice of evidentiary objection also grew in strength and sophistication as lawyers became influential in determining the evidence presented in a trial. This involved the gradual enforcement of the hearsay and opinion doctrines, which slowly differentiated witnesses into expert witnesses. Although witness were not elevated to the status of expert witness until the late eighteenth century, men and women who practiced medicine – physicians, surgeons and midwives – remained important arbiters of the raped body throughout the late seventeenth and eighteenth centuries.[693]

Partially due to these developments in criminal litigation and partially due to the fact that from the 1720s the *Proceedings of the Old Bailey* were presented as verbatim transcripts, it becomes possible to discern the extent to which medical witnesses contested the bodily signs and marks of rape as rape. In their abbreviated form too, which characterised the format of the *Proceedings* before this time, the information gleaned about rape can be significant. Much can be gained by analysing 'routine reports of sexual violence … even when they are cursory'.[694] Historians are nevertheless well aware that the content of printed trial reports in the *Proceedings* did not reflect contemporary events in an unmediated way. The source was both a record of trials conducted at the Old Bailey and a popular form of ephemera that was widely circulated

[693] Tal Golan, 'The History of Scientific Expert Testimony in the English Courtroom', *Science in Context,* Vol. 12.1 (1999), pp. 8-10.

[694] Walker, 'Rape, Acquittal', p. 121.

amongst its primarily middle-class audience. In general, the accounts of trials in the *Proceedings* were also incomplete. Certain content was omitted from the original court proceedings, including any repetitive information and evidence for the defence. Other scholars have emphasised the possible omission of testimony or the inclusion of testimony in a more abbreviated form. Moreover, the nature of contested evidence in criminal trials, as this was illustrated in the *Proceedings,* may also have been the product of design by its editors. By way of their desire to present a fair trial, the narrative form which dictated the format of the *Proceedings* was influenced by the maxim that there were at least two sides to any story. Consequently, as Hal Gladfelder notes, the printed trial accounts possessed a 'resistance to closure'. Given the view that only repetitive information and evidence from the defence was omitted from the *Proceedings*, this 'resistance to closure' may have been very real in medical witnesses' interpretations of rape.[695]

Yet even in the majority of cases where the evidence presented in the *Proceedings* was not complete, this does not detract from the usefulness of the source for furthering our understandings of rape. This is particularly true when trials in the *Proceedings* or 'Sessions Papers', are read for the features they have in common and not for their completeness as a narrative of a trial for rape. As the selection of content that formed each edition of the six weekly published *Proceedings* were likely to have reflected

[695] Shoemaker, 'The Old Bailey Proceedings', pp. 559-580; Golan, 'The History of Scientific Expert Testimony', p. 10; Hal Gladfelder, *Criminality and Narrative in Eighteenth-Century England* (Baltimore, 2001), p. 71; Walker, 'Rape, Acquittal', p. 120.

available collective, cultural meanings of rape, they can still tell us much about the phenomenon in early modern period.[696]

This includes the often complex ways in which rape intersected with contemporary understandings of age, which were also prominent in the records of rape trials featured in the *Proceedings*. As I have shown in this study so far, meanings of age were frequently contested. Meanings of the life-cycle, as I related in the last chapter more specifically, could also be interpreted in a number of ways, especially in terms of how reproductive life-stages related to issues of sexual development in females. This was also reflected in conflicting medical testimonies at the Old Bailey, where witnesses were frequently asked to consider how the age of a victim could alter the discursive and bodily parameters within which a judgement of rape was made. Thus midwives, physicians and surgeons conveyed sundry expectations of whether the body of a rape victim should be marked by her sexual violation, depending on her progress through the life-cycle. At times, as I will demonstrate, both the physical signs of rape and how these were expressed differently in females of different ages were not always clear-cut. Medical witnesses had to contend with issues of idiosyncratic development in females and how this could vary the signs of rape displayed on body. The central question of this chapter, therefore, concerns the ways in which ideas of age and the female life-cycle intersected in contrasting ways, to contribute uncertainly to a positive judgement of rape. I will begin this chapter with an analysis of medical testimony concerned with child-victims of rape and conclude with a discussion of older women as victims. This structure does not reflect a supposition on my part that female children, female adolescents and mature adult women always faced unique impediments to the successful prosecution of rape. Indeed, one of the aims of this

[696] Walker, 'Rereading Rape', pp. 1-4.

chapter is to demonstrate that understandings of the body often conflicted with legal reality and the implications of the Act 1576 for females of different ages. Thus even an age of consent of twelve does not accurately reflect the convergences and sometimes divergences in the treatment of females of different ages with regards to rape as a distinct somatic presence.

The Anatomy of Rape

In the case of very young children and even those above the age of consent, the physical signs that constituted rape as rape broke down very early on. The discovery of the crime that had been committed against little girls was deferred, usually because the last thing that an adult – usually a mother, or guardian – suspected, was that a child had had been raped. Children drew attention to rape in a number of physical and visually expressive ways. 'Funny' or 'straddling walks', the inappropriate use of household objects – such as leaning on the backs of chairs, were often used as a form of communication by children to direct a parent or carer's attention to genital injuries. Nevertheless, this did not always translate to a third-party immediately as rape. Thirteen-year-old Elizabeth Moreton was prompted to speak about her rape because her mother had seen her walk 'comically' and she thought she would guess what had happened. Elizabeth's mother testified later that she noticed her daughter walk strangely, but she thought this was the result of Elizabeth's shoes hurting her feet.[697] Sarah Ford noticed her twelve-year-old servant Anne Albina Barnard's shift 'was yellow, and of an ugly colour' but initially assumed her petticoats 'had cut her side, and so it passed off'.[698] Sarah Batty, at first, put

[697] *OBP*, April 1740, trial of William MacCarrol (t17400416-50).

[698] *OBP*, February 1754, trial of Stephen Hope (t17540227-56).

her nine-year-old daughter Mary's complaints of soreness down to 'the scalding of her water'.[699]

In similar ways, medical witnesses shared in the knowledge of parents by interpreting the causes of genital injuries benignly. Whilst the explanations given for injuries, including lacerations, an excoriated vulva and a dilated vagina, were often very different, the common thread of childhood and the expression of this as a particular somatic state, was, in one way or another, consistently referred to in the testimony of medical witnesses. For example, one physician put six-year-old Kitty Sweetman's genital injuries down to her over-enthusiastic running about the neighbourhood.[700] Another physician postulated that the evidence of penetration found in the body of Elizabeth Marriott, a little girl under the age of ten, was consistent with the accused, George Hutton having 'clapt her Breech for pulling the horses tails'. The lacerations identified in eight-year-old Mary Elliot's vagina was explained by one midwife as the result of the little girl falling down the stairs. In other cases, the vaginal injuries found on the bodies of young female children and in some instances – girls in their early teens, were attributed to the characteristic up and down motion of the body whilst riding a horse, or taking too large a step down the stairs. Paradoxically, this was also how many little girls explained their experience of being raped: in terms of an up and down motion that also involved them being 'dragged', 'heaved' or 'put on' their rapists lap, to enable penile penetration. The

[699] *OBP*, April 1749, trial of James Penoroy (t17490411-22).

[700] *OBP*, June 1788, trial of Joseph Fyson (t17880625-93).

inversion of what was arguably a paternal gesture was not interpreted as an inversion at all.[701]

In some quarters, the acquittal of men accused of raping little girls has been put down to a disregard of the differences between children and adults.[702] Yet in many ways, as we have already seen, it was the almost *a priori* assumption of these differences that constituted rape as not rape in the case of little girls. This continued with ideas of the body and ideas of sexual development. Some contemporary medical writers did not think it was possible to penetrate a young child who had not reached sexual maturity. If penetration was forced in such a young body there would be lasting signs of injury including an unnatural dilation of the vagina before the regular blood naturally brought about its loosening, allowing for penetrative sex.[703] Hence Mary Bishop, a midwife who was called to testify to causes of the genital injuries found on the body of nine-year-old Mary Faucet, exclaimed that 'it could not be that at 9 years of age'.[704] In the trial of Thomas Norris for the rape of Elizabeth Coy, a girl under the age of ten, Mr Jewel, a surgeon, testified that 'it was impossible a Child of such tender Years, could be thus

[701] Including: *OBP*, January 1721, trial of William Robbins (t17210113-28); *OBP*, January 1749, trial of George Tennant (t17490113-15); *OBP*, October 1777, trial of Benjamin Russen (t17771015-1); *OBP*, February 1719, trial of John Murry (t17190225-43); *OBP*, January 1755, trial of Benjamin Jones (t17550116-37); December 1690, trial of George Hutton (t16901210-5).

[702] Gammon, "'A Denial of Innocence'", pp. 75-95; Mills, 'Rape in Early Eighteenth-Century London', pp. 140-166.

[703] Toulalan, "'Unripe Bodies'", pp. 140-144; Toulalan, "'Age to Great, or to Little, Doeth let Conception'", p. 289.

[704] *OBP*, September 1733, trial of John Cannon (t17330912-55).

abused'.[705] John Dale, a physician, also thought it impossible for a grown man to penetrate the body of a little girl. Thus James Larwill could not have raped nine-year-old Jane East because the 'orifice was not larger than the size of a large quill'.[706]

Imagining the sort of damage that penile penetration could do to the underdeveloped genitals of pre-pubescent children was both highly expectant and highly subjective. Medical witnesses mostly agreed that the damage done to the bodies of young girls by adult-child sexual contact would be extraordinary. The high expectation of difference that was thought to exist between the asexual, sexually unready bodies of pre-pubescent girls, mature post-pubescent older girls and adult women, also meant that midwives, physicians and surgeons were dismissive of rape when genital injuries were not as pronounced as they would have anticipated. As a laceration of the vagina was almost seen as a precondition of child-adult rape, if the vaginal passage was widened beyond what was expected as a normal variation in size of the pre-pubescent genitalia, this was not necessarily considered proof of penile penetration. Yet even when lacerations were present, this did not always constitute a judgement of rape either.[707] A laceration of the vagina could be caused by digitation or other accidents. As female children were prone to ruptures of the navel and vagina anyway, it was difficult to attribute this injury with any

[705] *OBP*, December 1741, trial of Thomas Norris (t17411204-39).

[706] *OBP*, September 1778, trial of James Larwill (t17780916-12).

[707] *OBP*, September 1734, trial of Thomas Slade (t17340911-6); *OBP,* January 1749, trial of George Tennant (t17490113-15); *OBP*, July 1753, trial of Matthew Griffith (t17530718-26); *OBP*, October 1765, trial of Samuel Tibbel (t17651016-2); *OBP*, September 1768, trial of William Allam (t17680907-40); *OBP*, April 1747, trial of John Hunter (t17470429-28).

certainty to penile penetration.[708] Some, like the physician Robert Bristow, asserted that there was a great deal of difference between genital injuries of a non-sexual nature and the violence that produced the breach in continuity of the vagina that originated with penile penetration. Other than explaining that the damage caused by rape was more extensive, Bristow could not explain in material terms how these two types of injuries manifested themselves differently. Similarly, James Moffatt, a surgeon, thought that a 'common laceration' of the vagina was different from a laceration caused by rape. He was nevertheless uncertain as to how his highly subjective belief could be applied without room for doubt to the body of Anne Brown, a child of seven years old, thus arguing conclusively that the child had been raped.[709]

If the number of potentially innocent causes of genital injuries obfuscated rape, the presence of venereal disease in the bodies of young children could be decisive in determining penile penetration.[710] As the eighteenth century wore on, however, it became increasingly difficult for medical witnesses to attribute its communication solely to penetrative intercourse. In the late seventeenth and early part of the eighteenth

[708] Toulalan, "'Is He a Licentious Lewd Sort of Person?"', p. 38; Robert Pemell, *De Morbis Puerorum, or A Treatise of the Diseases of Children; with their Causes, Signs, Prognosticks, and Cures* (London, 1653) pp. 1-45; William Blakey, *Essay on the Manner of Preserving Children and Grown Persons from Ruptures* (London, 1792), pp. 34-35; Anonymous, *The Child's Physician, or the Mother and Nurse Instructed in the Management and Cure of ... Disorders Incident to Children* (London, 1795), p. 110; John Peachey, *A General Treatise of the Diseases of Infants and Children. Collected from the Best Practical Authors* (London, 1697), p. 128.

[709] *OBP*, May 1753, trial of John Birmingham (t17530502-35); *OBP*, May 1754, trial of William Kirk (t17540530-36).

[710] Gregory Durston, 'Rape in the Eighteenth-Century Metropolis: Part 2', *Journal for Eighteenth-Century Studies*, Vol. 29.1 (2006), p. 20.

century, venereal disease appears to have been influential in securing guilty verdicts against men accused of the rape of young girls. These verdicts had in common the idea that venereal disease could only be communicated through sexual intercourse.[711] Because the potential causes of the transmission of venereal disease expanded considerably during the eighteenth century, the relationship between rape and venereal disease was no longer considered clear-cut. A feature of trials involving child victims of rape was a certain displacement of the idea that VD was sexually transmitted. Indeed, potential causes of VD grew thanks to the idea that the disease could be communicated through unhygienic practices and contracted through casual contact. This was inextricably connected to developments in understandings of the disease, which until the bacterial revolutions of the nineteenth and early twentieth century, relied on a 'naked-eye' diagnosis. Because such naked-eye diagnosis was open to interpretation, however, medical witnesses drew on a number of peripheral, non-medical concerns, to positively identify or rule out the disease. Professional, social, legal and scientific concerns all interacted to create a culture of uncertainty surrounding VD diagnosis in a legal context.[712] Therefore, some medical witnesses approached this not from the perspective of whether VD was exclusively communicated through sexual intercourse but whether

[711] *OBP*, September 1686, trial of John Raven (t16860901-21); *OBP*, April 1694, trial of Richard Smith (t16940418-7); *OBP*, December 1699, trial of William Pheasant (t16991213a-1); *OBP*, October 1696, trial of Jacob Whitlock (t16961014-10); *OBP*, December 1707, trial of William Kite (t17071210-20); *OBP*, December 1721, trial of Christopher Samuel Graff (t17211206-67).

[712] Victoria Bates, '"So Far as I Can Define without a Microscopial Examination": Venereal Disease Diagnosis in English Courts, 1850-1914', *Social History of Medicine*, Vol. 26.1 (2012), pp. 38-55.

victim and rapist had both contracted the disease. If only the victim showed signs of having symptoms of VD, the defence counsel argued for reasonable doubt.[713]

The displacement of sex in the judicial process by potentially wider and non-sexual causes of the contagion naturally influenced rape. This caused medical jurists to be particularly uncertain about how to interpret the presence of vaginal discharge from the body of a young girl. The irritation and inflammation which caused the discharge could be a sign of rape, or alternatively, the effect of bad diet, poor hygiene or scrofuloustaint and epidemic influences.[714] The surgeon William Toleman, for example, was asked if the blotches he perceived as the symptoms of VD on the body of Mary Brand, a child under the age of ten-years old, could have been caused by 'the itch'. The scab or 'the itch' referred to as a general infection of the skin which was generated by 'the sharpness of milk', or as a consequence of conditions threatening to the foetus *in utero*.[715] Skin eruptions leading to the itch were also 'a very common complaint among the children of the poor in particular, and sometimes among the higher rank and are chiefly owing to improper food, and neglect in cleanliness'.[716] Thus when four-year-old Sarah Poultney's

[713] *OBP*, April 1754, trial of Hugh M'kave (t17540424-29); *OBP*, May 1754, trial of William Kirk (t17540530-36); *OBP*, April 1762, trial of Richard Smith (t17620421-11); *OBP*, September 1766, trial of Edward Brophy (t17660903-38); *OBP*, July 1774, trial of Richard Freelove (t17740706-57); Toulalan, '"Is He a Licentious Lewd Sort of Person?"', p. 38.

[714] Robertson, 'Signs, Marks', pp. 36; Bates, '"So Far as I Can Define without a Microscopial Examination"', p. 50; Kevin P. Siena, 'Pollution, Promiscuity, and the Pox: English Venereology and the Early Modern Medical Discourse on Social and Sexual Danger', *Journal of the History of Sexuality,* Vol. 8.4 (1998), pp. 553-574.

[715] *OBP*, September 1767, trial of Joseph Payne (t17670909-69); Pemell, *De Morbis Puerorum,* p. 5.

[716] Dr Green, *The Modern Family Physician being Dr. Green's Treatise of Health: Or, Cabinet of Cures Unlock'd. In which all his Public Medicines are Made Known* (London, 1783?), p. 13.

body was subjected to a physical examination, Robert Dimond, a physician, told the court how the inflammation of the little girl's genitals was not necessarily due to any sexual contact. He could not ascertain whether the little girl had been penetrated because the 'inflammation was so great', but he was also in little doubt that the discharge found on Sarah's body was 'owing to its not having been washed'.[717] The physician, William Brown, expanding on the observations of Mary Inwood, a midwife, also testified that two-year-old Eleanor Clay had been 'poisoned in its own nastiness'. He further concluded that the 'visible' and 'violent laceration' of the little girl's vagina 'proceeded from a heat of urine, and bad nursing'.[718] In older girls, too, what was perceived by medical witnesses as parental neglect and unhygienic practices, sometimes neutralised the sexual elements of VD. As a consequence, twelve-year-old Mary Marsh was thought to have contracted VD from an 'ill habit' caused by the wearing dirty linens. Similarly, the physician testifying in the trial of Edward Jones for the rape of fifteen-year-old Sarah Evans testified that the purported signs of VD were instead 'the itch'.[719]

From the 1730s the Proceedings also show that medical witnesses consistently testified that VD could be communicated without full penile penetration and/or without ejaculation.[720] Paradoxically, too, contemporaries affirmed what was only confirmed by the bacterial revolution of the nineteenth century: that VD could only be communicated through sexual intercourse. As a consequence of this interregnum in medical thought,

[717] *OBP*, September 1779, trial of Charles Ketteridge (t17790915-18).

[718] *OBP*, April 1738, trial of George Manning (t17380412-56).

[719] *OBP*, July 1715, trial of William Cash (t17150713-54); *OBP*, December 1735, trial of Edward Jones (t17351210-70).

[720] *OBP*, May 1754, trial of John Grimes (t17540530-1); *OBP*, May 1754, trial of William Kirk (t17540530-36); *OBP*, September 1796, trial of David Scott (t17960914-12).

the basis from which rape would be denied by medical witnesses expanded considerably during the latter part of the eighteenth century, taking into account the potentially wider causes of the contagion. As well as assuming the spread of the disease was due to unhealthy unhygienic practices, medical witnesses also testified to a belief in contamination through sexual contact that did not involve penile penetration.[721] In the trial of Joseph Pearson for the rape of nine-year-old Elizabeth Long, the testifying physician asserted that VD could be contracted without the emission of semen or full penetration. The same arguments featured in the late eighteenth-century trials of James Penoroy, Joseph Fyson and William Carrol for the rape of children and young women between the ages of nine and eighteen.[722] Many medical witnesses nevertheless asserted that VD was communicated solely through sexual intercourse rather than parental neglect and unhygienic practices. Because the communication of the disease was no longer associated exclusively with full penetration, however, these were regarded as subjective opinions that contributed uncertainly to rape.[723]

---

[721] Carol Smart, 'A History of Ambivalence and Conflict in the Discursive Construction of the "Child Victim" of Sexual Abuse', *Social and Legal Studies,* Vol. 8.3 (1999), p. 395; Siena, 'Pollution, Promiscuity, and the Pox', p. 557; Toulalan, '"Is He a Licentious Lewd Sort of Person?"', p. 39.

[722] *OBP*, December 1732, trial of Joseph Pearson, alias York (t17321206-69); *OBP*, April 1749, trial of James Penoroy (t17490411-22); *OBP*, June 1788, trial of Joseph Fyson (t17880625-93); *OPB*, April 1740, trial of William MacCarrol (t17400416-50); *OBP*, June 1769, trial of John Litchfield (t17690628-9). VD usually concerned young children. Out of 57 cases of rape involving little girls, 55 involved a determination to be made on whether the transmission of the disease was proof of the discovery of the crime: Simpson, 'Vulnerability and the Age of Female Consent', p. 194.

[723] *OBP*, April 1749, trial of James Penoroy (t17490411-22).

Connecting all the elements of this discussion so far is the common thread of childhood. Specifically, how in different ways, the discursive construction of the child, whether in the context of non-sexual causes of VD or genital injuries, contributed to the obfuscation of rape. Suggesting an understanding of the difficulties that arose when rape was firmly connected to ideas of the pre-pubescent physiology of little girls, medical witnesses sometimes deployed certain rhetorical strategies to labour the point that children and young adolescents could be raped. Responses varied from sheer obstinacy that young females showed certain signs of penile penetration, to a rather more discursive sleight of hand that distracted attention away from the perceived limitations of the physiology of little girls to accommodate a grown man's penis. The particular ways in which this was put across by medical witnesses also had a gendered component, with female midwives eschewing the analytical language of their male counter-parts in favour of communicating ideas of the body through more metaphorical discourse.[724]

The metaphorical discourse of midwives was present in a number of trials at the Old Bailey, and in some instances, these speech-acts appear to have been partially successful in securing guilty verdicts against men accused of the rape of little girls. Midwives communicated rape through both simple and more complex metaphors. What these metaphors all had in common was the ability to assert rape both clearly and unambiguously. For example, Ann Holmes, midwife, and aunt of the victim Mary Holmes, drew on the rich imagery of the household to suggest the rape of the little girl: 'the child's private parts were as raw as a piece of beef, and her thighs as hard as a stone; she ran like a tap, and her shift was black and yellow with the filth'. In this case, the man

[724] Ernelle Fife, 'Gender and Professionalism in Eighteenth-Century Midwifery', *Women's Writing,* Vol. 11.2 (2004), p. 186.

accused of rape, Hugh M'Kave, was found guilty.[725] In other examples, metaphorical language was used to illuminate rape by drawing attention away from the natural resistance of the pre-pubescent body to sexual intercourse. Midwives, in these examples, also expressed the illegitimacy of hastening the maturation process when 'Nature firmly intended her most vulnerable creations to remain asexual until she herself aroused them to desire'.[726] Hence the midwife who examined eight-year-old Bridget Gerrard, found 'the child was found upon search in a very sad condition and much abused, which must have been done by a man' and that this 'was made to appear by those natural symptoms that are incident to a woman'. Bridget's rapist was acquitted of rape but found guilty of a trespass.[727] After examining the body of seven-year-old Frances Moses, the testifying midwife, Sarah Jacobs, concluded that the little girl 'was more like a woman than a child'. The accused, Aaron David was acquitted, as several witnesses, including Jacobs, could not find evidence of a laceration to the little girl's vagina.[728]

In the 1732 trial of Joseph Pearson, the metaphorical conflation of the female midwife's vast experience with both the raped and pregnant, labouring bodies, was put to effective use in making it easier for the court to envisage the rape of a little girl. Lydia Scriven, after examining the body of nine-year-old Elizabeth Long, testified that 'she [Long] had been much abused, and that he had carnal knowledge of her. I searched her in the manner as I do a woman in travail'.[729] 'Natural hard Travel' referred to a particularly

[725] *OBP*, April 1754, trial of Hugh M'kave (t17540424-29).

[726] Mary K. McAlpin, 'Innocence of Experience: Rousseau on Puberty in the State of Civilization', *Journal of the History of Ideas,* Vol. 71.2 (2010), p. 248.

[727] *OBP*, August 1694, trial of Thomas Mercer (t16940830-9).

[728] *OBP*, December 1759, trial of Aaron Davids (t17591205-25).

[729] *OBP*, December 1732, trial of Joseph Pearson, alias York (t17321206-69).

arduous labour where the infant's journey from the womb to its eventual expulsion into the world was met with the physiological resistance of its mother's body. The possible damage done to the genital organs by obstructed labour was a much addressed topic in midwifery manuals during this time.[730] This was most likely to be a woman's experience of childbirth when 'the membranes are thick, the orifice too strait, and the neck of the womb is not open sufficiently, as in such as labour of the first child'.[731] Like the woman in travail, the sexually immature female body was also characterised by its 'straightness of the womb'. What is not communicated in this example is perhaps more important than what is. In other words, just because a woman faced difficulties in giving birth, did not mean that she would not successfully deliver her child. Equally, the body of a child might not be penetrated by a man without great difficulty (and unequivocal damage) but this did not mean that it was impossible either. Scriven also highlighted male culpability through the two accepted 'functions' of the vagina: childbirth and sex.[732] The little girl was not pregnant; therefore, the genital injuries found on her body could only be explained by rape.

By contrast, male physicians and surgeons drew on their practical experiences of VD, its specific form of manifestation in females of different ages and in corroborating this, the

---

[730] Elaine Hobby, '"Secrets of the Female Sex": Jane Sharp, the Reproductive Female Body, and Early Modern Midwifery Manuals', *Women's Writing,* Vol. 8.2 (2007), p. 205.

[731] Nicholas Culpepper, *A Directory for Midwives: or, A Guide for Women, in their Conception, Bearing, and Suckling their Children* (London, 1701), pp. 294-295.

[732] Thomas Bartholin, *Bartholinus Anatomy; Made from the Precepts of his Father, and From the Observations of all Modern Anatomists; Together with his own ... in Four Books and Four Manuals ... Published by Nich. Culpeper and Abdiah Cole* (London, 1668), p. 56; Patricia Crawford, 'The Construction and Experience of Maternity', in Valerie Fildes ed., *Women as Mothers in Pre-Industrial England* (London, 1990), p. 7.

presence of venereal symptoms in men accused of rape. In other words, they purported to have knowledge of the male anatomy that was denied to female midwives.[733] In a few instances, the physician or surgeon's knowledge of the male body was part of their conclusion that the absence of any visible genital injuries on the bodies of little girls did not necessarily rule out rape. In the case of Grace Pitts, a child of ten years old, the testifying surgeon admitted that rape could be perpetrated without leaving a particular imprint on the body 'if a man to be extremely small ... but if a man is full made, it is impossible to do it without there being a considerable quantity of blood'.[734] In the only other trial where this was considered a factor in mediating the signs of rape, a small penis was a reflection of the defendant's relatively young age of fifteen.[735] As rape involves 'the physiological capacities of the man and woman' this appears to be an extraordinary omission in a culture that endlessly debated the various sizes of the adult

[733] Harold Cook, 'Physick and Natural History in Seventeenth-Century England', in Peter Barker and Roger Ariew eds., *Revolution and Continuity: Essays in the History and Philosophy of Early Modern Science* (Washington D.C., 1991), p. 64; Kevin P. Sienna, 'The "Foul Disease" and Privacy: The Effects Of Venereal Disease And Patient Demand On The Medical Market Place In Early Modern London', *Bulletin of the History of Medicine*, Vol. 75.2 (2001), pp. 199-224; *OBP*, December 1759, trial of Aaron Davids (t17591205-25). The testifying midwife in this case deferred to a surgeon when it came to the identification of VD. *OBP* September 1766, trial of Edward Brophy (t17660903-38). A judgement of VD by a surgeon in this case was preferred to that of an apothecary. Similarly: *OBP*, September 1768, trial of William Allam (t17680907-40); *OBP*, September 1748, trial of William Garner (t17480907-50).

[734] *OBP*, April 1747, trial of John Hunter (t17470429-28).

[735] Boys did not achieve full ripeness until later teens or early twenties: Toulalan, "'Age to Great, or to Little, Doeth let Conception"', p. 90. Regarding the law and the treatments of younger defendants and ideas of sexual maturity, see Walker, 'Everyman or a Monster?', p. 15.

male-member.[736] Yet when the same culture made available a rich language of whoredom, penis size would have proved difficult for women to speak of, and in the case of younger and older virgins, impossible, without the frame of reference of sexual experience that also invoked accusations of sexual culpability.[737] In young children this omission is less puzzling as any penile penetration would have left considerable injuries, even life-threatening ones, although this did not necessarily constitute a positive assertion of penile penetration.[738]

The general absence of any reference to the male genitalia, which in its interaction with the age-related physiology of a female may have altered a particular bodily imprint of rape, is also wholly logical in light of contemporary ideas of sexual development. Indeed, whilst there were, physiologically speaking, particular stages which marked out a woman's suitability and non-suitability for sexual intercourse, the same ideas, apart from those that concerned the production of healthy seed or semen and the age when a young boy was thought to experience his first erection, did not apply in the same way to male development. The onus was on change in female body, and in particular, the idea that when a girl reached puberty the passage of the menstrual blood through the vaginal

---

[736] John Pechey, *The Compleat Midwife's Practice Enlarged, In the Most Weighty and High Concernments of the Birth of Man* (London, 1698), pp. 26-27; Felix Platter, *Platerus Golden Practice of Physick: Fully and Plainly Discovering, I. All the Kinds. II. The Several Causes of Every Disease. III. Their Most Proper Cures ... By Felix Plater, Chief Physitian and Professor in Ordinary at Basil. Abdiah Cole, Doctor of Physick, and the Liberal Arts. Nich. Culpeper, Gent. Student in Physick, and Astrology* (London, 1664), p. 169; Ambrose Paré, *The Workes of that Famous Chirurgion Ambrose Parey Translated out of Latin and Compared with the French by Thomas Johnson* (London, 1634); Robertson, 'Signs, Marks', p. 350.

[737] Walker, 'Rereading Rape', p. 5.

[738] Walker, 'Everyman or a Monster?', p. 19.

passage served to lubricate and dilate it making it ready for the act of sexual intercourse.[739] The inference, for example, that once past puberty the bodies of female adolescents were less marked by sexual intercourse, regardless of the size of the male-member, was, as we shall see, a persistent one amongst medical experts. The fact that the timing of the transition from pre- to post-pubescence was also uncertain meant that it was difficult for medical witness to determine when significant genital injuries would cease to be an expectation of rape. Lawyers for the defence asked medical witnesses about how age could vary the signs of rape, and in some cases, eradicate these completely. The understandable difficulties involved in answering a question about how rape may look different in a child who was nine, eleven, or even fifteen years old, given the natural variations that sometimes occurred at puberty, made it difficult to anticipate when the female body should be clearly marked by rape and when such signs should be absent. When asked if a child's age constituted uniformity in sexual development and a stable physiological basis from which rape could be judged, one surgeon concluded that 'The parts of some children are larger than others; I cannot be positive'.[740]

Alternatively, when questions about age were posed in a less open-ended way to medical witnesses, age was given a more certain basis in the cultural assumptions that underpinned pre-pubescence as an essentially asexual state. Consequently, when asked if a young child of four, eight, ten, twelve, or thirteen-years-old could be raped, medical

[739] Toulalan, "'Age to Great, or to Little, Doeth let Conception"', p. 289; Toulalan, "'Unripe Bodies"', pp. 135-136; Toulalan, "'Is He a Licentious Lewd Sort of Person?"', p. 33.

[740] *OBP*, August 1723, trial of Benjamin Hullock (t17230828-64); *OBP*, January 1749, trial of John Osborne (t17490113-11); *OBP*, May 1769, trial of Richard Green (t17690510-15); *OBP*, January 1749, trial of George Tennant (t17490113-15).

witnesses tended to be more certain that a grown man could not enter the body of a young girl or female adolescent. In these cases, the absence of salient physical signs of rape: blood, lacerations and the dilation of the vagina, were not regarded as a natural variation of age, but proof that no rape had been committed.[741] Only one physician in the history of the *Proceedings* from 1674 to 1800 appears to have considered the possibility that the rape of a young girl (with emission) could be achieved without any significant damage to her genitalia.[742]

In medical jurisprudence ideas of sexual development also came to the fore in the court's treatment of girls who were assumed to have passed puberty. In these instances, medical witnesses contested whether the rape of post-pubescent virgins was intrinsically violatory and thus left behind clear marks of forced penile penetration.[743] The starting point for this debate appears to have been two conflicting ideas of female puberty. The first involved the idea that menarche automatically conferred sexual maturity on the body, and consequently left little in the way of marks on the vagina when virginity was lost. The second involved the idea that sexual maturity was constituted in the sexual act, thus leaving behind tangible physical evidence of intercourse, and in some cases, clear evidence of non-consensual sex.[744] In some late seventeenth- and mid-eighteenth-century

[741] *OBP*, September 1768, trial of William Allam (t17680907-40); *OBP*, December 1770, trial of Charles Earle (t17701205-39); *OBP*, September 1778, trial of James Larwill (t17780916-12); *OBP*, September 1779, trial of Charles Ketteridge (t17790915-18); *OBP*, July 1715, trial of William Cash (t17150713-54); *OBP* January 1748, trial of William Page (t17480115-4); *OBP*, December 1750, trial of Richard Knibb (t17501205-40).

[742] *OBP*, Penoroy, t17490411-22.

[743] Walker, 'Rape, Acquittal', p. 135.

[744] For more on conflicting ideas of female puberty see the previous chapter, 'Gender and the Life-Cycles of Early Modern Women and Men'.

trials at the Old Bailey, the onus was on the post-pubescent victim of rape to differentiate between the blood loss incurred through menstruation and the blood loss that was regarded as a physiological side-effect of rape. Determining the precise cause of blood loss was usually established by the victim exhibiting clear knowledge of the periodic nature of her menstrual cycle and the time elapsed between her last period and her rape. Apart from this there was often little difference in how medical witnesses approached the bodies of both pre- and younger post-pubescent girls, and no evidence to suggest that sexual maturity automatically annihilated the physical signs of penile penetration, even if this did not necessarily prove non-consent.[745]

In other trials, medical witnesses contested the sexual readiness of post-pubescent girls' bodies and whether rape marked the genitals of girls who had passed puberty. Thus Mary Kinerly, the mistress of sixteen-year-old Catherine Southall, doubted that a girl of her age was sexually mature. She was incredulous at the suggestion made by the accused, Thomas Coventry, that 'the Girl was 16 Years of Age, and as fit for Business as I was'. Validating an alternative view of puberty, that biological ripeness and menstruation naturally smoothed the path for the ingress and egress of the male penis without any risk of genital injury, Sarah Kinman, the midwife, thought opaque evidence of penetration was only to be expected in a girl of Mary's age.[746] Kinman's view, as well as reflecting certain cultural understandings of post-pubescence, echoed the idea that the vagina was malleable after sexual maturity, adapting to the biggest or smallest of penises comfortably, without the genitals being marked in any way. This was consistent with the

[745] Examples include: *OBP*, February 1754, trial of Stephen Hope (t17540227-56); *OBP*, May 1769, trial of Richard Green (t17690510-15); *OBP*, April 1694, trial of Richard Smith (t16940418-7).

[746] *OBP*, January 1727, trial of Thomas Coventry (t17270113-21).

idea that 'The Sheath every where embraces the Yard, and frames it self to all its dimensions, so that it meets a short one, dilates to a thick on, and straightens to a small one'.[747] Similarly, when Dr Bromfield was asked if he expected to find evidence of 'violence' on the body of sixteen-year-old Elisabeth Jervis, he replied inconclusively that 'On a person of her age it is very difficult to say'.[748]

The testimonies of medical witnesses in other trials, suggests that the relationship between the post-pubescent female body, consensual sex and forcible penetration was more mixed, ambiguous and sometimes contradictory. In the trial of William Remue for the rape of Mary Simmonds, for example, the testifying surgeon, Mr Handford, implied that consensual sex may not leave marks on the body of a virgin, although the amount of blood that was found on and around the vagina of Simmonds suggested force. For the testifying midwife, Lody Handford, however, too much blood had come from Mary's body for this to have been rape. It was more likely, in her view, that the teenager had had a miscarriage. Handford's opinion was informed by her own experience of miscarriage and her relatively young age at marriage. Referring to Mary Simonds's condition Handford said:

> I believe it was a Miscarriage; I have had a Miscarriage my self: This Flowing was in such a Quantity, that no body, unless it was a Woman that miscarried, or was delivered of a Child, could have so much. I was a Maid once, and was married pretty

[747] Isbrand van Diemerbroeck, *The Anatomy of Human Bodies; Comprehending the Most Modern Discoveries and Curiosities in that Art* (London, 1694), p. 175.

[748] *OBP*, May 1769, trial of Richard Green (t17690510-15).

soon, about Fourteen Years of Age, and I never knew the like, but in these Cases.[749]

In the trial of John Sheridan for the rape of twenty-year-old Mary Brickinshaw, the testimony of the surgeon, Thomas Harvest, also suggested a multitude of competing ideas of sexual development that mixed the signs of asexual pre-pubescence with the expectations of maturity in an adult woman's body. Thus on the one hand, he 'could not expect to see any great marks of violence upon a person of her age', yet on the other, because of 'the straitness of the passage, and the violence that had been used, the hemorrhage might ensue'. In the end, Harvest eschewed the idea that age brought maturity and fitness for sexual intercourse and focused on the fact that Mary Brickenshaw might not have developed as much as other young women of her age: 'I believe that could not be discovered, the passage was very small; I really believe she had not been lain with by any man'. Because he also interpreted the evidence of Mary's body as analogous to that of a pre-pubescent girl, he interpreted the absence of any bodily injury in the same way. In other words, as evidence that the young woman had not been raped.[750] Mr Winterbottom, an apothecary testifying in the trial of John Briant for the rape of Jane Bell, a girl between the age of fourteen and fifteen years old, also showed indecisiveness over whether sexual maturity was natural – that the vagina dilated to encourage the free flow of the menses that made sexual intercourse easier – or if anatomical maturity was constituted in the sexual act itself. He concluded, with some hesitation, that 'From the smallness of the parts, and the appearance of violence, I could

[749] *OBP*, December 1742, trial of William Remue (t17421208-41).

[750] *OBP*, April 1768, trial of John Sheridan (t17680413-30).

not suppose she had been a common girl; I cannot say, positively, that it was the first time'.

Medical witnesses also tried to establish a girl's sexual maturity through certain knowledge of her menstrual cycle. In the Briant trial for instance, a second surgeon, John Andrews, confirmed that Jane Bell had only recently experienced her first period.[751] This was significant in establishing that Jane Bell was sexually immature and therefore whether or not a medical witness could expect to find any physical evidence of rape. Cathy McClive, having examined the role and significance of menstruation in the lives of young women, notes that it was not menstruation alone that conferred 'womanhood' on a young girl but rather the establishment of its regularity, and experience of sex and childbearing. In this instance, however, establishing the somatic, sexual innocence of the young teenager did not equate to rape. Because Jane Bell's vagina was so swollen (itself a possible indication of sexual abuse to medical witnesses) Andrews could not establish whether she had in fact been fully penetrated, even if this was strongly suspected. [752] For the same reasons, because pain and bleeding during intercourse was usually a sure sign of virginity, it was also important to establish when an older girl or woman had her last period.[753] A woman who was menstruating may not have exhibited the symptoms expected when a girl had lost her virginity. Thus in the trial of William Priddle for the

[751] *OBP*, September 1797, trial of John Briant (t17970920-12).

[752] Cathy McClive, 'L'âge des fleurs: le passage de l'enfance á l'adolescence dans l'imaginaire medical du XVIIe siécle', *Biblio,* Vol. 17 (2007), pp. 171-185, esp. pp. 177-182. See also Susan Broomhall, '"Women's Little Secrets": Defining the Boundaries of Reproductive Knowledge in Sixteenth-century France', *Social History of Medicine,* Vol. 15.1 (2002), pp. 1-15; Toulalan, '"Age to Great, or to Little, Doeth let Conception"', p. 281.

[753] Sara D. Luttfring, 'Bodily Narratives and the Politics of Virginity in "The Changeling" and the Essex Divorce', *Renaissance Drama,* Vol. 39.1 (2011), p. 101. See also, note 62, above.

rape of nineteen-year-old Elizabeth Harris, the young woman was asked to account carefully for the timing of her last period. The implication of the questioning, accompanied with a distinct lack of physical evidence as a result of the closeness of her last period to her rape, meant that the court had to rely on the young woman's word that she had been a virgin until the violation of her body by Priddle. Despite Priddle's acquittal, Alice Lee, Elizabeth Harris's mistress, saw the relationship between a woman's menstrual cycle and her sexual conduct very differently. For Harris, the coincidence of the young woman bleeding so soon after she had last menstruated suggested that the bleeding, the second time around, was occasioned by sexual intercourse, or even rape. As she said, 'it was so soon after her courses, that I thought a man must have had something to do with her; or else it was extraordinary their returning so soon again' and furthermore, 'I saw blood and nature upon the cloaths, I thought it very odd she should be out of order again so soon, she was quite entirely ruined'.[754]

In cases where the raped woman or girl was a virgin, medical witnesses also debated the nature of the hymen as tangible proof of virginity. When the hymen was found to have been ruptured, it was often taken as indisputable evidence of penile penetration. In contemporary medical discourse, the status of the hymen, indeed whether this existed at all, was much contested. Ambrose Paré, a physician whose understandings of the female body was much referred to in early modern medical jurisprudence, was doubtful that this 'enclosure of virginity or maiden-head' existed in children under the age of twelve. As there was little agreement of the hymen's precise location, Paré thought that virginity (or non-virginity) could not be solely deduced from the intactness of this membrane. Blood, a purported sign of the violation of the hymen in the sexual act was perfectly

[754] *OBP*, February 1775, trial of William Priddle (t17750218-1).

compatible with the rupture of blood vessels in the vagina during and after first-time intercourse. Paré argued that when first-time penetration also involved the compatibility in size of a woman's vagina and her sexual partner's penis, the signs of virginity might have been absent in any case. Furthermore, virginity could be faked. Consequently, the impression of 'tightness' a man felt when he entered a woman's body was not a reliable gauge of her chaste state.[755]

There is no evidence in the *Proceedings* to suggest that medical witnesses thought an intact hymen, and the assumption of virginity that this conferred, had been faked. Nevertheless, both certainty and uncertainty about the existence of the hymen and its precise position in the female body often contributed to making rape doubtful. The first case where the hymen was mentioned in the *Proceedings* was in the 1768 trial of John Sheridan for the rape of twenty-year-old Mary Brickenshaw.[756] The absence of any mention of the hymen in the *Proceedings* before this time is explained by the contentious nature of the membrane in seventeenth- and early eighteenth-century medical thought. This changed to a certain extent in the middle of the eighteenth century, when reports of legal medicine gained in anatomical precision. The examination of rape victims was also more careful and was accompanied with a desire to describe and understand the hymen. The discourse of anatomists was also standardised at the same time when the hymen

[755] Paré, *The Workes of that Famous Chirurgion Ambrose Parey*, pp. 937-938; Rudolf, 'Gender and the Development of Forensic Science', p. 938; Bartholin, *Bartholinus Anatomy,* pp. 72-74.

[756] *OBP*, April 1768, trial of John Sheridan (t17680413-30).

became the membrane linking the 'myrtiform caruncles', a slender circular bridge which could be cut or torn.[757]

Medical witnesses' interpretation of the hymen in late eighteenth-century trials for rape usually contributed to the view that penetration had either not occurred, or due to a number of other injuries on the body of the victim, could not be confirmed as having taken place. Also, despite Paré's reservations about the presence of the hymen in the bodies of female children under the age of twelve, in medical jurisprudence, the presence of an unbroken hymen was frequently applied as a marker of virginity to younger girls at the Old Bailey. Nevertheless, in these cases, the hymen did not so much constitute a point of negotiation in ascertaining rape, as rather more a confirmation of the child's continuing asexual state. Thus the membrane was usually perceived to have been intact, leading to the conclusion that a child could not have been raped. A constituent part of this belief was that in young girls the hymen rested very close to the entry to the vagina, from half an inch to perhaps an inch or so, and that the membrane was so tough that a grown man would find it difficult to penetrate the body even part way. The usual codicils that grown men could not penetrate the bodies of young children applied here too.[758]

In older post-pubescent girls, perhaps because they had passed the age of consent, there was more expectation amongst medical witnesses that the hymen had been breached.

---

[757] Georges Vigarello, *A History of Rape: Sexual Violence in France from the Sixteenth to the Twentieth Century* (Cambridge, Oxford and Malden, 2001), p. 81.

[758] *OBP*, December 1770, trial of Charles Earle (t17701205-39); *OB*P, October 1777, trial of Benjamin Russen (t17771015-1); *OBP*, September 1778, trial of James Larwill (t17780916-12); *OBP*, October 1787, trial of John Ince (t17871024-78).

Yet the purported causes of a ruptured hymen were not always thought to be sexual in nature. The hymen could be torn due to an accident, especially if a girl was 'hard working'. According to some medical witnesses, there was usually no way of knowing if the tearing of the membrane was a consequence of recent sexual contact. Thus the observation that the hymen was not intact also contributed to making rape doubtful.[759] James Mahon, a surgeon and man-midwife, was more positive that a recent tearing of the hymen could be identified by a visible inflammation around the female genitals. He nevertheless admitted, as did another surgeon testifying in a later trial, that any inflammation of the parts made it difficult to confirm that the hymen was torn in the first place, even though this was strongly suspected. In the very few instances where a torn hymen was traced to a sexual encounter that was the subject of a rape allegation, this did necessarily confirm that non-consensual sex had taken place either.[760]

Indeed, the difficulties in distinguishing consensual from non-consensual sex constituted one of the greatest impediments to the prosecution of rape in the early modern period. For a number of reasons, consensual sex did not look different from non-consensual sex. This was consistent with the idea that rape constituted 'an extreme example of men's lustful desires'. Thus very easily men could and often did claim often that sex not rape had occurred. Women also found it almost impossible to counter this view given the only discourses about sex available to them were 'confessional and implicatory'. Moreover, because proof of non-consent meant that a raped woman had to present evidence that

[759] *OBP*, April 1768, trial of John Sheridan (t17680413-30); *OBP*, June 1788, trial of Joseph Fyson (t17880625-93); *OBP*, September 1797, trial of John Briant (t17970920-12).

[760] *OBP*, May 1780, trial of James Purse (t17800510-57); *OBP*, September 1797, trial of John Briant (t17970920-12).

she had resisted her rapist to the best of her ability, this was difficult to articulate and even harder to demonstrate. The language of self-defence was overwhelmingly male and its use in both word and deed implied that a woman was less womanly, her adversary, less masculine.[761] This restricted women's ability to speak of self-defence in practice. Thus rape, to all intents and purposes, looked like sex. In the words of Catharine McKinnon, 'rape is a sex crime that is not [legally] regarded as a crime when it looks like sex'.[762]

Medical experts tasked with interpreting the physical signs of genital injuries, such as blood, the dilation and lacerations of the vagina, also found it difficult to determine any material difference between rape and sex. In their capacity as experts of the female body, the testimonies of medical men and women appear to confirm their culture's belief that consensual and non-consensual sex was not mutually exclusive. How this was expressed took different forms depending on a woman's age and her marital status. In the case of single young women, the occlusion of rape by sex was something that that was constructed over time. Thus according to the surgeon, Edward Meadowes, the possibility that sixteen-year-old Martha Gilbert had previously engaged in consensual sex with another man also invalidated the possibility that she had recently been raped by the accused, Thomas Belsenger.[763] Similarly, the doubtful virginal status of Mary Curtain meant that Elizabeth Ham, a midwife, could not tell whether the evidence of injury she

[761] Walker, 'Rereading Rape', pp. 5-9; Walker, 'Rape, Acquittal', p. 129; Gowing, *Domestic Dangers,* pp. 74, 92, 103, 109; Anthony Fletcher, *Gender, Sex and Subordination in England 1500-1800* (New Haven, 1995), ch. 6; Walker, *Crime, Gender and Social Order,* ch. 3.

[762] Catharine A. McKinnon, *Toward a Feminist Theory of the State* (Cambridge MA and London, 1989), p. 172.

[763] *OBP*, October 1720, trial of Thomas Belsenger (t17201012-38).

found on the younger woman's body 'was natural or by force'.[764] The fluid nature of the relationship between sex and rape was also stated more simply by Sarah Matts, who testified that John Ellis 'did as other men do when they lye with women'.[765]

These comments were usually the exception rather than the rule. Medical witnesses, in the case of older girls and never-married young women, were mainly engaged in ascertaining the often ambiguous signs of penile penetration and how this engaged with the physical signs of virginity, VD, and the sometimes idiosyncratic nature of female sexual development. Clarifying how rape differed from sex in material terms was nevertheless a side-effect of medical witnesses' examinations of older girls and young women. Neither the absence nor presence of physical injuries determined rape because rape may also look like sex. In many other instances, however, medical men and women drew attention to the additional genital injuries that distinguished consensual sex from non-consensual sex.[766] This was nevertheless a luxury that was not afforded to sexually inexperienced older girls and young women who were expected to detail their rape in terms that satisfied the law and yet at the same time, discarded the very innocence that made such matters impossible to speak of. Like many other women during this period who wanted to make rape known, they were left with a language of sex which they had

[764] *OBP*, June 1769, trial of John Litchfield (t17690628-9).

[765] *OBP*, December 1731, trial of John Ellis (t17311208-58).

[766] Including: *OBP*, April 1694, trial of Richard Smith (t16940418-7); *OBP*, September 1717, trial of John Stevens (t17170911-41); *OBP*, October 1720, trial of Thomas Belsenger (t17201012-38); *OBP*, January 1727, trial of Thomas Coventry (t17270113-21); *OBP*, December 1742, trial of William Remue (t17421208-41).

no right to any knowledge of, and which when spoken, implied their culpability in the very act that they claimed was perpetrated without their consent.[767]

Medical testimony was rare when victims of rape were also married women. Instead, the courts tended to rely on circumstances rather than physiology when they interpreted a woman's resistance. This was directly related to what medical evidence could prove, and more often than not to its limited efficacy when applied to the bodies of married women. Medical evidence had the potential to corroborate two key elements of the crime of rape. Except in the case of sexually experienced women, an examination could establish whether penetration had occurred and depending on the circumstances of the case, could provide evidence about the question of force and resistance.[768] The limited efficacy of medical examinations for ascertaining rape in married women was borne out in several trials at the Old Bailey. In the trial of Jeremy Yates and William Gossip for the rape of Mary Haddon, for example, Ann Devalot, a midwife, testified 'that there had been force used with her [Mary Haddon], but whether it was done by her Husband or any other Person, is more than I can tell'.[769] Devalot's testimony is revealing of the limits of medical jurisprudence when rape as a physical presence was indistinguishable from sex. But what type of sex? Arguably, comparisons between sex with a husband and sex with a rapist constituted a language of normality where the trauma of rape was effaced by sex. At the same time, however, this was a comparison born of necessity when the only sexual experiences a woman could legitimately speak of were those she shared with her

[767] Miranda Chaytor, 'Husband(ry): Narratives of Rape in the Seventeenth Century', *Gender and History,* Vol. 7.3 (1995), pp. 398-399.

[768] Robertson, 'Signs, Marks', pp. 355, 371.

[769] *OBP*, August 1726, trial of Jeremy Yates, William Gossip (t17260831-39).

spouse.[770] Spousal relationships need not have been consensual however, although this in itself is paradoxical statement given the fact that marital rape was exempted at common law.[771] In various ways then, rape could be occluded as a result of the complexities that underwrote relationships between men and women in the eyes of the law, and more broadly, in early modern society itself.

Indeed, the slippages that constituted the body of a rapist as interchangeable with that of a husband involved a shared language amongst legal authorities and victims alike. When, for example, Mary Oldner was describing how she was raped by William White, she said: 'He did the same as my husband did'.[772] Similarly, Ann Smith was aware that one of the accused from William Cherry, William Barrett and James Smith, was 'doing with me as my husband did', whilst Mary Bradley was asked if the accused Ralph Cutler 'did lie with you as your husband does?'[773] When rape was constituted in this way, a man could claim that he had enjoyed consensual relations with the woman concerned, or given the opacity of rape in marriage, at least complicate the issue of consent. The only way a woman could prove non-consent, besides screaming, shouting and struggling with her rapist, was by pointing out the supplementary marks of violence that remained on her

[770] Faramerz Dabhoiwala, 'Sex, Social Relations and the Law in Seventeenth- and Eighteenth-Century London', in Michael J. Braddick and John Walter eds., *Negotiating Power in Early Modern Society: Order, Hierarchy and Subordination in Britain and Ireland* (Cambridge, 2001), p. 63.

[771] Jill Elaine Hasday, 'Contest and Consent: A Legal History of Marital Rape', *California Law Review,* Vol. 88.5 (2000), p. 1376.

[772] *OBP*, September 1765, trial of William White (t17650918-29).

[773] *OBP*, June 1772, trial of William Barrett, William Cherry, James Smith, otherwise Barber (t17720603-9); *OBP*, September 1777, trial of Ralph Cutler (t17770910-21).

body. These marks were the least ambiguous indications of rape and 'the very thing that signified a sexual encounter was rape rather than sex'.[774]

When extreme expressions of male violence were absent, acquittals for rape usually followed. Gratuitous violence on the other hand, was considered above and beyond the force necessary to overcome a woman's resistance to rape.[775] In the successful prosecution of Edmund Togwell and Peter Mattews for the rape of Margaret Macculough, a widow, the court heard about the public nature of Macculogh's violation and the arguably, humiliating, excessive nature of the violence that was used to overcome her resistance. Leaving her home to buy some mackerel for her supper, Macculogh, in full view of her neighbours, was knocked down by Togwell and Mattews. Both men proceeded to 'lay' with her and 'pulled off her Shoes and beat her with them, and abused her with Colley-flower-stalks'. Martha Mulzer, a midwife, testified that the damage done to Macculogh's body was such that she believed she 'would never be her own Woman again'. Typifying the midwife's penchant for speaking metaphorically, Mulzer also added that 'She found her [Macculough] bruised on her Arms, Legs, Thighs, Back, and all over, like the Bark of a Tree; and fore, swell'd, and in such a shameful Condition, that she never saw any thing like it'.[776]

The Macculough case was the first of only four trials for rape where widows featured as victims during the period 1674-1800. It was also the only trial where the perpetrators of

[774] Walker, 'Rape, Acquittal', p. 135; *OBP*, April 1715, trial of Hugh Leeson and Sarah Blandford (t17150427-43).

[775] Walker, 'Rape, Acquittal', pp. 135-136; Walker, 'Everyman or a Monster?', pp. 19-20.

[776] *OBP*, September 1735, trial of Edmund Togwell and Peter Mattews (t17350911-55).

the rape of a widow were convicted. The fact that widows rarely featured in trials for rape at the Old Bailey is understandable when we consider that widows, especially if they were also older women, were regarded as unlikely victims of rape. Understandably, they may also have doubted whether the courts would have believed their accusations, particularly as they were represented in contemporary culture as unattractive and unlikely objects of lust.[777] Widowhood was also for some women a period of economic and social freedom, as well as a liberation from the dependent roles of wife and mother. Moreover, whilst independent single women were often elided with prostitutes, once a single woman turned 40 or 50 her sexuality became less of a concern. This involved the belief that older women were asexual beings who would be either unlikely to marry or have sex at an advanced age.[778] Indeed, in the few remaining cases which featured older widows at the Old Bailey, it was the return to the asexual state of childhood that made rape both difficult to achieve and impossible to prosecute. The rape of older women, from the few cases that were tried at the Old Bailey, was almost considered an oxymoron. Like children, 'the Parts [of older women] are so straightened for Want of Use … this renders Copulation incommodious'.[779] Reflecting this view, Sarah Robertson, a widow, could only confirm an attempt. Benjamin Jones only entered her body 'but a very little

[777] Walker, 'Everyman or a Monster?', p. 16.

[778] Amy M. Froide, 'Old Maids: The Lifecycle of Single Women in Early Modern England', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 94-95; Anne Kugler, '"I Feel Myself Decay Apace": Old Age in the Diary of Lady Sarah Cowper', in Botelho and Thane eds., *Women and Ageing*, p. 72.

[779] Anonymous, *The Ladies Dispensatory: Or Every Woman her own Physician Treating of the Nature, Causes, and Various Symptoms, of all the Diseases, Infirmities, and Disorders, Natural or Contracted, that Most Peculiarly Affect the Fair Sex* (London, 1755?), p. 187.

way' because her vagina was so small 'he could not penetrate her body any further'.[780] Anna Clarke testified to the natural resistance of her elderly body to penile penetration by co-opting the words of her rapist, Edward Hatfield, 'who tore me with his hands, and said I was not big enough for him'.[781] With an acceptance that the freedoms of widowhood were temporary, rape could be written into an account of an older woman's violation. Indeed, the midwife, Martha Mulzer's comment that Margaret Macculough 'would never be her own Woman again' can be seen as an acknowledgement of the freedom from male dependency that widowhood brought, and the recognition that this relationship of dependency could, at any time, be violently reconstituted through rape.[782]

Conclusion

Medical witnesses disagreed over whether the signs of sex on the female body were consistent with rape as they understood it. The ways in which rape was rendered an uncertain physical presence related to expectations of whether the body should be marked by its experience of rape at certain points in the life-cycle. The expectation that pre-pubescent bodies were more likely to be marked by their sexual violation than older mature bodies held to a certain extent. Yet the difficulties midwives, physicians and surgeons faced in ascertaining when the body reached this pivotal moment in its development, sometimes disturbed this assumption. Two conflicting ideas of how puberty contributed to the sexual maturity of the body conspired to make rape an uncertain bodily presence. This meant that expectations of what rape should look like

[780] *OBP*, January 1755, trial of Benjamin Jones (t17550116-37).

[781] *OBP*, October 1777, trial of Edward Hatfield (t17771015-10).

[782] *OBP*, September 1735, trial of Edmund Togwell and Peter Mattews (t17350911-55).

shifted in accordance with two very different ideas of what constituted sexual readiness and suitability for sexual intercourse. This in turn meant that salient physical signs of forced penile penetration: the laceration and dilation of the vagina and the bloody profusion that proceeded as a result did not always provide unambiguous evidence of rape. Equally, when the body remained unmarked by its sexual violation, this did not necessarily mean that testifying medical witnesses thought that no rape had occurred either. It was rather more likely, given particular understandings of the body in contemporary medical discourse, that this point could not be positively determined. The negation of rape in some instances, stemmed from the displacement of the male body's contribution to a particular bodily imprint of rape. This led to a reductive view of rape that in some instances, proved interchangeable with sex. The fluid nature of the relationship between sex and rape was particularly pronounced in the case of married women. Medical testimony was rare in these cases, precisely because sexually experienced female bodies were thought to neutralise the physical effects of sexual violation. However, this was not the case in very young children or in older women. In young children, impediments to rape revolved around their asexuality and the natural resistance of their bodies to penile penetration. Nevertheless, when their bodies were marked, this did not always translate directly to rape. Similarly, older women were represented as asexual beings, whose post-menopausal anatomy naturally limited their engagement in sexual intercourse. Whilst this meant that rape could only ever be conceptualised by older women as an attempt, the significance of the act lie in its representation as a fundamental break with the independence from men that the freedoms of widowhood had once brought.

CHAPTER 7: CONCLUSION

In the previous chapters, I have attempted to illuminate some of the ways that aging was understood in early modern England. Where possible, I have attempted to show that practices and discourses were interrelated. Where I have focused on theories of aging, I have illustrated how popular and widespread these ideas were in contemporary culture. I have also endeavoured to demonstrate that a focus on gender, as inclusive of both men and women and masculinity and femininity, is a useful conceptual tool that increases our understanding of aging in the early modern period.

Important to my study on aging, too, are the methodological changes that have affected the field of age studies in recent years. Cultural meanings of age that encompass a broad range of criterion can only increase our understandings of how this phenomenon was experienced and conceptualised in specific historical contexts. Of utmost significance in this respect has been gender as a growing and widely engaged with category of analysis since the 1980s. As a starting point for my own analysis, Joan Scott's definition of gender has been significant. At the risk of repeating much of what I included in my introduction, and implicitly in the chapters that followed, I would highlight Scott's assertion that gender identities are not merely shaped by historical context, class and other forms of differentiation in the construction of masculinity and femininity, but that gender constructs other forms of differentiation too. Throughout this study it has been my contention, illustrated in a number of different ways, that firstly, the aging prerogatives of men and women were undercut by concepts of class and gender and secondly, as ideas of gender changed throughout the period, ideas of aging as they applied to the sexes changed too. We have seen, for example, how the prerogatives of sexed aging shifted between the seventeenth and eighteenth centuries to accommodate changing ideas of gender. Whereas early notions of ideal relations between the sexes relied on its

oppositional nature, later concepts relied in part, on ideals of sexual complementarity. This was not something that all men and women could aspire to given the sometimes utopian nature of the ideology that underwrote this form of social organisation. That is – utopian for those that propounded these norms but maybe not for the women and men who were objectified by these narrowly construed ideas of gender. Nevertheless, gender norms played an important role in contemporary assertions of sexed aging, as these often involved the repression of alternative meanings of masculinity and femininity for their validity. At other times, the matrix of gender that organised relations between the sexes in early modern discourses, made explicit the provisional nature of conclusions regarding 'male' and 'female' aging.

Of particular importance in this respect was the continuous interaction between men and women, masculinity and femininity, and how the implications of the sex/gender system that comprised the conceptual glue for sexed aging, undermined this premise also. The idea, for example, that women aged sooner than men was predicated on very narrow foundations of gender. Some contemporaries stressed the absence of any hegemony in representations of 'male' and 'female' that otherwise, would have made sexed aging a valid prospect. This is unsurprising given the fact that ideas of aging were also enmeshed in constructions of gender that highlighted the differences both between and amongst early modern men and women. I refer here to the importance of ideas of subordinate and inferior manhood and how the status of household patriarch comprised the salient identity of only a minority of men. For women, the aspects of personality and behaviour that endorsed the norms of their gender relied on salient ideals of femininity that few women could aspire to. This included their necessary confinement to the private sphere of the household and their sedate, if not idle, existence. Thus, the differential aging prerogatives that marked men and women's experiences of aging were inseparable from

ideas, if not ideals, of masculinity and femininity. Yet even when men and women were favourably placed in relation to the prerogatives of aging that emphasised their likelihood of living long and entering old age relatively late, these conclusions were contingent on the conformance to some behaviours and the avoidance of others. The gendered traits of men were situated within tropes of honourable manhood that were dependant on a man's mastery of self-control and his ability to govern others. When a man did not conform to type in this respect, he lost both his claims to honourable manhood and the ability to live a long and healthy life marked by a good and virile old age. Women, too, were acknowledged to deviate from the characteristics that defined their gender and this was acknowledged in different ways, from their involvement in work outside the household to the deviations in temperament that construed them as fundamentally different to men.

The relationship between masculinity and femininity and whether men and women existed within or beyond the margins of these ideals, was accentuated by the self-constructed nature of the aging process. Aging relied on the idiosyncratic nature of engagements between a man or woman and their world. Indeed, how a woman or man grasped the nettle of their own mortality could provide the foundations for a multitude of aging processes. Contemporary writers, in what was little more than a thinly veiled rhetoric that separated superior men and women from their inferior counterparts, ended up rigidly prescribing in ways that were not achievable to all, what went into the body, what went out, and how often and in what frequency the body should move. These prescriptions were the basis for the non-naturals; ancient conceptions elucidating how the body was firmly embedded in its environment, updated for a status savvy and gender conscious audience in the early modern period. Whilst the permutations of these paradigms did not always constitute one-way traffic in terms of advantages bestowed on

one social group over another in the aging process, the relationship between aging, class and gender, nevertheless remained a fluid one throughout the early modern period.

These observations owe an intellectual debt to scholars working in a number of fields. My study of early modern aging has attempted to bridge the gap between gender as a synonym for women and gender as inclusive of both men and women. The conclusions I arrived at in each chapter would not have been possible without this intellectual terrain having been well furrowed in relation to the development of the conceptual tools of gender in various historical contexts. I would add, moreover, that we need to see aging as part of this terrain because of its resonance to various aspects of gendered identities that have been the subject of recent historical interest. Thus, although I noted in my introduction that the historical development of manhood has long been attuned to the study of various aspects of male identity that relate to patriarchy and marital relations, crime and violence, religion and popular culture, and civility and honour, but only recently to aging, I would argue for a revision of this statement in a number of respects. Indeed, it is has been my contention that discourses of aging comprised just one strand of the Gordian knot of male identity, along with ideas of honour, civility, patriarchy and sexuality. Discourses and practices were interrelated in this respect, with ideas of manhood and its often diffuse nature as it related to early modern men, often at the heart of meanings of age.

I hope I have shown, too, that the argument whereby it has been asserted that gender history, which is inclusive of both sexes, runs the risk of dissipating women's power and assumes that females are historically viable subjects only when they are placed alongside men, is misleading. Considering the phenomenon of male aging and female aging together has disrupted rather than enhanced the one-way exchange of power that is part

of the reluctance to engage with gender on a more inclusive basis, although this may disturb the rather marginal idea that women's oppression at the hands of patriarchy was continuous and unchanging. This is a positive movement forward that can only impact positively on our understandings of age as a historically specific phenomenon that concerns both men and women. Nevertheless, we are still at the stage of our conceptual development where the emphasis is on retrieving the aging experiences of women in the past. I noted in my introduction that this has been legitimated by denying, thus far, the incisive contributions made to the field of female old age. However, we do not need to go down this route of justification when historical research into the aging experiences of either men or women remains a legitimate avenue of enquiry. Of course, this takes for granted the acknowledgement on the part of the historian that information about one sex does not automatically impart information about the other. In the words of Joan Scott this relates to the propensity to view 'gender' as a synonym for 'women' that 'information about women is necessarily information about men'.[783] Indeed, my approach to the issue of early modern aging has been to balance the gender specific ways in which men and women were thought to age with the common challenges faced by both in aging process. The various ways in which age was conceptualised within early modern discourse, therefore, emphasised the possibility of convergences as well as divergences between male and female aging.

Hence, in Chapters 2 and 3, I related theories of aging as they were understood in early modern discourse. Some of these theories are already familiar to historians. This is particularly the case with the 'ages of man' schemas and to a certain extent, early modern notions of the temperaments. Scholars are most familiar with the temperaments

[783] Joan Scott, 'Gender: A Useful Category of Historical Analysis', *American Historical Review*, Vol. 91.5 (1986), p. 1056.

in terms of how they provided the physiological basis for sexed aging, or more specifically, the idea that women aged sooner than men. In my analysis of contemporary theories of the temperaments, I demonstrated that there was an element of overlap in terms of how the temperaments were related to the sexes, with the sanguine, choleric, phlegmatic or melancholic temperament distributed amongst men and women, although perhaps not equally. The differential prerogatives for aging that was imbued in this concept of the temperaments, however, did not necessarily mean that contemporary men and women were destined to fulfil the theoretical terms of the schema for long life and late old age in practice. Temperaments were 'bridging concepts', meaning they were vulnerable to change. Contemporaries illustrated the inversions and reversals that made the temperaments an unstable basis for sexed aging by emphasising the role of the non-naturals in cultivating health and longevity. The non-naturals consisted of air, things taken in (in terms of food and drink) sleep and waking, motion and rest, things excreted from the body, otherwise known as 'emptiness and repletion', and the management of the passions and emotions. The temperaments, as a result with individual engagements with these literal influences of the macrocosm, were therefore subject to alteration. Yet even without these influences there was some doubt about the veracity of superior 'male' and inferior 'female' temperaments. This involved the propensity of contemporaries to look at aging in less teleological terms than the paradigms of the ages of man and the temperaments would suggest. The 'lamp metaphor', as it was popularly known, formed a stable part of treatises that were concerned with two strands of learned medicine: hygiene (in its original sense of the art of conserving health, from the Greek 'hygeia' or health) and therapeutics. The metaphor, as it was interpreted by seventeenth-century contemporaries, and particularly physicians, variously advantaged men and women in the aging process. On the whole, however, the lamp metaphor captured the

unpredictable nature of aging in the early modern period, even though the pro-longevity literature that contained advice on how to live long and age well, skewed the achievement of this ideal to the upper classes.

As these ideas were drawn out in Chapter 3, 'Aging in Theory and Practice', I expanded upon the nature of the relationship between age, class and gender in the early modern period. I explained how ideas of sexed aging were subject to disturbance depending on how far men and women departed from the ideals of 'moderation' in the non-naturals that prescription writers advised. This paved the way for distinctions to be made between inferior men and women and superior men and women, although these were always contingent on both sexes fulfilling the well defined gender roles that emerged as dominant in the early modern period.

Aging, as I also argued, was always relational to dominant concepts of sexual incommensurability in the seventeenth century, and partly, sexual complementarity in the eighteenth. It is my contention in both chapters that ideas of sexed aging involved the repression of alternative meanings of masculinity and femininity. Partly this can be traced to the persistency of the one-sex model of sexual difference in early modern thought, which meant that contemporaries could only assert the naturalness of 'male' and 'female' by the occlusion of any characteristics that could potentially disrupt this binary opposition. Hence the changes in eighteenth-century models of the body that saw men aging sooner than women depended on a representation of femininity that excluded women with more active virtues. Under the guise of ideals of eighteenth-century liberalism, many men and women were not represented in the contemporary prescriptive literature that endeavoured to normalise sexed aging. This included the

omission of men and women from the lower orders. An idea of aging that was predicated on class and gender was prominent in eighteenth-century notions of nervous sensibility.

In the eighteenth century, aging as a physical experience was also related to the mind. This was a logical extension of a number of different theories which hypothesised the nature of the relationship between mind and body. The idea that subjectivity provided the surest foundation for maintaining health and longevity was indeed pervasive in eighteenth-century notions of sensibility. Largely this was skewed to the advantage of the upper classes, as this paradigm mediated the acuity of the mind as well the healthy endurance of the body through the expectations of elites. Ideas of the mind were also the focus of Chapter 4. Here I described and analysed how contemporaries understood the nature of the relationship between cognitive power and age. In the first part of this chapter I related the origins of developmental theories of mental development and how these emerged with the theorising of John Locke out of previously static conceptions of the human psyche that were entrenched within the procrustean bed of the immaterial soul. A number of theorists expanded upon Locke's paradigmatically defining idea that the mind and its associated functions developed over time. Whilst this was almost *de rigueur* to mid eighteenth-century theorists who progressed the *tabula rasa* concept, the question of whether the mind was sexed remained contentious throughout the early modern period. In respect of whether women had the same capacity as men for rational thought, however, it seems that proponents of the immaterial soul were more sympathetic to the idea than Locke. The crux of his argument against the developmental potential of women relied on the unalterable lines of opposition that determined men and women's roles in a conjugal society. Locke, like many of his peers, advanced the common trope that the male was associated with the mind and female with the body. This insinuation that women were deprived of the developmental potential of men was

variously contested throughout the seventeenth- and eighteenth centuries in the context of Cartesian dualism, the humoural body and in the emerging field of neuroanatomy. Although female contemporaries were quick to exploit the conceptual weaknesses of these theories, their claims to equality with men in respect of their capacity for intelligent and rational thought, were inclusive of some women but not all. This assertion involved the reconfiguration of the mind/body dichotomy along the lines of both class and gender, with upper-class females included on the more privileged side of this divide (the mind). Other contemporary women would nevertheless challenge the escape from the body that was a constituent part of arguments in favour of the elevated potential of the female mind.

For much of the seventeenth and eighteenth centuries, debates concerned with the contested existence of the sexed mind were interspersed with vignettes that challenged the hegemony of either a 'male' or 'female' mentality. As a material, embodied entity and as an abstract matter for theoretical debate, the mind and its cognates were firmly enmeshed within intersecting hierarchies of class and gender by the end of the early modern period. Many of the elements of these were debates carried over to contemporary understandings of idiocy. Although the components of mental enfeeblement that were concentrated in the figure of the idiot were well developed by the seventeenth century, John Locke done much to refine the pathology of this condition. Locke's influence was also profound in shaping legal practice with regards to the testing of idiots in the Courts of Wards and Liveries. As the idiot's failure to learn and inability to reason from simple propositions formed the backbone of the idiot classification throughout the period, it was in the application of the pathology to different social groups that efforts to apply the characteristics of mental enfeeblement were most concentrated. Indeed, although idiocy technically transcended both gender and class,

increasingly, who defined and who was defined by idiocy was a matter of power; where definitions in their application to specific groups of people were inseparable from the social biases they inspired. Dementia, in contrast to the persistence in representations of idiocy, would evolve considerably during the seventeenth and eighteenth centuries, as ‘amentia’, ‘dementia’, or both. Although the term 'dementia' came to denote a disorder of cognition that was both age-related and characterised by chronic, irreversible, mental incompetence in the early modern period, a number of contemporaries disputed the idea that mental faculties inevitably declined in old age. In summary, although the mind ‘developed’ and ‘declined’ according to a number of prominent theorists, cognitive plots were not always related to age in a determinate way.

In Chapter 5, I considered ideas of the early modern reproductive life-cycle, as these applied to early modern men and women and related to concepts of gender and class. It is my contention that although seventeenth- and eighteenth- writers and physicians had clear ideas about how the male and female life-cycles should proceed from menarche and puberty to menopause and declining reproductive fecundity in men, the contingent nature of these life-stages within understandings of the body that were fluid and heavily dependent on certain ideals of masculinity and femininity for their articulation and expression, meant that these were not inclusive of all men and women. Biological processes, as these were explained in the early modern period, relied on a seamless transition from sex to gender. In other words, what was considered ‘natural’ in terms of the functions of sexed bodies were contingent on certain idealised ‘male’ and ‘female’ behaviours, character traits and life-styles. The inevitable departures from ideas of gender that privileged the sexual division of labour, separate spheres and sexual incommensurability, imputed variations in the life-cycles of men and women who could not literally fulfil the terms of these prescriptions. Indeed, the class infused nature of

concepts of sexual development that were expressed through the more benign language of the non-naturals, illuminates the potentially atypical nature of the reproductive life-cycle for many early modern men and women.

For men, ideas of the generation of the seminal plethora were deeply embedded in the ideals of self-control and rationality that underpinned concepts of patriarchal manhood. Primarily, these elevated standards could only be met by men from the upper classes, not as it would seem by those from the lower orders. This varied with concerns about upper-class degeneracy and depopulation in the eighteenth century, although the valorisation of plebeian sexuality that this briefly brought about remained far from constant given the competing models of the body that emphasised contingency rather than constancy in a man's reproductive life.

For some women, life-cycle change was less pronounced or entirely displaced. This was related to the generative struggles women faced in establishing and maintaining a regular menstrual cycle from menarche to menopause. Indeed, although this was acknowledged with some consistency by writers of vernacular medical literature, not all women were treated equally in their generative and menstrual struggles. Only working women were regarded as less womanly for their failure to establish a regular menstrual cycle, if they managed to establish one at all. At the heart of interpretations of manly women and effeminate men who were marked out for the sterility and impotency of their bodies, was a sex-gender system that imputed a dynamic relationship between men and women and masculinity and femininity. In different ways throughout the seventeenth and eighteenth-centuries this dynamic provided the basis for innumerable variations in the life-cycles of early modern men and women.

In Chapter 6, I established how some of the ideas about sexual and reproductive development that were explored in Chapter 5, worked in practice. These ideas were analysed in a case study of medical witnesses' testimonies in rape trials at the Old Bailey during the period 1674-1800. I found that practices and discourses of sexual development were related in medical witnesses' adjudication of rape, although, at times, these proved difficult to reconcile with expectations of the raped body. Indeed, the ways in which rape constructed as an uncertain physical presence related to expectations of whether the body should be marked by its experience of rape at certain points in the life-cycle. The expectation that pre-pubescent bodies were more likely to be marked by their sexual violation than older girls and mature women was particularly pronounced. This related to ideas of the sexual immaturity of the female body before menarche. As a child's body was not physiologically developed enough for sex before puberty, physicians and midwives expected the damage to have been inflicted to her genitals to have been extraordinary. These expectations were nevertheless difficult to apply in practice. Genital injuries were not in themselves determinate of adult-child sexual contact, as this type of physical harm could often be explained by more benign causes. Indeed, one of the greatest impediments to the conviction of men for the rape of young children during the early modern period was the idea that the rape of a child was either impossible, or caused such incredible damage to the body that the real injuries inflicted on the genitals of little girls could never live up to the high expectations of medical witnesses. Widows faced similar difficulties in articulating rape where contemporary understandings of their physiology precluded the possibility of sexual intercourse at an advanced age. The collective cultural understandings of an elderly woman's desexualised state after menopause, prevented rape from being fully asserted.

The expectation of change in the female body between menarche and menopause also increased the opacity of the raped body. Given the scope for natural variations at puberty, and how this was expressed in the development of an older girl or young woman's body, midwives and physicians had to calculate, often without any sound physiological basis to evaluate this from, how menstruation and sexual maturity could neutralise the physical effects of rape. Two conflicting ideas of how puberty contributed to the sexual maturity of the body conspired to make rape an uncertain bodily presence. This meant that expectations of what rape should look like shifted in accordance with two very different ideas of what constituted sexual readiness and suitability for sexual intercourse. As a result of unresolved issues relating to whether or not sexual maturity was constituted in the sexual act or part of the natural development of the pubescent body, medical witnesses found themselves unable to determine rape with any certainty. Hence whether the body was marked or not did not establish rape one way or another. Medical developments relating to the potentially wider causes of VD also contributed to medical uncertainty in this respect. These were more likely than not to contribute to the obfuscation of rape, as we saw most notably with the application of theories about the hymen to the bodies of younger and older virgins.

When married women were the victims of rape medical evidence was deemed of little use in determining the veracity of an allegation. The absence of this type of evidence was understandable when rape was thought indistinguishable from sex. The absence of any available discourses of sex that may have enabled a woman to articulate the differences between consensual and non-consensual intercourse, overlapped with understandings of the female body that also made this distinction a hypothetical one. At the heart of this reading of rape as an absence rather than a presence in the bodies of sexually active married women, was the displacement of the rapist's body in medical witnesses'

calculations of the physical effects of sexual violation. Indeed, whilst the female body was thought of as dynamic entity that modified the signs of rape according to opacities of the life-cycle, the body of the rapist was either absent or assumed a generic presence in the practice of medical jurisprudence. Whilst this position owed much to broader cultural understandings of male sexual development, it is perhaps more to accurate to say that the construction of rape as not rape was made possible by a concept of female sexual maturity that was inordinately accommodating to the male body.

Although my analysis has focused on the interactions between aging, gender and class in early modern culture, others may pursue other lines of enquiry to illuminate how understandings of age were forged in dialogue with other categories of analysis, including religion and race. Equally, scholars need not always focus on the aging experiences of contemporaries solely in early modern England, either, given the potential for a comparative analysis that exists with the rich availability of sources now accessible to scholars. Indeed, despite the potential for comparative research on the aged in various cultural milieux, this promise has not yet been fully realised.[784] Historians may also decide to do more with class than I have. Although early modern scholars are well attuned to the nuances of class in constructing the aging experiences of women we need to know more about the same process in men. My own study has attempted to illuminate this relationship in a number of ways that involves the application of historians' conclusions on the diffuse nature of early modern manhood to ideas of male aging. This has been explored through a limited number of themes in each chapter, therefore, the opinions I have surmised in this study are partial and provisional. In learning more about the nature male and female aging we also need to re-examine our assumptions about the

[784] Lynn Botelho and Pat Thane, 'Introduction', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), p. 5.

discursive fields of gender in which contemporary sources of age were produced. Whilst this is a well developed approach in studies of female old age where scholars have skilfully reconstructed the phenomenon of female aging in distinction to conceptualisations of 'male aging' in 'male' sources like the 'ages of man' paradigms, I have endeavoured to show that we can no longer assume that these sources are unproblematic in the sense that they applied to all men. Given the vastly sharpened conceptual tools of gender now at our disposal this remains a fruitful avenue of enquiry for scholars interested in constructions of the aging experiences of *both* sexes. My own approach has depended on a definition of gender that is inclusive of masculinity and femininity as well as men and women. This is not the only legitimate approach to the study of age, but it remains the most underdeveloped. In contributing, albeit in a small way to furthering our knowledge in this respect, I hope to have provided a sense of the rich textures of aging that were part of the cultural milieu of everyday life in early modern England.

BIBLIOGRAPHY

PRINTED PRIMARY SOURCES

Adair, James Mattrick, *Essays on Fashionable Diseases. The Dangerous Effects of Hot and Crouded [sic] Rooms* (London, 1790).

Adair, James Mattrick, *Medical Cautions; Chiefly for the Consideration of Invalids. Containing Essays on Fashionable Diseases* (London, 1787).

Adair, James, Mattrick, *A Philosophical and Medical Sketch of the Natural History of the Human Body and Mind. To which is Subjoined, An Essay on the Difficulties of Attaining Medical Knowledge* (Bath, 1787).

Adair, James Mattrick, *Commentaries on the Principles and Practice of Physic. Illustrated by Pathological Tables and Practical Cases. Being An Attempt, on a New Plan, to Connect the Several Branches of Medicine, and to Place the Practice of it on a Rational and Solid Foundation* (London, 1772).

Adams, Francis, trans. and ed., *The Genuine Works of Hippocrates: Translated from the Greek with a Preliminary Discourse and Annotations,* Vol. II (New York, 1886).

Addison, J. and Steele, R., *The Spectator,* Vol. 1, ed., Donald F.B. Bond (London, 1965, First published in London, 1711).

Agrippa von Nettesheim, Heinrich Cornelius, *Female Pre-eminence: or The Dignity and Excellency of that Sex, above the Male ... Done in English with Additional Advantages. By H.C* (London, 1670).

Allestree, Richard, *The Whole Duty of Man Laid Down. In a Plain and Familiar Way for the Use of All* (London, 1680).

Allestree, Richard, *Allestree 1640. A New Almanack and Prognostication for the Yeere of our Lord God 1640, Being the Bissextile or Leap Yeere* (London, 1640).

Anonymous, *An Account of the Causes of Some Particular Rebellious Distempers, viz. the Scurvy, Cancers in Women's Breasts, &c. Vapours, and Melancholy* (London, 1670).

Anonymous, *Aristotle's Compleat Master-Piece. In Three Parts. Displaying the Secrets of Nature in the Generation of Man* (London, 1763).

Anonymous, *Aristotle's Last Legacy, Unfolding the Mysteries of Nature in the Generation of Man* (London, 1749).

Anonymous, *Aristotle's Master-Piece, or, The Secrets of Generation Displayed in all Parts thereof* (London, 1694).

Anonymous, *The Child's Physician, or the Mother and Nurse Instructed in the Management and Cure of ... Disorders Incident to Children* (London, 1795).

Anonymous, *The Compleat Doctoress Or, a Choice Treatise of all Disease Incident to Women with Experimentall Remedies against the Same* (London, 1656).

Anonymous, *An Enquiry into the Nature of the Human Soul, Its Origin, Properties, and Faculties; Considered both in Regard to Itself, and its Union with the Body* (London, 1750).

Anonymous, *An Essay on the Most Rational Means of Preserving Health, and of Attaining to an Advanced Age. To Which are Added, Anecdotes of Longevity* (London, 1799).

Anonymous, *An Essay on the Soul of Man* (London, 1744).

Anonymous, *Every Lady Her Own Physician; Or, The Closest Companion Containing Ample Instructions for the Prevention and Cure of all Disorders Incident to the Fair Sex; the Whole Being Rendered Familiar and Intelligible* (London, 1788).

Anonymous, *The Immortality of Mans Soule, proved both by Scripture and Reason* (London, 1645).

Anonymous, *The Ladies Dispensatory: Or Every Woman her own Physician Treating of the Nature, Causes, and Various Symptoms, of all the Diseases, Infirmities, and Disorders, Natural or Contracted, that Most Peculiarly Affect the Fair Sex* (London, 1755?).

Anonymous, *Onania, or the Heinous Sin of Self-Pollution, and all its Frightful Consequences, in both Sexes, Considered with Spiritual and Physical Advice for Those who have already Injur'd Themselves by this Abominable Practice* (London 1716?).

Arbuthnot, John, *An Essay Concerning the Effects of Air on Human Bodies* (London, 1733).

Arbuthnot, John, *An Essay Concerning the Nature of Ailments and the Choice of them, According to the Different Constitutions of Human Bodies* (London, 1733).

Archer, John, *Every Man His Own Doctor. In Two Parts. Shewing I. How Every One may know His Own Constitution and Complection* (London, 1671).

Aristotle [Attributed], *On the Soul: Parva Naturalia; On Breath,* trans. W.S. Hett (London, 1964).

Aristotle [Attributed], *The Problemes of Aristotle with Other Philosophers and Phisitions. Wherein are Contayned Diuers Questions, with their Answers, Touching the Estate of Mans Bodie* (London, 1595 and 1776).

Astell, Mary, *A Serious Proposal to the Ladies for the Advancement of Their True and Great Interest* (New York, 1970, First Published 1694).

Astell, Mary, *An Essay in Defence of the Female Sex* (London, 1696).

Astruc, John, *A Treatise on the Diseases of Women; In Which it is Attempted to Join a Just Theory to the Most Safe and Approved Practice* (London, 1762).

Avicenna [Attributed to Avicenna by Ibn Sina?], *Canon Medicinae,* Vol. 1 (London, 1608).

Bacon, Francis, *The Works of Francis Bacon,* Vol. 1, ed., Basil Montague (Philadelphia, 1842).

Bacon, Francis, *The Philosophical Works of Francis Bacon, Baron of Verulam, Viscount St. Albans, and Lord High-Chancellor of England; Methodized, and made English, from the Originals* (London, 1733).

Bacon, Francis, *History Natural and Experimental of Life and Death or Of the Prolongation of Life* (London, 1623).

Bacon, Roger, *De Retardation Accidentium Senectutis,* eds., A.G. Little and E. Withington (Oxford, 1928).

Bacon, Roger, *The Cure of Old Age and Preservation of Youth by Roger Bacon ... Translated out of Latin, with Annotations and an Account of his Life and Writings by Richard Browne* (London, 1683).

Barrough, Philip, *The Method of Physick Containing the Causes, Signes, and Cures of Inward Diseases in Mans Body, from the Head to the Foote* (London, 1652).

Bartholin, Thomas, *Bartholinus Anatomy; Made from the Precepts of his Father, and From the Observations of all Modern Anatomists; Together with his own ... in Four Books and Four Manuals ... Published by Nich. Culpeper and Abdiah Cole* (London, 1668).

Basse, William, *A Help to Discourse: or, More Merriment Mixt with Serious Matters* (London, 1682).

Basset, Robert, *Curiosities: or The Cabinet of Nature Containing Phylosophical, Naturall, and Morall Questions Fully Answered and Resolved* (London, 1637).

Baxter, Richard, *Reliquiæ Baxterianæ: or, Mr. Richard Baxter's Narrative of the Most Memorable Passages of his Life and Times* (London, 1696).

Bentley, Richard, *The Folly and Unreasonableness of Atheism Demonstrated from the Advantage and Pleasure of a Religious Life, The Faculties of Humane Souls* (London, 1699).

Beridge, Ferdinando, *Oi Dodekomzooi, or, An Almanack for the Year of our Lord God 1654* (London, 1654).

Blackmore, Sir Richard, *A Treatise of the Spleen and Vapours: or, Hypochondriacal and Hysterical Affections* (London, 1725).

Blackstone, Sir William, *Commentaries on the Laws of England,* Vol. 4 (London, 1769).
Blackstone, Sir William, *Commentaries on the Laws of England,* Vol. 1 (Oxford, 1765-1769).
Blagrave, Joseph, *Blagraves Astrological Practice of Physick. Discovering the True Way to Cure all Kinds of Diseases and Infirmities* (London, 1671).
Blagrave, Joseph, *Blagrave's Ephemeris for the Year 1660 with Physical and Astrological Observations on Every Month* (London, 1660).
Blakey, William, *Essay on the Manner of Preserving Children and Grown Persons from Ruptures* (London, 1792).
Blanchard, Stephen, *The Physical Dictionary Wherein The Terms Of Anatomy, The Names And Causes Of Diseases, Chirurgical Instruments, And Their Use, Are Accurately Described* (London, 1726).
Boerhaave, Herman, *Dr. Boerhaave's Academical Lectures on the Theory of Physic,* Vol. 6 (London, 1742-1746).
Boerhaave, Herman, *Dr. Boerhaave's Academical Lectures on the Theory of Physic,* Vol. 5 (London, 1742-1746).
Boorde, Andrew, *A Compendyous Regyment or a Dyetary of Helth* (London, 1542).
Boswell, James, *The Life of Samuel Johnson* (London, 1783).
Bracken, Henry, *The Midwife's Companion; or, a Treatise of Midwifery: Wherein the Whole Art is Explained* (London, 1737).
Bradstreet, Anne, *Several Poems Compiled with Great Variety of Wit and Learning, Full of Delight Wherein Especially is Contained a Compleat Discourse* (London, 1678).
Brooke, Humphrey, *Ugieine or, A Conservatory of Health. Comprized in a Plain and Practicall Discourse Upon the Six Particulars Necessary to Mans Life* (London, 1650).
Brookes, Richard, *The General Practice of Physic; Extracted chiefly from the Writings of the Most Celebrated Physicians* (London, 1754).
Browne, Joseph, *Institutions in Physick, Collected from the Writings Of the Most Eminent Physicians. By which the Principles and Fundamentals of that Art are Digested and Fully Explain'd* (London, 1714).
Browne, Thomas, *Pseudodoxia Epidemica: or, Enquiries into Very Many Received Tenents, and Commonly Presumed Truths* (London, 1676).
Bruele, Gualtherus, *Praxis Medicinae: or, The Physicians Practice. Wherein are Contained Inward Diseases from the Head to the Foote* (London, 1632).
Brydall, John, *Non Compos Mentis: or the Law Relating to Natural Fools, Mad-Folks and Lunatick Persons* (London, 1700).
Buchan, William, *Domestic Medicine: Or, A Treatise on The Prevention and Cure of Diseases by Regimen and Simple Medicines* (London, 1774).
Buffon, Georges Louis Leclerc, *Barr's Buffon. Buffon's Natural History, Containing A Theory of the Earth, a General History of Man, of the Brute Creation, and of Vegetables, Minerals,* Vol. 4 (London, 1797).
Bullein, William, *The Government of Health: A Treatise Written by William Bullein, for the Especiall Good and Healthfull Preseruation of Mans Bodie from all Noysome Diseases* (London, 1595).
Bureau d'adresse et de rencontre, *Another Collection of Philosophical Conferences of the French Virtuosi, Upon Questions of all Sorts; For the Improving of Natural Knowledge. Made in the Assembly of the Beaux Esprits at Paris, by the most Ingenious Persons of that Nation. Render'd into English, by G. Havers Gent. and J. Davies of Kedwelly, Gent* (London, 1665).
Burton, Robert, *The Anatomy of Melancholy, What It Is. With all the Kindes, Causes, Symptomes, Prognostickes, and Seuerall Cures of It* (London, 1621).
Butler, Joseph, *Analogy of Religion, Natural and Revealed, to the Constitution and Course of Nature* (London, 1736).

Camden, William, *Britain, or A Chorographicall Description of the Most Flourishing Kingdomes, England, Scotland, and Ireland, and the Ilands adjoyning, out of the depth of Antiquitie beautified with Mappes of the Severall Shires of England: Written first in Latine by William Camden Clarenceux K. of A. Translated newly into English by Philémon Holland Doctour in Physick* (London, 1637).

Carter, Samuel, *The Infants Lawyer: Or the Law (Ancient and Modern) Relating to Infants* (London, 1697).

Chambers, Ephraim, *Cyclopædia, or An Universal Dictionary of Arts and Sciences* (London, 1738).

Charlton, Walter, *A Natural History of the Passions* (London, 1701).

Charron, Pierre, *Of Wisdom. Three books. Written originally in French, by the Sieur de Charron. With an account of the author. Made English by George Stanhope* (London, 1707).

Cheyne, George, *The Natural Method of Cureing the Diseases of the Body, and the Disorders of the Mind Depending on the Body* (London, 1742).

Cheyne, George, *An Essay on Regimen. Together with Five Discourses, Medical, Moral and Philosophical* (London, 1740).

Cheyne, George, *The English Malady: or, A Treatise of Nervous Diseases of All Kinds* (London, 1733).

Cheyne, George, *An Essay of Health and Long Life* (London, 1724).

Cheynell, Francis, *The Man of Honour Described in a Sermon, Preached before the Lords of Parliament, in the Abbey Church at Westminster, March 26. 1645* (London, 1645).

Cicero, Marcus Tullius, *Offices - De Officiis, Laelius, Cato Major and Select Letters,* ed., S.E. Smethurst (London, 1953).

Cicero, Marcus Tullius, *De Amicitia, De Senectute,* trans. W.A. Falconer (London, 1923).

Cogan, Thomas, *The Haven of Health. Chiefely Gathered for the Comfort of Students, and Consequently of all those that have a Care of their Health* (London, 1636).

Coke, Sir Edward, *The Third Part of the Institutes of the Laws of England* (London, 1817, First published in London, 1644).

Coke, Roger, *Treatises of the Nature of Man First, Wherein the Nature of Man agrees with that of other Creatures, and herein of the Majesty, Wisdom, Providence, and Goodness of God* (London, 1685).

Collignon, Charles, *An Enquiry into the Structure of the Human Body, Relative to Its Supposed Influence of the Morals of Mankind* (Cambridge, 1764).

Conway, Anne, *The Principles of the Most Ancient Philosophy,* trans. and eds., Allison P. Coudert and Taylor Corse (Cambridge, 1996).

Cornaro, Luigi, *Sure and Certain Methods of Attaining a Long and Healthful Life: With Means of Correcting a Bad Constitution ... Made English by W. Jones* (London, 1702).

Cosin, Richard, *Conspiracie, for Pretended Reformation: viz. Presbyterial Discipline. A Treatise Discouering the Late Designments and Courses held for Aduancement hereof* (London, 1592).

Coward, William, *Second Thoughts Concerning the Human Soul, Demonstrating the Notion of Human Soul, As Believ'd to be a Spiritual Immortal Substance, United to Human Body* (London, 1702).

Cowell, John, *A Law Dictionary, or the Interpreter of Words and Terms, Used either in the Common or Statute Laws of Great Britain* (London, 1727).

Cowper, William, *Myotomia Reformata: or An Anatomical Treatise on the Muscles of the Human Body* (London, 1694).

Crichton, Alexander, *An Enquiry into the Nature and Origin of Mental Derangement. Comprehending A Concise System of the Physiology and Pathology of the Human Mind* (London, 1798).

Crooke, Helkiah, *Mikrokosmographia: A Description of the Body of Man. Together with the Controuersies thereto belonging* (London, 1615).
Cuff, Henry, *The Differences of the Ages of Mans Life: Together with the Originall Causes, Progresse, and End thereof* (London, 1607).
Cullen, William, *The Works of William Cullen, M.D.,* Vol. 1, ed., John Thomson (Edinburgh, 1827).
Cullen, William, *The First Lines of the Practice of Physic, for the Use of Students in the University of Edinburgh* (Edinburgh, 1786).
Cullen, William, *The Institutions of Medicine. Part I. Physiology. For the Use of the Students in the University of Edinburgh* (London, 1772).
Cullen, William, *Lectures on the Materia Medica as delivered by William Cullen, M. D. Professor of Medicine in the University of Edinburgh* (London, 1733).
Culpeper, Nicholas, *A Directory for Midwives: or, A Guide for Women, in their Conception, Bearing, and Suckling their Children* (London, 1701).
Culpeper, Nicholas, *Culpeper Revived from the Grave, to Discover the Cheats of that Grand Impostor call'd Aurum Potabile* (London, 1687).
Culpeper, Nicholas, *Culpeper's Directory for Midwives: or, A Guide for Women* (London, 1662).
Culpeper, Nicholas, *Galen's Art of Physick: Wherein is Laid Down, 1. A Description of Bodies, Healthful, Unhealthful, and Neutral* (London, 1657).
Culpeper, Nicholas, *Health for the Rich and Poor, By Dyet without Physick* (London, 1656).
Culpeper, Nicholas, *The English Physitian Enlarged: With Three Hundred, Sixty, and Nine Medicines made of English Herbs* (London, 1653).
D'Assigny, Marius, *The Art of Memory a Treatise useful for such as to Speak in Publick* (London, 1697).
Dalton, Michael, *The Countrey Justice: Containing the Practice of the Justices of the Peace as well as out of their Sessions: Gathered for the Better Help of such Justices of Peace as have not been much Conversant in the Study of the Laws of this Realm* (London, 1666).
Davies, John, *Microcosmos. The Discovery of the Little World, with the Government thereof* (London, 1603),
de La Mothe-Fénelon, François de Salignac, *An Essay Founded upon Arguments Natural and Moral, Proving the Immortality of the Soul. Translated from the Original Manuscript of the Archbishop of Cambray* (London, 1730).
Dekker, Thomas, *The Wonderfull Yeare 1603: Wherein Is Shewed the Picture of London, Lying Sicke of the Plague* (London, 1603).
Descartes, Réne, *The Philosophical Writings of Descartes,* Vol. 1, trans. John Cottingham, Robert Stoothoff and Dugald Murdoch (Cambridge, 1984).
Descartes, Réne, *Oeuvres de Descartes*, eds., Charles Adam and Paul Tannery (London, 1964-1974).
Diemerbroeck, Isbrand van, *The Anatomy of Human Bodies; Comprehending the Most Modern Discoveries and Curiosities in that Art* (London, 1694).
Digby, Sir Kenelm, *Of Bodies and of Mans Soul to Discover the Immortality of Reasonable Souls, With Two Discourses Of the Powder of Sympathy, and Of the Vegetation of Plants* (London, 1669).
Donne, John, *Deuotions upon Emergent Occasions, and Seuerall Steps in my Sicknes* (London, 1627).
Douglas, G. Archibald, *The Nature and Causes of Impotence in Men, and Barrenness in Women Explained* (Dublin, 1758).
Dove, Jonathan, *Dove Speculum Anni à Partu Virginis MDCLX, or, An Almanack for the Yeare of our Lord God 1660* (Cambridge, 1660).
Dover, Dr., *A Treatise on Hypochondriacal and Hysterical Diseases* (London, 1732).

Du Laurens, André, *A Discourse of the Preseruation of the Sight: of Melancholike Diseases; of Rheumes, and of Old Age ... Translated out of French into English, According to the Last Edition, by Richard Surphlet, Practitioner in Phisicke* (London, 1599).
Duncon, Eleazar, *The Copy of a Letter Written by E.D. Doctour of Physicke to a Gentleman, by Whom it was Published* (London, 1606).
East, Edward H., *A Treatise of the Pleas of the Crown,* Vol. 2 (London, 1803).
Elyot, Sir Thomas, *The Castel of Helth Gathered and Made by Syr Thomas Elyot Knyghte, Out of the Chiefe Authors of Physyke* (London, 1539).
Etmullerus, Michael, *Etmullerus Abridged: or, A Compleat System of the Theory and Practice of Physic* (London, 1703).
Ferrand, Jacques, *Erotomania, or, A Treatise Discoursing of the Essence, Causes, Symptomes, Prognosticks and Cure of Love or Erotic Melancholy* (London, 1645).
Fitzherbert, Sir Anthony, *Natura Brevium, of the Most Reverend Judge Mr. Anthony Fitz-Herbert. Corrected and Revised by the Author* (London, 1652).
Floyer, Sir John, *The Art of Preserving Old Men's Healths, Explain'd: in Twenty Chapters* (London, 1738).
Floyer, Sir John, *Medicina Gercomica: or the Galenic Art of Preserving Old Men's Healths Explain'd* (London, 1725).
Fly, *Fly 1657. An Almanacke, for the Yeare of our Lord God, 1657 Being the First after Bissextile or Leap-year* (London, 1657).
Fonteyn, Nicolaas, *The Womans Doctor, or, An Exact and Distinct Explanation of all Such Diseases as are Peculiar to that Sex* (London, 1652).
Forster, William, *A Treatise on the Causes of Most Diseases, and the Cure of them. First, by a Right Use of the Non-Naturals Chiefly by Diet* (Leeds, 1745).
Fothergill, John, *On the Management Proper at the Cessation of the Menses* (London, 1776).
Fothergill, John, *Rules for the Preservation of Health: Containing all that has been Recommended By the Most Eminent Physicians* (London, 1762).
Freind, John, *Emmenologia: Written, in Latin, By the Late Learned Dr. John Freind. Translated into English by Thomas Dale* (London, 1729).
Fuller, Thomas, *Medicina Gymnastica: or A Treatise Concerning the Power of Exercise, With Respect to the Animal Oeconomy* (London, 1705).
Galen, *On Disease and Symptoms,* ed., Ian Johnson (Cambridge, 2006).
Galen, *Caleni [sic] Pergamensis De Temperamentis* (London, 1521).
Gardner, Robert, *Veterinarium, Meteorologist Astrology* (London, 1698).
Glisson, Francis, *A Treatise of the Rickets: Being a Disease Common to Children. Wherin (among many other things) is Shewed* (London, 1651).
Goldisborough, John, *An Almanack and Prognostication for the year of our Lord, 1662. Being the Second from Bissextile or Leap Year, and from the Creation, 5611* (London, 1662).
Goodman, Godfrey, *The Fall of Man, or the Corruption of Nature Proved by the Light of Our Naturall Reason* (London, 1616).
Green, Dr., *The Modern Family Physician being Dr. Green's Treatise of Health: Or, Cabinet of Cures Unlock'd. In which all his Public Medicines are Made Known* (London, 1783?).
Greenwood, Will, *[Apographe storges], or, A Description of the Passion of Love Demonstrating its Original, Causes, Effects, Signes, and Remedies* (London, 1657).
Grew, Nemiah, *The Anatomy of Plants: With an Idea of a Philosophical History of Plants and Several Other Lectures Read Before the Royal Society* (London, 1682).
Groeneveld, Joannes, *The Grounds of Physick, Containing so Much of Philosophy, Anatomy, Chimistry, and the Mechanical Construction of a Humane Body* (London, 1715).
Grove, Henry, *An Essay Towards A Demonstration of the Soul's Immateriality* (London, 1718)

H., N., *The Ladies Dictionary, Being a General Entertainment of the Fair-Sex. A Work Never Attempted before in English* (London, 1694).
Hakewill, George, *An Apologie of the Power and Prouidence of God in the Government of the World, Or An Examination and Ensure of the Common Errour* (Oxford, 1627).
Hale, Sir Matthew, *Historia Placitorium Coronae. The History of the Pleas of the Crown,* Vol. 1, eds., Sollom Emlyn and George Wilson (London, 1800, First published in London, 1736).
Hale, Sir Matthew, *The History of Pleas of the Crown* (London, 1736).
Hale, Thomas, *An Account of Several New Inventions and Improvements now Necessary for England* (London, 1691).
Haller, Albrecht von, *A Dissertation on the Sensible and Irritable Parts of Animals* (London, 1755).
Hamilton, Alexander, *Outlines of the Theory and Practice of Midwifery* (Edinburgh, 1787).
Harris, John, *The Divine Physician, Prescribing Rules for the Prevention, and Cure of Most Diseases, As Well of the Body, As the Soul* (London, 1676).
Harrison, William, *The Description of England: The Classic Contemporary Account of Tudor Social Life,* ed., Georges Edelen (New York, 1994 [First published in Raphael Holinshed, *The First and Second Volumes of Chronicles, Comprising 1 The Description and Historie of England* (London, 1587]).
Hart, James, *Klinike, or The Diet of the Diseased. Divided into Three Bookes. Wherein is Set Downe at Length the Whole Matter and Nature of Diet for those in Health, but Especially for the Sicke* (London, 1633).
Hartley, David, *Observations on Man, His Frame, His Duty and His Duty and His Expectations* (London, 1749).
Harvey, Gideon, *Archelogia Philosophica Nova, or, New Principles of Philosophy. Containing Philosophy in General. Metaphysicks, or Ontology. Dynamilogy, or a Discourse of Power* (London, 1663).
Haslam, John, *Observations on Insanity with Practical Remarks on the Disease and an Account of the Morbid Appearances on Dissection* (London, 1798).
Haworth, Samuel, *Anthropologia, or, A Philosophic Discourse Concerning Man. Being the Anatomy both of his Soul and Body* (London, 1680).
Hazlitt, William, *An Essay on the Principles of Human Action: Being an Argument in Favour of the Natural Disinterestedness of the Human Mind* (London, 1805).
Head, Richard, *Proteus Redivivus: or, The Art of Wheedling or Insinuation, Obtain'd by General Conversation* (London, 1675).
Heathcott, William, *Annus ab Incarnatione Domini. 1665. An Almanack and Prognostication for the Year of our Lord 1665 Being the First from Bissextile or Leap-year* (London, 1656).
Helmont, Johannes Baptista van, *Oriatrike, or, Physick Refined and the Whole Art Reformed & Rectified: Being a New Rise and Progress of Phylosophy and Medicine ... Now Faithfully Rendered into English, in Tendency to a Common Good, and the Increase of True Science; by J.C. sometime of M.H. Oxon* (London, 1662).
Hippel, Theodor Gottlieb von, *On Improving the Status of Women*, trans. and ed., Timothy F. Sellner (Detroit, 1979, First published in Berlin and London, 1792).
Hippocrates, *Diseases of Women 1*, trans. Ann Hanson, *Signs,* Vol. 1.2 (1975), pp. 567-584.
Hippocrates [Attributed], *On the Disease of Virgins, with a Commentary provided by G. Tardy* (London, 1648).
Hippocrates [Attributed], The *Whole Aphorisms of Great Hippocrates Prince of Physicians: Faithfully Translated into English for the Benefit of Such as are Ignorant of the Greek & Latine Tongs* (London, 1610).

Hodges, James, *The Ladies Dispensatory: or Every Woman her own Physician. Treating of the Nature, Causes, and Various Symptoms, of all the Diseases, Infirmities, and Disorders, Natural or Contracted, that Most Peculiarly Affect the Fair Sex* (London, 1739).
Hoffman, Friedrich, *Medicina Rationalis Systematica: A System of the Practice of Medicine* (London, 1738).
Holmes, Edward, *An Attempt to Prove the Materiality of the Soul, by Reason and Scripture* (Newcastle, 1789).
Hooker, Thomas, *The Immortality of Mans Soule, proved both by Scripture and Reason Contrary to the Fancie of R.O. in his Book intituled Mans Mortality* (London, 1645).
Howlett, John, *An Examination of Dr. Price's Essay on the Population of England and Wales and the Doctrine of Increased Population in This Kingdom Established by Facts,* ed., A.M. Kelly (New York, 1968, First published in London, 1781).
Huarte, Juan, *Examen de Ingenios, or, The Tryal of Wits. Discovering the Great Difference of Wits Among Men, and What Sort of Learning Suits Best with Each Genius. Published Originally in Spanish by Doctor Juan Huartes. And Made English from the Most Correct Edition by Mr. Bellamy* (London, 1698).
James, Robert, *A Medicinal Dictionary; Including Physic, Surgery, Anatomy, Chymistry, and Botany, in All their Branches Relative to Medicine*, Vol. 2 (London, 1743-1745).
Johnson, Samuel, *A Dictionary of the English Language: In Which the Words are Deduced from their Originals, Explained in their Different Meanings, and Authorized by the Names of the Writers in whose Works they are Found* (London, 1756).
Johnson, Samuel, *The Elements of Philosophy: Containing, I. The Most Useful Parts of Logic, Including both Metaphysics and Dialectic, or the Art of Reasoning* (London, 1754).
Jones, W.H.S., trans. and ed., *Hippocrates* (London, 1959).
Jonstonus, Joannes, *The Idea of Practical Physic in Twelve Books. Viz. 1. The Art to Preserve Health. 2. Of the Preternatural Disorders of Mans Body, and their Signs ... Englished by Nich. Culpeper, Gent* (London, 1657).
Keill, James, *The Anatomy of the Humane Body Abridged; or, A Short and Full View of All the Parts of the Body* (London, 1698).
La Mettrie, Julien Offray de, *Man a Machine. Translated from the French of the Marquiss D'Argens* (London, 1748).
La Primaudaye, Pierre de, *The French Academie. Fully Discoursed and Finished in Foure Bookes* (London, 1618).
La Primaudaye, Pierre de, *The Second Part of the French Academie. Wherein, As it Were by a Naturall Historie of the Bodie and Soule of Man* (London, 1594).
Langley, Thomas, *Langley 1641 A New Almanack and Prognostication for this Yeare of our Lord God 1641, Being the First After Leape-yeare* (London, 1641).
Langrish, Browne, *A New Essay on Muscular Motion. Founded on Experiments, Observations, and the Newtonian Philosophy* (London, 1733).
Le Grand, Antoine, *An Entire Body of Philosophy According to the Principles of the Famous Renate Des Cartes* (London, 1694).
Leake, John, *Medical Instructions Towards the Prevention and Cure of Chronic Diseases Peculiar to Women; In which, Their Nature is Fully Explained,* Vol. 1 (London, 1781).
Lemnius, Levinus, *A Discourse Touching Generation. Collected out of Laevinus Lemnius, A Most Learned Physitian* (London, 1667).
Lemnius, Levinus, *The Secret Miracles of Nature in Four Books. Learnedly and Moderately Treating of Generation, and the Parts Thereof* (London, 1658).
Lemnius, Levinus, *The Touchstone of Complexions. Generallye Appliable, Expedient and Profitable for all Such, As be Desirous & Carefull of their Bodylye Health* (London, 1576).

Lessius, Leonardus, *Hygiasticon: Or, The Right Course of Preserving Life and Health unto Extream Old Age. Together with Soundness and Integritie of the Senses, Judgement, and Memorie. Written Originally in Latin, by Leonard Lessius. Now Rendered into English, by T. Smith* (London, 1634).
Locke, John, *Two Treatise of Civil Government,* ed., J.M. Dent (London, 1924).
Locke, John, *Some Thoughts Concerning Education* (London, 1693).
Locke, John, *An Essay Concerning Humane Understanding. In Four Books* (London, 1690).
Lowde, James, *A Discourse Concerning the Nature of Man, both in his Natural and Political Capacity: Both as he is a Rational Creature, and Member of a Civil Society* (London, 1694).
Lynch, Bernard, *A Guide to Health Through the Various Stages of Life. Wherein are Explained, I. The Different Degrees and Changes of Age* (London, 1744).
MacKenzie, George, *Religio Stoici* (London, 1663).
Makluire, John, *The Buckler of Bodilie Health, Whereby Health May Bee Defended, and Sickesse Repelled* (London, 1630).
Malebranche, Nicolas, *Father Malebranche his Treatise Concerning the Search After Truth. The Whole Work Complete. To Which is Added the Author's Treatise of Nature and Grace ... All translated by T. Taylor* (London, 1700).
Mandeville, Bernard, *A Treatise of the Hypochondriack and Hysterick Passions, Vulgarly Call'd the Hypo in Men and Vapours in Women* (London, 1711).
Marinella, Lucrezia, *The Nobility and Excellence of Women and the Defects and Vices of Men,* trans. and eds., Ann Dunhill and Letizia Panizza (Chicago, 1999).
Markham, Gervase, *Country Contentments, In Two Bookes, The First, Containing the Whole Art of Riding Great Horses in Very Short Time* (London, 1615).
Marten, John, *A Compendious Treatise of all the Degrees and Symptoms of the Venereal Distemper, In Both Sexes, with Remedies for their Respective Cures* (London, 1735).
Marten, John, *Gonosologium Novum: or, A New System of All the Secret Infirm and Diseases, Natural, Accidental, and Venereal in Men and Women* (London, 1709).
Massaria, Alessandro, *De Morbis Foemineis, The Woman's Counsellour: or the Feminine Physician ... Translated out of Massarius de Morbis Mulier. By R.T. Philomathēs* (London, 1657).
Maubray, John, *The Female Physician, Containing All the Diseases Incident to that Sex, in Virgins, Wives, and Widows* (London, 1724).
Mauquest de la Motte, Guillaume, *A General Treatise of Midwifry: Illustrated with Upwards of Four Hundred Curious Observations and Reflexions Concerning that Art ... translated into English by Thomas Tomkyns, Surgeon* (London, 1746).
Maynwaringe, Everard, *The Method and Means of Enjoying Health, Vigour, and Long Life. Adapting Peculiar Courses, for Different Constitutions* (London, 1683).
Maynwaringe, Everard, *Vita Sana & Longa. the Preservation of Health and Prolongation of Life. Proposed and Proved* (London, 1669).
Maynwaringe, Everard, *Tutela Sanitatis Sive Vita Protracta. The Protection of Long life, and Detection of its Brevity, from Diaetic Causes and Common Customs* (London, 1664).
Mede, Joseph, *The Works of the Pious and Profoundly-learned Joseph Mede, B.D. Sometime Fellow of Christ's Colledge in Cambridge* (London, 1672).
Mexía, Pedro, *The Wonders of the World: or, Choice Observations and Passages, Concerning the Beginning, Continuation, and Endings, of Kingdomes and Commonwealths ... Written Originally in Spanish, Translated into French, and now made English, by that Pious and Learned gentleman Joshua Baildon. Imprimatur, John Downam* (London, 1665).
Mexía, Pedro, *The Treasurie of Auncient and Moderne Times. Containing the Learned Collections, Judicious Readings, and Memorable Obseruations* (London, 1613).

Moore, Philip, *The Hope of Health, Wherein is Conteined A Goodlie Regiment of Life: as Medicine, Good Diet and the Goodly Vertues of Sondrie Herbes* (London, 1565).
Morgagni, Giambattista, *The Seats and Causes of Diseases Investigated by Anatomy; In Five Books, Containing A Great Variety of Dissections, with Remarks... Translated from the Latin of John Baptist Morgagni, Chief Professor of Anatomy, and President of the University at Padua, by Benjamin Alexander, M. D,* Vol. 2 (London, 1779).
Morgan, Thomas, *Physico-Theology, Or, A Philosophico-Moral Disquisition Concerning Human Nature, Free Agency, Moral Government, and Divine Providence* (London, 1743).
Morgan, Thomas, *Philosophical Principles of Medicine, in Three Parts. Containing, I. A Demonstration of the General Laws of Gravity, with their Effects upon Animal Bodys* (London, 1725).
Mosely, Nicholas *Psychosophia or, Natural & Divine Contemplations of the Passions and Faculties of the Soul of Man. In Three Books* (London, 1653).
Mouffet, Thomas, *Healths Improvement: or, Rules Comprizing and Discovering the Nature, Method, and Manner of Preparing all Sorts of Food Used in this Nation* (London, 1655).
Moyne, Pierre Le, *The Gallery of Heroick Women written in French by Peter Le Moyne of the Society of Jesus; translated into English by the Marquesse of Winchester* (London, 1652).
Mulcaster, Richard, *Positions Wherin those Primitiue Circumstances be Examined, Which are Necessarie for the Training vp of Children, either for Skill in their Booke, or Health in their Bodie* (London, 1581).
Muys, John, *A Rational Practice of Chirurgery, or, Chyrurgical Observations Resolved According to the Solid Fundamentals of Philosophy* (London, 1686).
Mynsicht, Adrian von, *Thesaurus & Armamentarium Medico-Chymicum: or A Treasury of Physick. With the Most Secret Way of Preparing Remedies Against all Diseases ... Faithfully Rendred into English by John Partridge Physician to His Majesty* (London, 1682).
Neve, Robert, *Merlinus Verax: or An Almanack for the Year of Humane Redemption, by Jesus Christ* (London, 1671).
Norden, John, *The Surveiors Dialogue, Very Profitable for All Men to Peruse, but Especially for all Gentlemen* (London, 1610).
Nourse, Timothy, *A Discourse upon the Nature and Faculties of Man in Several Essayes: With Some Considerations upon the Occurrances of Humane Life* (London, 1686).
Paré, Ambrose, *The Works of Ambrose Paré, Chyrurgeon to Henry II. Francis II. Charles IX. and Henry III. Kings of France* (London, 1691).
Paré, Ambrose, *The Workes of that Famous Chirurgion Ambrose Parey Translated out of Latin and Compared with the French by Thomas Johnson* (London, I634).
Parker, Benjamin, *A Prospect into the Spiritual World; Whereby May be Observed, I. That all Created, Active, Spiritual Existences are Immaterial and Immortal* (London, 1745).
Pascal, Blaise, *Pensées,* trans. A.J. Krailsheimer (London, 1995).
Payne, William, *Learning and Knowledge Recommended to the Scholars of Brentwood School in Essex; In a Sermon Preached at their First Feast, June 29. 1682* (London, 1682).
Peacham, Henry, *The Compleat Gentleman Fashioning him Absolute in the Most Necessary & Commendable Qualities Concerning Minde or Bodie that may be Required in a Noble Gentleman* (London, 1622).
Pechey, John, *The Compleat Midwife's Practice Enlarged, In the Most Weighty and High Concernments of the Birth of Man* (London, 1698).
Pechey, John, *A General Treatise of the Diseases of Infants and Children. Collected from the Best Practical Authors* (London, 1697).
Pechey, John, *A Plain Introduction to the Art of Physic, Containing the Fundamentals, and Necessary Preliminaries to Practice* (London, 1697).

Pechey, John, *A General Treatise of the Diseases of Maids Bigbellied Women, Child-Bed-Women, and Widows, Together with the Best Methods of Preventing or Curing the Same* (London, 1696).
Pechey, John, *A Collection of Chronical Diseases viz. the Colick: the Bilious Colick: Hysterick Diseases* (London, 1692).
Pemell, Robert, *De Morbis Puerorum, or A Treatise of the Diseases of Children; with their Causes, Signs, Prognosticks, and Cures* (London, 1653).
Perkins, Francis, *Perkins. 1657. A New Almanack and Prognostication for the Year of our Lord God 1657. Being the First after Bissextile or Leapyear* (London, 1657).
Pitcairn, Archibald, *The Works of Dr. Archibald Pitcairn; Wherein are Discovered the True Foundation and Principles of the Art of Physic* (London, 1715).
Plato, *Plato his Apology of Socrates, and Phaedo, or, Dialogue Concerning the Immortality of Mans Soul* (London, 1675).
Platter, Felix, *Platerus Golden Practice of Physick: Fully and Plainly Discovering, I. All the Kinds. II. The Several Causes of Every Disease. III. Their Most Proper Cures ... By Felix Plater, Chief Physitian and Professor in Ordinary at Basil. Abdiah Cole, Doctor of Physick, and the Liberal Arts. Nich. Culpeper, Gent. Student in Physick, and Astrology* (London, 1664).
Poole, John, *Poole. 1656. An Almanack and Prognostication, or The Country-mans Counsellor for Health and Husbandry, For the Year of our Lord* (London, 1656).
Priestley, Joseph, *Disquisitions Relating to Matter and Spirit. To Which is Added, the History of the Philosophical Doctrine Concerning the Origin of the Soul* (London, 1777).
Priestley, Joseph, *The Doctrine of Philosophical Necessity Illustrated; Being an Appendix to the Disquisitions Relating to Matter and Spirit* (London, 1777).
Priestley, Joseph, *Hartley's Theory of the Human Mind on the Principle of the Association of Ideas; With Essays Relating to the Subject of it* (London, 1775).
Priestley, Joseph, *An Examination of Dr. Reid's Inquiry into the Human Mind on the Principles of Common Sense* (London, 1774).
Quincy, John, *Medico-Physical Essays. I. Of Agues. ... VII. Of Venereal Diseases* (London, 1772).
Quincy, John, *Lexicon Physic-Medicum; or, A New Medicinal Dictionary; Explaining the Difficult Terms Used in the Several Branches of the Profession* (London, 1726).
Raynalde, Thomas, *The Birth of Mankynde, Otherwyse Named The Womans Booke* (London, 1565).
Reid, Thomas, *Essays on the Intellectual Powers of Man*, ed., Derek R. Brookes (Pennsylvania, 2002).
Reynolds, Edward, *A Treatise of the Passions and Faculties of the Soule of Man. With the Severall Dignities and Corruptions Thereunto Belonging* (London, 1640).
Rider, Cardanus, *British Merlin: Bedeckt with Many Delightful Varietie[,] and Useful Verities* (London, 1690).
Rivière, Lazare, *The Practice of Physick, Wherein is Plainly Set Forth the Nature, Cause, Differences, and Several Sorts of Signs* (London, 1655).
Robinson, Nicholas, *A New System of the Spleen, Vapours, and Hypochondriack Melancholy: Wherein all the Decays of the Nerves, and Lownesses of the Spirits, are Mechanically Accounted for* (London, 1729).
Robinson, Nicholas, *A New Theory of Physic and Diseases, Founded on the Principles of the Newtonian Philosophy* (London, 1729).
Ross, Alexander, *Arcana Microcosmi, or, The Hid Secrets of Man's Body Discovered in an Anatomical Duel between Aristotle and Galen Concerning the Parts thereof* (London, 1652).
S., J., *Paidonnosemata; or Childrens Diseases both Outward and Inward. From the Time of their Birth to Fourteen Years of Age* (London, 1664).

S., T., *The Accomplished Ladies Rich Closet of Rarities: or, The Ingenious Gentlewoman and Servant-maids Delightfull Companion* (London, 1687).
Salmon, William, *Iatrica, Seu, Praxis Medendi the Practice of Curing Diseases: being a Medicinal History of near Two Hundred Famous Observations in the Cure of Diseases* (London, 1694).
Saunders, Richard, *Apollo Anglicanus. The English Apollo: Treating of the End of the World, so Much this Year Expected, and Astrologically Predicting the Most Observable Affairs of this Present Revolution* (London, 1656).
Sennert, Daniel, *Practica Medicinae, or Practical Physick... trans. Nicholas Culpeper and Abdiah Cole* (London, 1684).
Sennert, Daniel, *Nine Books of Physick and Chirurgery Written by that Great and Learned Physitian, Dr Sennertus* (London, 1658).
Sennert, Daniel, *The Institutions or Fundmentals of the Whole Art of Physick and Chirurgery, divided into Five Books ... Made English by N.D.B.P. Late of Trinity Colledge in Cambridge* (London, 1656).
Sergeant, John, *Solid Philosophy Asserted, Against the Fancies of the Ideists: or, The Method to Science Farther Illustrated* (London, 1697).
Sharp, Jane, *The Midwives Book, or, The Whole Art of Midwifery Discovered* (London, 1671).
Short, Thomas, *A Discourse Concerning the Causes and Effects of Corpulency: Together with the Method for its Prevention and Cure* (London, 1727).
Skinner, John, *Journal of a Somerset Rector: 1803-34,* eds., John Howard Coombs and Peter Coombs (Oxford, 1984).
Smith, H., *An Essay on The Nerves, Illustrating their Efficient, Formal, Material, and Final Causes* (London, 1795).
Smith, William, *A Dissertation Upon the Nerves; Containing an Account* (London, 1768).
Smyth, J.H., *A New Treatise on the Venereal Disease, Gleets, Seminal Weaknesses, the Dreadful Effects of Self-pollution* (London, 1780).
Stanley, Thomas, *The History of the Chaldaick Philosophy* (London, 1662).
Steele, Richard, *A Discourse Concerning Old-Age, Tending to the Instruction, Caution and Comfort of Aged Persons* (London, 1696).
Strachey, Charles, ed., *The Letters of the Earl of Chesterfield to His Son,* Vol. I (London, 1932).
Sydenham, Thomas, *Processus Integri in Morbis Ferè Omnibus Curandis* (London, 1693).
Taylor, Jeremy, *Vnum Necessarium. or, The Doctrine and Practice of Repentance* (London, 1655).
Tennent, John, *Practical Enquiries: Discovering the Mode of Translation in the Constitutions of Northern Inhabitants* (London, 1749).
Thomson, Alex, *An Enquiry into the Nature, Causes, and Method of Cure, of Nervous Disorders* (London, 1782).
Tissot, David Auguste Samuel, *Advice to People in General, with Respect to their Health. Translated from the French edition of Dr. Tissot's Avis au Peuple* (London, 1774).
Tissot, David Auguste Samuel, *An Essay on Diseases Incidental to Literary and Sedentary Persons. With Proper Rules for Preventing their Fatal Consequences* (London, 1768).
Trigg, Thomas, *Calendarium Astrologicum: or An Almanack for the Year* (London, 1681-1684).
Tryon, Thomas, *The Good House-Wife Made a Doctor, or, Health's Choice and Sure Friend Being a Plain Way of Nature's own Prescribing* (London, 1692).
Tryon, Thomas, *Healths Grand Preservative: or, The Womens Best Doctor* (London, 1682).
Tryon, Thomas, *A Way to Health Long Life and Happiness, or, A Discourse of Temperance, and the Particular Nature of all Things Requisite for the Life of Man* (London, 1621).
Turner, John, *A Physico-Theological Discourse Upon the Divine Being, or First Cause of All Things* (London, 1698).

Vaughan, William, *Approved Directions for Health, both Naturall and Artificiall: Deriued from the Best Physitians as well Moderne as Auncient* (London, 1612).
Venette, Nicholas, *Conjugal Love Reveal'd: In the Nightly Pleasures of the Marriage bed, and the Advantages of that Happy State* (London, 1720).
Venner, Tobias, *Via Recta and Vitam Longam Pars Secunda. Wherein the True Use of Sleepe, Exercise, Excretions, and Perturbations Is* (London, 1628).
Voltaire, *A Philosophical Dictionary. From the French of M. de Voltaire* (London, 1764).
Walker, John, *A Critical Pronouncing Dictionary and Expositor of the English Language* (London, 1791).
Walkington, Thomas, *The Optick Glass of Humors. Or The Touchstone of a Golden Temperature* (London, 1607).
Wanley, Nathaniel, *The Wonders of the Little World, or, A General History of Man in Six Books* (London, 1678).
Warburton, Bishop William, *Doctrine of Grace: or, the Office and Operations of the Holy Spirit Vindicated from the Insults of Infidelity, and the Abuses of Fanaticism* (London, 1763).
Ward, Seth, *A Philosophicall Essay Towards an Eviction of the Being and Attributes of God* (Oxford, 1652).
Wharton, Sir George, *Naworth. 1645. A New Almanack, and Prognostication for the Yeare of our Lord and Saviour Jesus Christ, 1645* (Oxford, 1645).
White, Gilbert, *The Natural History and Antiquities of Selborne, in the County of Southampton* (London, 1789).
White, John, *The Planter's Plea* (1630), in Peter Force ed., *Tracts and Other Papers Principally in the Origin, Settlement and Progress of the Colonies in North America,* Vol. II (New York, 1836-1847; reprinted New York, 1947).
White, John, *White 1643. A New Almanacke and Prognostication for the Yeere of our Lord God 1643 : Being the Third after the Bissextile or Leape-yeare* (London, 1643).
Whytt, Robert, *Observations on the Nature, Causes Nervous, Hypochondriac or Hysteric, to which are Prefixed some Remarks on the Sympathy of the Nerves* (Edinburgh, 1765).
Whytt, Robert, *Review of the Controversy Concerning the Sensibility and Moving Power of the Parts of Men and Other Animals* (London, 1761).
Whytt, Robert, *Physiological Essays, Containing, I. An Inquiry into the Causes which Promote the Circulation of the Fluids in the Very Small Vessels of Animals* (Edinburgh, 1755).
Willis, Thomas, *Willis' Oxford Lectures,* trans. and ed., Kenneth Dewhurst (Oxford, 1980).
Willis, Thomas, *Dr. Willis's Practice of Physick, Being the Whole Works of that Renowned and Famous Physician: Containing these Eleven Several Treatises* (London, 1684).
Willis, Thomas, *Two Discourses Concerning the Soul of Brutes which is that of the Vital and Sensitive of Man* (London, 1683).
Willis, Thomas, *De Anima Brutorum quæ Hominis Vitalis ac Sensitiva est* (London, 1672).
Willis, Thomas, *Of Fermentation of the Inorganical Motion of Natural Bodies* (London, 1659).
Winter, Frig, *Winter. An Almanack for the Yeare of our Lord 1646. Being the Third After Leap-Yeare. To Which is Added a Compendious Concordance of Yeares* (Cambridge, 1646).
Wintringham, Clifton, *The Works of the Late Clifton Wintringham, Physician of York, Now First Collected and Published Entire* (London, 1752).
Wollstonecraft, Mary, *The Vindications: The Rights of Men and The Rights of Woman,* eds., D.L. Macdonald and Kathleen Scherf (Ontario, 1997, First published in London, 1792).
Woodhouse, John, *Woodhouse 1647. A New Almanacke and Prognostication for the Yeere of Our Lord God 1647: Being the Third after the Bissextile, or Leap-yeere* (London, 1647).

Wright, Thomas, *The Passions of the Minde in Generall. Corrected, Enlarged, and with Sundry New Discourses Augmented* (London, 1604).

ONLINE SOURCES
THE PROCEEDINGS OF THE OLD BAILEY

Tim Hitchcock, Robert Shoemaker, Clive Emsley, Sharon Howard and Jamie McLaughlin, *et al.*, *The Old Bailey Proceedings Online, 1674-1913* (www.oldbaileyonline.org, version 7.0, 24 March 2012).

SECONDARY SOURCES

Adams, J., Harper, K., Knudson, S., Revilla, J., 'Examination Findings in Legally Confirmed Child Sexual Abuse: It's Normal to be Normal', *Pediatrics,* Vol. 94.3 (1994), pp. 310-317.

Adelman, Janet, 'Making Defect Perfection: Shakespeare and the One-Sex Model', in Viviana Comensoli and Anne Russell eds., *Enacting Gender on the English Renaissance Stage* (Urbana, 1999), pp. 23-52.

Albano, Caterina, 'The Puzzle of Human Emotions: Some Historical Considerations from the 17th to the 19th Centuries', *Developmental Medicine and Child Neurology,* Vol. 50.7 (2008), pp. 494-497.

Andrews, Jonathan, 'Identifying and Providing for the Mentally Disabled in Early Modern London', in David Wright and Anne Digby eds., *From Idiocy to Mental Deficiency: Historical Perspectives on People with Learning Disabilities* (London, 2002), pp. 65-92.

Andrews, Jonathan, 'Begging the Question of Idiocy: the Definition and Socio-Cultural Meaning of Idiocy in Early Modern Britain: Part 2', *History of Psychiatry,* Vol. 9.34 (1998), pp. 179-200.

Andrews, Jonathan, 'Begging the Question of Idiocy: the Definition and Socio-Cultural Meaning of Idiocy in Early Modern Britain: Part 1', *History of Psychiatry,* Vol. 9.33 (1998), pp. 65-95.

Arcangeli, Alessandro, *Recreation in the Renaissance: Attitudes toward Leisure and Pastimes in European Culture, c. 1425-1675* (Basingstoke, 2003).

Aries, Philippe, *Centuries of Childhood,* trans. Robert Baldick (London, 1962).

Armstrong, David, *Political Anatomy of the Body* (Cambridge, 1983).

Bakhtin, Mikhail, *Rableais and his World* (Bloomington, 1984).

Bal, Mieke, *Looking In: The Art of Viewing* (Amsterdam, 2001).

Banner, Lois W., *In Full Flower: Aging Women, Power, and Sexuality: A History* (New York, 1992).

Banta, Martha, 'Medical Therapies and the Body Politic', *Prospects,* Vol. 8 (1983), pp. 59-128.

Barker-Benfield, G.J., *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago and London, 1992).

Bates, Victoria, '"So Far as I Can Define without a Microscopial Examination": Venereal Disease Diagnosis in English Courts, 1850-1914', *Social History of Medicine*, Vol. 26.1 (2012), pp. 38-55.

Beam, Aki C.L., '"Should I as Yet Call You Old?" Testing the Boundaries of Female Old Age in Early Modern England', in Erin Campbell ed., *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot and Burlington, 2006), pp. 95-116.

Bennett, Judith M., 'Women's History: A Study in Continuity and Change', *Women's History Review,* Vol. 2.2 (1993), pp. 173-184.
Bennett, Judith 'Feminism and History', *Gender and History,* Vol. 1 (1989), pp. 251-272.
Berrios, G.E., 'Dementia during the Seventeenth and Eighteenth Centuries: A Conceptual History', *Psychological Medicine,* Vol. 17.4 (1987), pp. 829-837.
Berryman, Jack W., 'The Art of Medicine, Motion and Rest: Galen on Exercise and Health', *The Lancet,* Vol. 380.9838 (2012), pp. 210-211.
Bewell, Alan, *Wordsworth and the Enlightenment: Nature, Man and Society in the Experimental Poetry* (New Haven and London, 1989).
Bos, Jacques, 'The Rise and Decline of Character: Humoral Psychology in Ancient and Early Modern Medical Theory', *History of the Human Sciences,* Vol. 22.3 (2009), pp. 29-50.
Botelho, Lynn, 'Images of Old Age in Early Modern Cheap Print: Women, Witches and the Poisonous Female Body', in Susannah Ottaway, Lynn Botelho and Katharine Kitteridge eds., *Power, Poverty: Old Age in the Pre-Industrial Past* (London, 2002), pp. 217-236.
Botelho, Lynn, 'Old Age and Menopause in Rural Women of Early Modern Suffolk', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 43-65.
Botelho, Lynn and Thane, Pat, 'Introduction', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 1-12.
Brears, P., 'Decoration of the Tudor and Stuart Table', in C.A. Wilson ed., *Food and Society: The Appetite and the Eye* (Edinburgh, 1991), pp. 92-94.
Brockliss, L.W.B., *French Higher Education in the Seventeenth and Eighteenth Centuries: A Cultural History* (Oxford, 1987).
Broomhall, Susan, '"Women's Little Secrets": Defining the Boundaries of Reproductive Knowledge in Sixteenth-century France', *Social History of Medicine,* Vol. 15.1 (2002), pp. 1-15.
Brophy, Sarah, 'Women, Aging, and Gossip in Lady Mary Wortley Montagu's Letters of the 1720s', *The Eighteenth Century,* Vol. 45.1 (2004), pp. 1-20.
Buickerood, J.G., 'The Natural History of the Understanding: Locke and the Rise of Facultative Logic in the Eighteenth Century, *History and Philosophy of Logic,* Vol. 6.1 (1985), pp. 157-190.
Bulder, Elles, *The Social Economics of Old Age: Strategies to Maintain Income in Later Life in the Netherlands 1800-1940* (Amsterdam, 1993).
Burke, Peter, 'The Invention of Leisure in Early Modern Europe', *Past and Present,* Vol. 146.1 (1995), pp. 136-150.
Burrow, J.A., *The Ages of Man: A Study in Medieval Writing and Thought* (Oxford, 1988).
Butler, Melissa A., 'Early Liberal Roots of Feminism: John Locke and the Attack on Patriarchy', *The American Political Science Review,* Vol. 72. 1 (1978), pp. 135-150.
Bynum, Caroline Walker, 'Material Continuity, Personal Survival and the Resurrection of the Body: A Scholastic Discussion in its Medieval Contexts', *History of Religions,* Vol. 30.1 (1990), pp. 51-85.
Bynum, William F., 'The Nervous Patient in Eighteenth- and Nineteenth-Century Britain: The Psychiatric Origins of British Neurology', in W.F. Bynum, Roy Porter and Michael Shepherd eds., *The Anatomy of Madness Essays in the History of Psychiatry,* Vol. 1 (London and New York, 2004), pp. 89-102.
Cameron, Judy L., 'Nutritional Determinants at Puberty', *Nutrition Reviews,* Vol. 54.2 (1996), pp. 17-22.

Campbell, Erin, 'Introduction', in Erin Campbell ed., *Growing Old in Early Modern Europe* (Aldershot and Burlington, 2006), pp. 1-8.
Campbell, Erin J., '"Unenduring" Beauty: Gender and Old Age in Early Modern Art and Aesthetics', in Erin Campbell ed., *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot and Burlington, 2006), pp. 153-168.
Carter, Philip, *Men and the Emergence of Polite Society: Britain 1660-1800* (Harlow, 2000).
Carter, Philip, 'An "Effeminate" or "Efficient" Nation? Masculinity and Eighteenth-Century Social Documentary', *Textual Practice,* Vol. 11.3 (1997), pp. 429-443.
Carvallo, Sarah, 'Ageing in the Seventeenth and Eighteenth Centuries', *Science in Context,* Vol. 23.3 (2010), pp. 267-288.
Chaytor, Miranda, 'Husband(ry): Narratives of Rape in the Seventeenth Century', *Gender and History,* Vol. 7.3 (1995), pp. 378-407.
Churchill, Wendy, 'The Medical Practice of the Sexed Body: Women, Men, and Disease in Britain, *circa* 1600-1740', *Social History of Medicine,* Vol. 15.1 (2005), pp. 3-22.
Clark, Andy, *Being There: Putting Brain, Body, and World Together Again* (Massachusetts, 1997).
Clarke, Bernard, *Mental Disorder in Earlier Britain* (Cardiff, 1975).
Cohen, Michéle, *Fashioning Masculinity, National Identity and Language in the Eighteenth Century* (London, 1996).
Cole, Thomas R., 'Comments on Roland S. Guyot: "A New Theory about The Ages of Man"', *International Journal of Aging and Human Development,* Vol. 36.2 (1992-93), pp. 99-101.
Cole, Thomas R., *The Journey of Life: A Cultural History of Aging in America* (Cambridge, 1992).
Coleman, William, 'Health and Hygiene in the Encyclopédie: A Medical Doctrine for the Bourgeoisie', *Journal of the History of Medicine and Allied Sciences,* Vol. 29.4 (1974), pp. 391-421.
Connell, Robert W., and Messerschmidt, James W., 'Hegemonic Masculinity Rethinking the Concept', *Gender and Society,* Vol. 19.6 (2005), pp. 829-859.
Cook, Harold J., 'The New Philosophy and Medicine in Seventeenth-Century England', in D. Lindberg and R. Westman, eds., *Reappraisals of the Scientific Revolution* (Cambridge, 1990), pp. 397-436.
Copeman, W.S.C., *Doctors and Disease in Tudor Times* (London, 1960).
Covey, Herbert C., 'Historical Terminology Used to Represent Older People', *The Gerontologist,* Vol. 28.3 (1988), pp. 291-297.
Crawford, Patricia, 'Sexual Knowledge in England, 1500-1750', in Roy Porter and Mikláš Teich eds., *Sexual Knowledge, Sexual Science: The History of Attitudes to Sexuality* (Cambridge, 1994), pp. 82-106.
Crawford, Patricia, 'The Construction and Experience of Maternity', in Valerie Fildes ed., *Women as Mothers in Pre-Industrial England* (London, 1990), pp. 3-38.
Crawford, Patricia, 'Menstruation in Seventeenth-Century England', *Past and Present,* Vol. 91.1 (1981), pp. 47-73.
Curth, Louise Hill, *English Almanacs, Astrology and Popular Medicine, 1550-1700* (Manchester and New York, 2007).
Curth, Louise Hill, 'The Medical Content of English Almanacs 1640-1700', *Journal of the History of Medicine,* Vol. 60.1 (2005), pp. 255-282.
Curth, Louise Hill, 'Lessons from the Past: Preventative Medicine in Early Modern England', *Journal of Medical Ethics: Medical Humanities,* Vol. 29.1 (2003), pp. 16-21.
Dabhoiwala, Faramerz, 'Sex, Social Relations and the Law in Seventeenth- and Eighteenth-Century London', in Michael J. Braddick and John Walter eds., *Negotiating*

Power in Early Modern Society: Order, Hierarchy and Subordination in Britain and Ireland (Cambridge, 2001), pp. 85-101.
Dacome, Lucia, 'Balancing Acts: Picturing Perspiration in the Long Eighteenth Century', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 43.2 (2012), pp. 379-391.
Daston, Lorraine, 'The Naturalized Female Intellect', *Science in Context,* Vol. 5.2 (1992), pp. 209-235.
Davidson, Donald, 'What Metaphors Mean', in D Davidson ed., *Inquiries into Truth and Interpretation: Philosophical Essays* (Oxford, 1984), pp. 245-264.
Davis, Natalie Zemon, *Society and Culture in Early Modern France* (London, I975).
De Mause, Lloyd, *The History of Childhood: Untold Story of Child Abuse* (London, 1962).
Dean-Jones, Lesley, *Women's Bodies in Classical Greek Science* (Oxford, 1996).
Dove, Mary, *The Perfect Age of Man's Life* (Cambridge, 1986).
Downs, Laura Lee, *Writing Gender History* (London, 2004).
Ducharme, Howard M., 'Personal Identity in Samuel Clarke', *Journal of the History of Philosophy,* Vol. 24.3 (1986), pp. 359–83.
Durston, Gregory, *Victims and Viragoes: Metropolitan Women, Crime and the Eighteenth-Century Justice System* (Bury St. Edmunds, 2007).
Durston, Gregory, 'Rape in the Eighteenth-Century Metropolis: Part 2', *Journal for Eighteenth-Century Studies*, Vol. 29.1 (2006), pp. 15-31.
Durston, Gregory, 'Rape in the Eighteenth-Century Metropolis: Part I', *Journal for Eighteenth-Century Studies*, Vol. 28.2 (2005), pp. 167-179.
Duschinsky, Robert, 'Tabula Rasa and Human Nature', *Philosophy,* Vol. 87.4 (2012), pp. 509-529.
Eales, Jacqueline, *Women in Early Modern England, 1500-1700* (London, 1998).
Edelstein, Laurie, 'An Accusation Easily to be Made? Rape and Malicious Prosecution in Eighteenth-Century England', *The American Journal of Legal History,* Vol. 42.4 (1998), pp. 351-390
Evans, Jennifer, '"It is Caused of the Womans Part or of the Mans Part": The Role of Gender in the Diagnosis and Treatment of Sexual Dysfunction in Early Modern England', *Women's History Review,* Vol. 20.3 (2011), pp. 439-457.
Ezell, Margaret J.M., 'John Locke's Images of Childhood: Early Eighteenth Century Response to *Some Thoughts Concerning Education*', *Eighteenth-Century Studies,* Vol. 17.2 (1983-1984), pp. 139-155.
Faber, Diana, 'Hysteria in the Eighteenth Century', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 321-332.
Fife, Ernelle, 'Gender and Professionalism in Eighteenth-Century Midwifery', *Women's Writing,* Vol. 11.2 (2004), pp. 185-200.
Finden, Paula, 'Ideas in the Mind: Gender and Knowledge in the Seventeenth-Century', *Hypatia,* Vol. 17.1 (2002), pp. 183-196.
Fletcher, Anthony, 'Manhood, the Male Body, Courtship and the Household in Early Modern England', *History,* Vol. 84.275 (1999), pp. 419-436.
Fletcher, Anthony, *Gender, Sex and Subordination in England, 1500-1800* (London, 1995).
Flew, A., 'Locke and the Problem of Personal Identity', *Philosophy*, Vol. 26 (1951), pp. 359–383.
Foster, Thomas, A., 'Deficient Husbands: Manhood, Sexual Incapacity, and Male Marital Sexuality in Seventeenth-Century New England', *The William and Mary Quarterly,* Vol. 56.4 (1999), pp. 723-744.

Foyster, Elizabeth A., *Manhood in Early Modern England: Honour, Sex and Marriage* (Harlow, 1999).
Frank, Mary E., 'Visible Signs of Aging: Images of Old Women in Renaissance Venice', in Erin Campbell ed., *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot and Burlington, 2006), pp. 139-152.
Froide, Amy M., 'Old Maids: The Lifecycle of Single Women in Early Modern England', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 89-110.
Gadelrab, Sherry Sayed, 'Discourses on Sex Differences in Medieval Scholarly Islamic Thought', *Journal of the History of Medicine and Allied Sciences,* Vol. 66.1 (2011), pp. 40-81.
Gammon, Julie, '"A Denial of Innocence": Female Juvenile Victims of Rape and the English Legal System in the Eighteenth Century', in Stephen Hussey and Anthony Fletcher eds., *Childhood in Question: Children, Parents and the State* (Manchester, 1999), pp. 75-95.
Ganev, Robin, 'Milkmaids, Ploughmen, and Sex in Eighteenth-Century Britain', *Journal of the History of Sexuality,* Vol. 16.1 (2007), pp. 40-67.
Garber, Daniel and Ayers, Michael, *The Cambridge History of Seventeenth-Century Philosophy,* Vol. II (Cambridge, 1998).
Garton, Stephen, 'Manhandled: Battle Lines in Manliness and Masculinity', *Gender and History,* Vol. 20.2 (2008), pp. 416-420.
Gatens, Moira, *Imaginary Bodies: Ethics, Power and Corporeality* (London, 1996).
Gilbert, Creighton, 'When Did a Man in the Renaissance Grow Old?', *Studies in the Renaissance,* Vol. 14 (1967), pp. 7-32.
Gilleard, Chris, 'Renaissance Treatises on "Successful Aging"', *Aging and Society,* Vol. 33.2 (2013), pp. 189-215.
Gladfelder, Hal, *Criminality and Narrative in Eighteenth-Century England* (Baltimore, 2001).
Gluckman, P.D., and Hanson, M.A., 'Changing Times: The Evolution of Puberty', *Molecular and Cellular Endocrinology,* Vol. 254-255 (2006), pp. 26-31.
Golan, Tal, 'The History of Scientific Expert Testimony in the English Courtroom', *Science in Context,* Vol. 12.1 (1999), pp. 7-32.
Goodey, C.F., *A History of Intelligence and 'Intellectual Disability': The Shaping of Psychology in Early Modern Europe* (Farnham and Burlington, 2011).
Goodey, C.F., 'Behavioural Phenotypes in Disability Research: Historical Perspectives', *Journal of Intellectual Disability Research,* Vol. 50.6 (2006), pp. 397-403.
Goodey, C.F., '"Foolishness" in Early Modern Medicine and the Concept of Intellectual Disability', *Medical History,* Vol. 48.3 (2004), pp. 289-310.
Goodey, C.F., 'The Psychopolitics of Learning and Disability in Seventeenth-Century Thought', in David Wright and Anne Digby eds., *From Idiocy to Mental Deficiency: Historical Perspectives on People with Learning Disabilities* (London, 2002), pp. 93-117.
Goodey, C.F., 'What is Developmental Disability? The Origin and Nature of Our Conceptual Categories', *Journal of Developmental Disabilities,* Vol. 8.2 (2001), pp. 1-18.
Goodey, C.F., 'Mental Retardation', in G.E. Berrios and Roy Porter eds., *A History of Clinical Psychiatry: The Origin and History of Psychiatric Disorders* (London, 1995), pp. 240-247.
Gowing, Laura, 'Women's Bodies and the Making of Sex in Seventeenth-Century England', *Signs,* Vol. 47.4 (2012), pp. 813-822.
Gowing, Laura, *Common Bodies: Women, Touch and Power in Seventeenth-Century England* (New Haven and London, 2003).
Gowing, Laura, 'Secret Births and Infanticide in Seventeenth-Century England', *Past and Present,* Vol. 156.1 (1997), pp. 87-115.

Gowing, Laura, *Domestic Dangers: Women Words, and Sex in Early Modern London* (Oxford, 1996).
Gowland, Angus, 'The Ethics of Renaissance Melancholy', *Intellectual History Review,* Vol. 18.1 (2008), pp. 103-117.
Gowland, Angus, 'The Problem of Early Modern Melancholy', *Past and Present,* Vol. 191.1 (2006), pp. 77-120.
Grant, Mark, *Galen on Food and Diet* (London and New York, 2000).
Grosz, Elizabeth, 'Bodies and Knowledges: Feminism and the Crisis of Reason', in L. Alcoff and E. Potter eds., *Volatile Bodies: Toward a Corporeal Feminism* (New York and London, 1994), pp. 187-216.
Guerrini, Anita, 'The Hungry Soul: George Cheyne and the Construction of Femininity', *Eighteenth-Century Studies,* Vol. 32.3 (1999), pp. 279-291.
Gundert, Beate, 'Soma and Psyche in Hippocratic Medicine', in John P. Wright and Paul Potter eds., *Psyche and Soma: Physicians and Metaphysicians on the Mind-Body Problem From Antiquity to Enlightenment* (Oxford, 2000), pp. 13-36.
Gustafson, Katherine, 'Life Stage Studies and the Eighteenth Century: Reading Age in Literature', *Literature Compass,* Vol. 11.8 (2014), pp. 528-537.
Guyot, Roland S., 'A New Theory about The Ages of Man', *International Journal of Aging and Human Development,* Vol. 36.2 (1992-93), pp. 91-98.
Harper, Sarah, 'Constructing Later Life/Constructing the Body: Some Thoughts from Feminist Theory', in Anne Jamieson, Sarah Harper and Christina Victor eds., *Clinical Approaches to Ageing and Later Life* (Buckingham and Philadelphia, 1997), pp. 160-172.
Harvey, Karen, 'The History of Masculinity, circa 1650-1800', *The Journal of British Studies,* Vol. 44.2 (2005), pp. 296-311.
Harvey, Karen and Shepard, Alexandra, 'What Have Historians Done with Masculinity? Reflections on Five Centuries of British History, circa 1500–1950', *The Journal of British Studies,* Vol. 44.2 (2005), pp. 274-280.
Harvey, Karen, *Reading Sex in the Eighteenth Century: Bodies and Gender in English Erotic Culture* (Cambridge, 2004).
Harvey, Karen, 'The Substance of Sexual Difference: Change and Persistence in Representations of the Body in Eighteenth-Century England', *Gender and History,* Vol. 14 (2002), pp. 202-223.
Hasday, Jill Elaine, 'Contest and Consent: A Legal History of Marital Rape', *California Law Review,* Vol. 88.5 (2000), pp. 1373-1505.
Hatfield, Gary, 'Remaking the Science of Mind: Psychology as Natural Science', in Christopher Fox, Roy Porter and Robert Wokler eds., *Inventing Human Science: Eighteenth-Century Domains* (Berkley, 1995), pp. 184-231.
Hatfield, Gary, 'Psychology as a Natural Science in the Eighteenth Century', *Institute for Research in Cognitive Science,* Vol. 5.1 (1994), pp. 375-391.
Hatfield Gary, *The Natural and the Normative: Theories of Spatial Perception from Kant to Hebnholtz* (Cambridge MA, 1990).
Hazan, Haim, *Old Age: Constructions and Deconstructions* (Cambridge, 1994).
Hill, Bridget, 'Women's History: A Study in Change, Continuity or Standing Still?', *Women's History Review*, Vol. 2.1 (1993), pp. 5-22.
Hindson, Beth, 'Attitudes Towards Menstruation and Menstrual Blood in Elizabethan England', *Journal of Social History,* Vol. 43.1 (2009), pp. 89-114.
Hitchcock, Tim, *English Sexualities, 1700-1800* (Basingstoke, 1997).
Hitchcock, Tim, 'Sex and Gender: Redefining Sex in Eighteenth-Century England', *History Workshop Journal,* Vol. 41 (1996), pp. 72-90.

Hobby, Elaine, '"Secrets of the Female Sex": Jane Sharp, The Reproductive Female Body, and Early Modern Midwifery Manuals', *Women's Writing,* Vol. 8.2 (2007), pp. 201-212.
Howard, Sharon, 'Imagining the Pain and Peril of Seventeenth-Century Childbirth: Travail and Deliverance in the Making of an Early Modern World', *Society of the History of Medicine*, Vol. 16.3 (2003), pp. 367-382.
Hunter, Kathryn Montgomery, *Doctors' Stories: The Narrative Structure of Medical Knowledge* (Princeton, 1991).
Hunter, Richard Alfred and Macalpine, Ida, *Three Hundred Years of Psychiatry 1535-1860* (London, 1963).
Hurl-Eamon, Jeannie, *Gender and Petty Violence in London, 1680-1720* (Columbus, 2005).
Hutchinson, Keith, 'Supernaturalism and the Mechanical Philosophy', *History of Science*, Vol. 21.3 (1983), pp. 297-333.
Ingram, Martin, 'Child Abuse in Early Modern England', in Michael, J. Braddick and John Walter eds., *Negotiating Power in Early Modern Society: Order, Hierarchy and Subordination in Britain and Ireland* (Cambridge, 2001), pp. 63-84.
Ishizuka, Hisao, '"Fibre Body": The Concept of Fibre in Eighteenth-century Medicine, c. 1700-40', *Medical History,* Vol. 56.4 (2012), pp. 562-584.
Ishizuka, Hisao, 'Enlightening the Fibre-Woven Body: William Blake and Eighteenth-Century Fibre Medicine', *Literature and Medicine,* Vol. 25.1 (2006), pp. 72-92.
Jackson, William A., 'A Short Guide to Humoural Medicine', *TRENDS in Pharmacological Sciences,* Vol. 22.9 (2001), pp. 487-489.
Jaggar, Alison, 'Love and Knowledge: Emotion in Feminist Epistemology', in Ann Garry and Marilyn Pearsall eds., *Women, Knowledge, and Reality: Explorations in Feminist Philosophy* (New York, 1996), pp. 166-190.
James, Susan, *Passion and Action: The Emotions in Seventeenth Century Philosophy* (Oxford, 1997).
Johnson, Paul, 'Historical readings of Old Age and Aging', in Pat Thane and Paul Johnson eds., *Old Age from Antiquity to Post-Modernity* (London and New York, 1998), pp. 1-18.
Jones, J.W., *Observations of the Division of Man's Life into Stages* (London, 1861).
Jones, Karen, 'Gender and Rationality', in Alfred R. Mele and Piers Rawling eds., *The Oxford Handbook of Rationality* (Oxford and New York, 2004), pp. 301-319.
Jordan, Constance, 'Feminism and the Humanists: The Case of Sir Thomas Elyot's *Defence of Good Women', Renaissance Quarterly,* Vol. 36.2 (1983), pp. 181-201.
Jordanova, Ludmilla, *Sexual Visions: Images of Gender in Science between the Eighteenth and Twentieth Centuries* (Madison, 1989).
Jordanova, Ludmilla, *Languages of Nature: Critical Essays on Science and Literature* (London, 1986).
Kampf, Anje and Botelho, Lynn A., 'Anti-Aging and Biomedicine: Critical Studies on the Pursuit of Maintaining, Revitalizing and Enhancing Aging Bodies', *Medicine Studies,* Vol. 1.3 (2009), pp. 187-195.
Keller, Eve, '"The Sublimest Juyce in our Body": Bloodletting and Ideas of the Individual in Earl Modern England', *Philological Quarterly,* Vol. 86.1/2 (2007), pp. 101-111.
Keller, Eve, 'Embryonic Individuals: The Rhetoric of Seventeenth-Century Embryology and the Construction of Early-Modern Identity', *Eighteenth-Century Studies,* Vol. 33.3 (2000), pp. 321-348.
Kelly-Gadol, Joan, 'Did Women Have a Renaissance?' in Claudia Koonz and Renate Bridenthal and Susan Stuard, *Becoming Visible: Women in European History* (Boston, 1977), pp. 137-164
Kelso, Ruth, *Doctrine for the Lady of the Renaissance* (Urbana, 1956).

Kern Paster, Gail, Rowe, Katherine and Floyd-Wilson, Mary, eds., *Reading the Early Modern Passions: Essays in the Cultural History of Emotion* (University Park, Pennsylvania, 2004)
Kern Paster, Gail, 'The Unbearable Coldness of Female Being: Women's Imperfection and the Humoral Economy', *English Literary Renaissance,* Vol. 28.3 (1998), pp. 416-440.
Kern Paster, Gail, 'Nervous Tension', in David Hilman and Carlo Mazzio eds., *The Body in Parts: Fantasies of Corporeality in Early Modern Europe* (London, 1997), pp. 107-128.
Kern Paster, Gail, *The Body Embarrassed: Drama and the Disciplines of Shame in Early Modern England* (Ithaca, 1993).
King, Helen, *Hippocrates' Woman: Reading the Female Body in Ancient Greece* (London, 1998).
King, Steve, 'Reconstructing Lives and Social Structures in Britain: The Poor, and The Poor Law, and Welfare under Rural Industrialisation, 1650-1820', *Social History,* Vol. 22.3 (1997), pp. 318-338.
Kittredge, Katherine, '"The Ag'd Dame to Venery Inclin'd": Images of Sexual Older Women in Eighteenth-Century Britain', in Susannah Ottaway, Lynne Botelho, and Katherine Kitteredge eds., *Power and Poverty: Old Age in the Pre-Industrial Past* (Westport, 2002), pp. 248-261.
Komlos, John, 'The Age at Menarche in Vienna: The Relationship between Nutrition and Fertility', *Historical Methods,* Vol. 22.4 (1989), pp. 158-163.
Kugler, Anne, '"I Feel Myself Decay Apace": Old age in the Diary of Lady Sarah Cowper', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 66-88.
Landsman, Stephen, 'One Hundred Years of Rectitude: Medical Witnesses at the Old Bailey', *Law and History Review,* Vol. 16.3 (1998), pp. 445-494.
Laqueur, Thomas W., 'The Rise of Sex in the Eighteenth Century: Historical Context and Historiographical Implications', *Signs,* Vol. 37.4 (2012), pp. 802-812.
Laqueur, Thomas, *Making Sex: Body and Gender from the Greeks to the Freud* (Cambridge, MA, 1990).
Laqueur, Thomas, 'Orgasm, Generation, and the Politics of Reproductive Biology', in Christine Gallagher and Thomas Laqueur eds., *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century* (Berkeley, 1987), pp. 1-41.
Laslett, Peter, *The World We Have Lost* (London, 1983).
Laslett, Peter, 'Age of Menarche in Europe since the Eighteenth Century', *The Journal of Interdisciplinary History,* Vol. 2.2 (1971), pp. 221-236.
Le Doeuff, Michéle, 'Women and Philosophy', *Radical Philosophy,* Vol. 17 (1977), pp. 2-11.
Lennon, Thomas M., 'Bayle and Late Seventeenth-Century Thought', in John P. Wright and Paul Potter eds. *Psyche and Soma: Physicians and Metaphysicians on the Mind-Body Problem From Antiquity to Enlightenment* (Oxford, 2000), pp. 197-216.
Lincoln, C., 'Genital Injury: Is It Significant? A Review of the Literature', *Medical Science Law,* Vol. 41.3 (2001), pp. 206-216.
Little, A.G., *Roger Bacon: Essays Contributed by Various Writers on the Occasion of the Commemoration of the Seventh Centenary of His Birth* (Oxford, 1914).
Lloyd, Geneviéve, 'The Emotions in the Seventeenth Century', *British Journal of the History of Philosophy,* Vol. 8.1 (2000), pp. 141-147.
Lloyd, Geneviéve, 'Maleness, Metaphor, and the "Crisis" of Reason', L. Antony and C. Witt eds., *A Mind of One's Own: Feminist Essays on Reason and Objectivity* (Boulder, 1993), pp. 73-92.
Lloyd, Geneviéve, *The Man of Reason. 'Male' and 'Female' in Western Philosophy* (London, 1984).
Loades, David, *The Tudor Court* (London, 1986).

López-Beltrán, Carlos, 'Natural Things and Non-Natural Things. The Boundaries of the Hereditary in the 18th Century', in Staffan Müller-Wille, Hans-jorg Rheinberger eds., *A Cultural History of Heredity* (Berlin, 2002), pp. 67-89.
Lord, Alexandra, '"The Great *Arcana* of the Deity", Menstruation and Menstrual Disorders in Eighteenth-Century British Medical Thought', *Bulletin of the History of Medicine,* Vol. 73.1 (1999), pp. 38-63.
Luttfring, Sara D., 'Bodily Narratives and the Politics of Virginity in "The Changeling" and the Essex Divorce', *Renaissance Drama,* Vol. 39.1 (2011), pp. 97-128.
Lyon, Gordon, 'Philosophical Perspectives on Metaphor', *Language Sciences,* Vol. 22.2 (2000), pp. 137-153.
MacDonald, Michael, *Mystical Bedlam: Madness, Anxiety and Healing in Seventeenth-Century England* (Cambridge, 1981).
Maclean, Ian, *The Renaissance Notion of Woman: A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life* (Cambridge and New York, 1980).
Maclean, Ian, *Woman Triumphant: Feminism in French Literature 1610-1652* (Oxford, 1977).
Marfany, Joan-Lluís, 'The Invention of Leisure in Early Modern Europe', *Past and Present,* Vol. 156 (1997), pp. 174-191.
Martensen, Robert, *The Brain Take Shape: An Early History* (Oxford, 2004).
Martensen, Robert, 'The Transformation of Eve: Women's Bodies, Medicine and Culture in Early Modern England', in Roy Porter and Mikláš Teich eds., *Sexual Knowledge, Sexual Science: The History of Attitudes to Sexuality* (Cambridge, 1994), pp. 107-133.
Martin, Raymond, Baresi, John, *Naturalization of the Soul: Self and Personal Identity in the Eighteenth Century* (London, 2000).
McAlpin, Mary, 'Innocence of Experience: Rousseau on Puberty in the State of Civilization', *Journal of the History of Ideas,* Vol. 71.2 (2010), pp. 241-261.
McClive, Cathy, 'L'âge des fleurs: le passage de l'enfance á l'adolescence dans l'imaginaire medical du XVIIe siécle', *Biblio,* Vol. 17 (2007), pp. 171-185.
McCrae, Robert R., Costa, Paul T., Ostendorf, Fritz, Angleitner, Alois, Hřebĺcková, Martina, Avia, Maria D., Sanz, Avia Jesús, Sánchez-Nernardos, Maria L., Kusdil, Ersin M., Woodfield, Ruth, Saunders, Peter R., and Smith, Peter B., 'Nature over Nurture: Temperament, Personality and Life Span Development', *Journal of Personality and Social Psychology,* Vol. 78.1 (2000), pp. 173-186.
McCrea, Frances B., 'The Politics of Menopause: The "Discovery" of a Deficiency Disease', *Social Problems,* Vol. 31.3 (1983), pp. 111-123.
McDowell, Nicholas, 'Dead Souls and Modern Minds? Mortalism and the Early Modern Imagination, from Marlowe to Milton', *Journal of Medieval and Early Modern Studies,* Vol. 40.3 (2010), pp. 559-592.
McGonegal, Julie, 'Of Harlots and Housewives: a Feminist Materialist Critique of the Writings of Wollstonecraft', *Women's Writing,* Vol. 11.3 (2004), pp. 337-398.
McKay, Elaine, '"For Refreshment and Preservinge Health": The Definition and Function of Recreation in Early Modern England', *Historical Research,* Vol. 82.211 (2008), pp. 52-74.
McKinnon, Catharine A., *Toward a Feminist Theory of the State* (Cambridge MA and London, 1989).
McMillan, Carol, *Women, Reason, and Nature: Some Philosophical Problems with Feminism* (Princeton, 1982).
Meldrum, Tim, *Domestic Service and Gender 1660-1750: Life and Work in the London Household* (Harlow, 2000).
Mendelson Sara and Crawford, Patricia, *Women in Early Modern England, 1550-1720* (Oxford, 1998).

Mills, Jeannie, 'Rape in Early Eighteenth-Century London: A Perversion "So Very Perplex'd"', in Julie Peakman ed., *Sexual Perversions, 1670-1890* (Basingstoke, 2009), pp. 140-166.

Minois, Georges, *History of Old Age: from Antiquity to the Renaissance,* trans. S. Hanbury Tenison (Oxford, 1989).

Moller, Herbert, 'The Accelerated Development of Youth: Beard Growth as a Biological Marker', *Comparative Studies in Society and History,* Vol. 29.4 (1987), pp. 748-762.

Morgan, Gwenda and Rushton, Peter, *Rogues, Thieves and the Rule of Law: The Problem of Law Enforcement in North-East England, 1718-1820* (London, 1998).

Morice, Philippe, Josset, Patrice, Chapton, Charles and Dubuisson, Jean Bernard, 'History of Infertility', *Human Reproduction Update,* Vol. 1.5 (1995), pp. 497-504.

Moscucci, Omella, *The Science of Women: Gynaecology and Gender in England, 1800-1929* (Cambridge, 1993).

Mueller, Judith M., 'Fallen Men: Representations of Male Impotence in Britain', *Studies in Eighteenth Culture,* Vol. 28.1 (1999), pp. 85-102.

Mullan, John, *Sentiment and Sociability: The Language of Feeling in the Eighteenth Century* (Oxford, 1988).

Nance, Brian K., 'Determining the Patient's Temperament: An Excursion into Seventeenth-Century Medical Semieiology', *Bulletin of the History of Medicine*, Vol. 67.3 (1993), pp. 417-438.

Neugebauer, Richard, 'A Doctor's Dilemma: The Case of William Harvey's Mentally Retarded Nephew', *Psychological Medicine,* Vol. 19.3 (1989), pp. 569-572.

Newton, Hannah, 'Children's Physic: Medical Perceptions and Treatment of Sick Children in Early Modern England, c.1580–1720', *Social History of Medicine,* Vol. 23.3 (2010), pp. 11-30.

Nicholson, Linda, 'Interpreting Gender', *Signs,* Vol. 20.1 (1994), pp. 79-105.

Niebyl, Peter H., 'Old Age, Fever, and the Lamp Metaphor', *Journal of the History of Medicine and Allied Sciences*, Vol. 25.4 (1971), pp. 351-368.

O'Connor, James P.B., 'Thomas Willis and the background to *Cerebri Anatome', Journal of the Royal Society of Medicine,* Vol. 96.3 (2003), pp. 139-143.

O'Neill, John, *Five Bodies: Human Shape of Modern Society* (Ithaca, 1985).

Orland, Barbara, 'The Fluid Mechanics of Nutrition: Herman Boerhaave's Synthesis of Seventeenth-Century Circulation Physiology', *Studies in History and Philosophy of Biological Sciences,* Vol. 43.2 (2012), pp. 357-369.

Osler, M.J., *Divine Will and the Mechanical Philosophy: Gassendi and Descartes on Contingency and Necessity in the Created World* (Cambridge, 1994).

Ottaway, Susannah, 'Review: Campbell, Erin (ed.), *Growing Old in Early Modern Europe: Cultural Representations* (Aldershot, 2006)', *Journal of Early Modern History,* Vol. 13 (2009), pp. 78-79.

Ottaway, Susannah R., *The Decline of Life: Old Age in Eighteenth-Century England* (Cambridge, 2004).

Ottaway, Susannah, 'Introduction', in Susannah Ottaway, Lynne Botelho, and Katherine Kitteredge eds., *Power and Poverty: Old Age in the Pre-Industrial Past* (Westport, 2002), pp. 1-12.

Pablo, Angel González, Evans, N.J.R., 'The Medicine of the Soul. The Origin and Development of Thought on the Soul, Diseases of the Soul and their Treatment, in Medieval and Renaissance Medicine', *History of Psychiatry,* Vol. 5.20 (1994), pp. 483-516.

Packham, Catherine, *Eighteenth-Century Vitalism: Bodies, Culture, Politics* (Basingstoke 2012).
Pallotti, Donatella, "'A Most Detestable Crime" Representations of Rape in the Popular Press of Early Modern England', *LEA-Lingue e Letterature d'Oriente e d'Occidente,* Vol. 1 (2012), pp. 287-302.
Parker, Patricia, 'Virile Style', in Louise Fradenburg and Carla Freccero eds., *Premodern Sexualities* (New York and London, 1996), pp. 201-222.
Passmore, Kevin, 'Review: *Feminism & History,* ed., Joan Wallach Scott (1996, London and New York)', *Women's History Review*, Vol. 7.2 (1998), pp. 261-264.
Pelling, Margaret, 'Who Most Needs to Marry? Ageing and Inequality among Women and Men in Early Modern Norwich', in Lynn Botelho and Pat Thane eds., *Women and Ageing in British Society Since 1500* (Harlow, 2001), pp. 31-42.
Pelling, Margaret and Smith, Richard M., 'Introduction', in Margaret Pelling and Richard M. Smith eds., *Life, Death, and the Elderly: Historical Perspectives* (London, 1991), pp. 1-39.
Pelling, Margaret, 'Old Age, Poverty and Disability in Early Modern Norwich', in Margaret Pelling and Richard Smith eds., *Life, Death, and the Elderly: Historical Perspectives* (London and New York, 1991), pp. 74-101.
Pelling, Margaret, 'Old People and Poverty in Early Modern Towns', *The Society for the Social History of Medicine Bulletin,* Vol. 34 (1984), pp. 42-47.
Pelling, Margaret, 'Thoroughly Resented? Older Women and the Medical Role in Early Modern England', in Lynette Hunter and Sarah Hutton eds., *Women, Science and Medicine, 1500-1700: Mothers and Sisters of the Royal Society* (Stroud, 1977), pp. 63-88.
Perry, Ruth, 'Radical Doubt and the Liberation of Women', *Eighteenth-Century Studies,* Vol. 18.4 (1985), pp. 472-493.
Pilloud, Séverine and Louise-Courvoisier, Michelle, 'The Intimate Experience of the Body in the Eighteenth Century: Between Interiority and Exteriority', *Medical History,* Vol. 47.4 (2000), pp. 451-472.
Plumb, J.H., 'The New World of Children in Eighteenth-Century England', *Past and Present*, 67 (1975), pp. 64-95.
Porter, Roy, 'History of the Body', in Peter Burke ed., *New Perspectives on Historical Writing* (University Park, Pennsylvania, 2001), pp. 233-260.
Porter, Roy, 'Nervousness Eighteenth and Nineteenth Century Style', in Marijke Gijswijt-Hofstra and Roy Porter eds., *Cultures of Neurasthenia: From Beard to the First World War* (Amsterdam and New York, 2001), pp. 31-49.
Porter, Roy, *Enlightenment: Britain and the Creation of the Modern World* (London, 2000).
Porter, Roy, *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London, 1997).
Porter, Roy, 'The Eighteenth Century', in Lawrence I. Conrad, Michael Neve, Vivian Nutton, Roy Porter and Andrew Wear eds., *The Western Medical Tradition: 800BC To AD1800* (Cambridge, 1995), pp. 371-476.
Porter, Roy and Hall, Lesley, *The Facts of Life: The Creation of Sexual Knowledge in Britain, 1650-1950* (New Haven, 1995).
Porter, Roy, 'The Patient in England, *c.* 1660 - *c.* 1800', in Andrew Wear ed., *Medicine in Society: Historical Essays* (Cambridge, 1992), pp. 91-118.
Porter, Roy, 'The Drinking Man's Disease: the "pre-history" of Alcoholism in Georgian Britain', *British Journal of Addiction,* Vol. 80.4 (1985), pp. 389-390.
Post, J.B., 'Ages at Menarche and Menopause: Some Medieval Authorities', *Population Studies,* Vol. 25.1 (1971), pp. 83-87.
Potter, Ursula, 'Navigating the Dangers of Female Puberty in Renaissance Drama', *Studies in English Literature 1500-1900,* Vol. 53.2 (2013), pp. 421-439.

Potter, Ursula, Bartrop, Roger, Touyz, Stephen, 'Pubertal Process and Green-Sickness in Renaissance Drama: A Form Fruste of Anorexia Nervosa?', *Australasian Psychiatry,* Vol. 17.5 (2009), pp. 380-384.
Purvis, June and Weatherill, Amanda, 'Playing the Gender History Game: A Reply to Penelope J. Corfield', *Rethinking History,* Vol. 3.3 (1999), pp. 333-338.
Read, Sara, *Menstruation and the Female Body in Early Modern England* (Basingstoke, 2013).
Read, Sara, 'When Menopause is not Climacteric', *Notes and Queries,* Vol. 59.2 (2012), pp. 224-226.
Reinke-Williams, Tim, 'Manhood and Masculinity in Early Modern England', *History Compass,* Vol. 12.9 (2014), pp. 685-693.
Ricci, James Vincent, *The Genealogy of Gynaecology: History of the Development of Gynaecology Throughout the Ages, 2000 B.C.-1800 A.D* (Philadelphia, 1943).
Richards, Janet, *The Skeptical Feminist: Discovering the Virgin, Mother and Crone* (London, 1980).
Richardson, Linda Deer, 'The Generation of Disease', in Andrew Wear, R.K. French and I.M. Lonie, eds., *The Medical Renaissance of the Sixteenth Century* (Cambridge, 1985), pp. 175-194.
Rizzo, Betty, 'Equiviocations of Gender and Rank: Eighteenth-Century Sporting Women', *Eighteenth-Century Life,* Vol. 26.1 (2002), pp. 70-118.
Robertson, Stephen, 'Signs, Marks, and Private Parts: Doctors, and Evidence of Rape in the United States, 1823-1930', *Journal of the History of Sexuality,* Vol. 8.3 (1998), pp. 345-388.
Robinson, Daniel N., *An Intellectual History of Psychology* (New York and London, 1981).
Robinson, R.C., *Household Servants in Early Modern England* (Manchester, 2010).
Roebuck, Janet, 'When Does Old Age Begin?: The Evolution of the English Definition', *Journal of Social History,* Vol. 12.3 (1979), pp. 416-428.
Rosenthal, Joel T., *Old Age in Late Medieval England* (Philadelphia, 1996).
Rousseau, George, 'Temperament and the Long Shadow of Nerves in the Eighteenth Century', Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 353-369.
Rousseau, George S., *Nervous Acts: Essays on Literature, Culture and Sensibility* (Basingstoke, 2004).
Rublack, Ulinka, 'Fluxes: the Early Modern Body and the Emotions', *History Workshop Journal,* Vol. 53.1 (2002), pp. 1-16.
Ruddick, Sarah, 'Maternal Thinking', *Feminist Studies,* Vol. 6 (1980), pp. 342–67.
Rudolf, Julia, 'Gender and the Development of Forensic Science: A Case Study', *English Historical Review,* Vol. 123.503 (2008), pp. 924-946.
Rushton Peter, 'Idiocy, the Family and the Community in Early Modern North-East England', in David Wright and Anne Digby eds., *From Idiocy to Mental Deficiency: Historical Perspectives on People with Learning Disabilities* (London, 2002), pp. 44-64.
Rushton Peter, 'Lunatics and Idiots: Mental Disability, The Community and the Poor Law in North-East England, 1600-1800', *Medical History,* Vol. 32.1 (1988), pp. 34-50.
Santoro, Giuseppi, Wood, Mark D., Merlo, Lucia, Anastasi, Giuseppi Pio, Tomasello, Francesco and Germanò, Antonino, 'The Anatomic Location of the Soul From the Heart, Through the Brain, to the Whole Body, and Beyond: A Journey Through Western History, Science, and Philosophy', *Neurosurgery,* Vol. 65.4 (2009), pp. 633-643.
Sawday, Jonathan, *The Body Emblazoned: Dissection and the Human Body in Renaissance Culture* (London and New York, 1995).

Schaffer, Simon, 'States of Mind: Enlightenment and Natural Philosophy', in G.S. Rousseau, *Languages of Psyche: Mind and Body in Enlightenment Thought* (Berkley, 1990), pp. 233-290.
Schiebinger, Londa, 'Has Feminism Changed Science?', *Signs,* Vol. 25.4 (2000), pp. 1171-1175.
Schiebinger, Londa, *The Mind has No Sex? Women in the Origins of Modern Science* (Cambridge and London, 1989).
Schiebinger, Londa, 'Skeletons in the Closet: The First Illustrations of the Female Skeleton in Eighteenth-Century Anatomy', in Christine Gallagher and Thomas Laqueur eds., *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century* (Berkeley, 1987), pp. 42-82.
Schierbeck, A., *Jan Swammerdam, 1637-1680: His Life and Works* (Amsterdam, 1967).
Schoenfeldt, Michael C., *Bodies and Selves in Early Modern England* (Cambridge, 1999).
Scodel, Joshua, *Excess and the Mean in Early Modern English Literature* (Princeton, 2002).
Scott, Joan Wallach, 'Gender as a Useful Category of Historical Analysis', in Peter Angleton and Richard Parker, *Culture,* (London, 1998), pp. 57-75.
Scott, Joan Wallach, *Gender and the Politics of History* (New York, 1988).
Scott, Joan, 'Gender: A Useful Category of Historical Analysis', *American Historical Review*, Vol. 91.5 (1986), pp. 1053–1075.
Screech, M.A., *The Rabelaisian Marriage: Aspects of Rabelais's Religion, Ethics and Comic Philosophy* (London, 1958).
Sears, Elizabeth, *The Ages of Man: Medieval Interpretations of the Life Cycle* (Princeton, 1986).
Seuntjens, Wolter, 'Vapours and Fumes, Damps and Qualms: Wind Passions in the Early-Modern Age', *English Studies,* Vol. 87.1 (2006), pp. 35-52.
Shahar, Shulamith, *Growing Old in the Middle Ages* (London, 1997).
Shahar, Shulamith, 'Who Were Old in the Middle Ages?', *Social History of Medicine,* Vol. 6.3 (1993), pp. 313-341.
Shapin, Steven, 'Trusting George Cheyne: Scientific Expertise, Common Sense, and Moral Authority in Early Eighteenth-Century Dietetic Medicine', *Bulletin of the History of Medicine,* Vol. 77.2 (2003), pp. 263-297.
Shapin, Steven, *The Scientific Revolution* (Chicago and London, 1996).
Shepard, Alexandra, 'From Anxious Patriarchs to Refined Gentlemen? Manhood in Britain, circa 1500-1700', *The Journal of British Studies,* Vol. 44.2 (2005), pp. 281-295.
Shepard, Alexandra, *Meanings of Manhood in Early Modern England* (Oxford and New York, 2003).
Shepard, Alexandra, 'Manhood, Credit and Patriarchy in Early Modern England *c.*1580-1640', *Past and Present,* Vol. 167 (2000), pp. 75-107.
Shoemaker, Robert B., 'The Old Bailey Proceedings and the Representation of Crime and Criminal Justice in Eighteenth-Century London', *The Journal of British Studies,* Vol. 47.3 (2008), pp. 559-580.
Shoemaker, Robert, B., *Gender in English Society, 1650-1850: The Emergence of Separate Spheres?* (Abingdon and New York, 1998).
Shorter, Edward, 'On Writing the History of Rape', *Signs,* Vol. 3.2 (1977), pp. 471-482.
Siena, Kevin P., 'The "Foul Disease" and Privacy: The Effects of Venereal Disease and Patient Demand on the Medical Market Place in Early Modern London', *Bulletin of the History of Medicine*, Vol. 75.2 (2001), pp. 199-224.
Siena, Kevin P., 'Pollution, Promiscuity, and the Pox: English Venereology and the Early Modern Medical Discourse on Social and Sexual Danger', *Journal of the History of Sexuality,* Vol. 8.4 (1998), pp. 553-574.
Simons, Patricia, *The Sex of Men in Premodern Europe: A Cultural History* (Cambridge, 2011).

Simmons, L.W., *The Role of the Aged in Primitive Society* (New Haven, 1945).
Simpson, Antony E., 'Popular Perceptions of Rape as a Capital Crime in Eighteenth-Century England: The Press and the Trial of Francis Charteris in the Old Bailey, February 1730', *Law and History Review,* Vol. 22.1 (2004), pp. 27-70.
Simpson, Antony E., 'Vulnerability and the Age of Female Consent: Legal Innovation and its Effect on Prosecutions for Rape in Eighteenth-Century London', in G.S. Rousseau and Roy Porter eds., *Sexual Underworlds of the Enlightenment* (Manchester, 1987), pp. 181-205.
Simpson, Antony E., 'The "Blackmail Myth" and the Prosecution of Rape and its Attempt in Eighteenth-Century London: The Creation of a Legal Tradition', *The Journal of Criminal Law and Criminology,* Vol. 77.1 (1986), pp. 101-150.
Slack, Paul, 'Mirrors of Health and Treatises of Poor Men: the Uses of the Vernacular Medical Literature of Tudor England', in Charles Webster ed., *Health, Medicine and Morality in the Sixteenth Century* (Cambridge, 1979), pp. 237-273.
Smart, Carol, 'A History of Ambivalence and Conflict in the Discursive Construction of the 'Child Victim' of Sexual Abuse', *Social and Legal Studies,* Vol. 8.3 (1999), pp. 391-409.
Smith, C.U.M., 'Brain and Mind in the "Long" Eighteenth Century', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 15-28.
Smith, Hilda L., '"Aging": A Problematic Concept for Women', *Journal of Women's History* Vol. 12.4 (2001), pp. 77-86.
Smith, Lisa Wynne, 'The Body Embarrassed? Rethinking the Leaky Male Body in Eighteenth-Century England and France', *Gender and History,* Vol. 23.1 (2010), pp. 26-46.
Smith, Roger, 'The History of Psychological Categories', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 36.1 (2005), pp. 55-94.
Smith, Steven, 'Growing Old in Early Stuart England', *Albion,* Vol. 8.2 (1976), pp. 125-141.
Smith-Churchland, Patricia, *Neurophilosophy: Toward a Unified Science of the Mind Brain* (Cambridge MA, 1989).
Smith-Rosenberg, Carol, 'Puberty to Menopause: the Cycle of Femininity in Nineteenth-Century America', *Feminist Studies,* Vol 1.3/4 (1973), pp. 58-72.
Solar, Peter M., 'Poor Relief and English Economic Development before the Industrial Revolution', *Economic History Review,* Vol. 48.1 (1995), pp. 1-22.
Solga, Kim, 'Rape's Metatheatrical Return: Rehearsing Sexual Violence among the Early Moderns', *Theatre Journal,* Vol. 58.1 (2006), pp. 53-62.
Stahnisch, Frank W., 'The Emergence of *Nervennahrung*: Nerves, Mind and Metabolism in the Long Eighteenth Century', *Studies in History and Philosophy of Biological Sciences,* Vol. 43.2 (2012), pp. 405-417.
Stearns, Peter N., 'Old Women: Some Historical Observations', *Journal of Family History,* Vol. 5.1 (1980), pp. 44-57.
Stelmack, R.M., and Stalikos, A., 'Galen and the Humour Theory of Temperament', *Personality and Individual Difference,* Vol. 12.3 (1991), pp. 255-263.
Stephanson, Raymond, 'Richardson's "Nerves": Physiology of Sensibility in Clarissa', *Journal of the History of Ideas,* Vol. 49.2 (1988), pp. 267-285.
Stolberg, Michael, 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries', *Isis,* Vol. 94.2 (2003), pp. 274-299.
Stolberg, Michael, 'An Unmanly Vice: Self-Pollution, Anxiety, and the Body in the Eighteenth Century', *Social History of Medicine,* Vol. 13.1 (2000), pp. 1-21.
Stolberg, Michael, 'The Monthly Malady: A History of Premenstrual Suffering', *Medical History,* Vol. 44.3 (2000), pp. 301-322.

Stolberg, Michael, 'A Woman's Hell? Medical Perceptions of Menopause in Preindustrial Europe', *Bulletin of the History of Medicine,* Vol. 73.3 (1999), pp. 404-428.

Stone, James L. and Goodrich, James T., and Cybulski, George R., 'John Hunter's Contributions to Neuroscience', Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 67-84.

Stone, Lawrence, *The Family, Sex and Marriage in England 1500-1800* (London, 1979).

Suzuki, Akihito, 'Anti-Lockean Enlightenment?: Mind and Body in Early Eighteenth-Century English Medicine', *Clio Medica,* Vol. 29 (1994), pp. 336-359.

Thane, Pat, 'Social Histories of Old Age and Aging', *Journal of Social History,* Vol. 37.1 (2003), pp. 93-111.

Thane, Pat, *Old Age in English History. Past Experiences, Present Issues* (Oxford, 2000).

Theoharides, Theoharis C., 'Galen on Marasumus', *Journal of the History of Medicine,* Vol. 26.4 (1971), pp. 369-390.

Thomas, Keith, *Man and the Natural World: Changing Attitudes in England, 1500-1800* (Harmondsworth, 1991).

Thomas, Keith, 'Age and Authority in Early Modern England', *Proceedings of the British Academy,* Vol. 62 (1976), pp. 3-46.

Thompson, Ann, *Machine Man and Other Writings* (Cambridge, 1996).

Thompson, E.P., *Customs in Common* (New York and London, 1991).

Thomson, Ann, *Bodies of Thought: Science, Religion and the Soul in the Early Enlightenment* (Oxford, 2008).

Tobringer, Alice, 'Honor for Old Age: Sixteenth-Century Pious Ideal or Grim Delusion?' *Journal of Religion and Aging,* Vol. 1.3 (1985), pp. 1-21.

Tomaselli, Sylvana, 'The Enlightenment Debate on Women', *History Workshop Journal,* Vol. 20.1 (1985), pp. 101-124.

Tosh, John, 'What Should Historians Do with Masculinity? Reflections on Nineteenth-Century Britain', *History Workshop Journal,* Vol. 38.1 (1994), pp. 179-202.

Toulalan, Sarah, '"To[o] Much Eating Stifles the Child": Fat Bodies and Reproduction in Early Modern England', *Historical Research,* Vol. 87.235 (2014), pp. 65-93.

Toulalan, Sarah, '"Is He a Licentious Lewd Sort of Person?": Constructing the Child Rapist in Early Modern England', *Journal of the History of Sexuality,* Vol. 23.1 (2014), pp. 21-52.

Toulalan, Sarah, '"Age to Great, or to Little, Doeth let Conception": Bodies, Sex and the Life Cycle, 1500-1750', in Sarah Toulalan and Kate Fisher eds., *The Routledge History of Sex and the Body 1500 to the Present* (London and New York, 2013), pp. 279-295.

Toulalan, Sarah, '"Unripe Bodies": Children and Sex in Early Modern England', in Kate Fisher and Sarah Toulalan eds., *Bodies Sex and Desire from the Renaissance to the Present* (Basingstoke, 2011), pp. 131-150.

Toulalan, Sarah, '"The Act of Copulation Being Ordain'd by Nature as the Ground of all Generation": Fertility and the Representation of Sexual Pleasure in Seventeenth-Century England', *Women's History Review,* Vol. 15.4 (2006), pp. 439-457.

Trevor, Douglas, *The Poetics of Melancholy in Early Modern England* (Cambridge, 2004).

Troyansky, David G., 'Balancing Social and Cultural Approaches to the History of Old Age and Aging in Europe: A Review and an Example from Post-Revolutionary France', in Pat Thane and Paul Johnson eds., *Old Age from Antiquity to Post-Modernity* (London and New York, 1998), pp. 96-109.

Troyansky, David G., 'The Older Person in the Western World: From the Middle Ages to the Industrial Revolution', in Thomas R. Cole, David D. Van Tassel and Robert Kastenbaum eds., *Handbook of the Humanities and Aging* (New York, 1992), pp. 40-61.

Trumbach, Randolf, *The Rise of the Egalitarian Family: Aristocratic Kinship and Domestic Relations in Eighteenth-Century England* (New York, 1978).
Tuke, Daniel Hack, *Chapters in the History of the Insane in the British Isles* (London, 1882).
Tuke, Daniel Hack, *A Manual of Psychological Medicine: Concerning the History, Nosology, Description, Statistics, Diagnosis, Pathology and Treatment of Insanity. With an Appendix of Cases* (London, 1858).
Turner, Brian S., 'Longevity Ancient and Modern', *Society,* Vol. 46.3 (2009), pp. 255-261.
Underdown, David, 'Regional Cultures? Local Variations in Popular Culture in the Early Modern Period', in Tim Harris ed., *Popular Culture in England, c.1500-1850* (Basingstoke, 1995), pp. 28-47.
Utian, Wulf H., 'Menopause—a Modern Perspective from a Controversial History', *Maturitas,* Vol. 26.2 (1997), pp. 73-82.
van Tilburg, Marja, 'Tracing Sexual Identities in "Old Age": Gender and Seniority in Advice Literature of the Early-Modern and Modern Periods', *Journal of Family History*, Vol. 34.4 (2009), pp. 369-386.
Vickery, Amanda, 'Mutton Dressed as Lamb? Fahioning Age in Georgian England', *Journal of British Studies,* Vol. 52.4 (2013), pp. 858-886.
Vickery, Amanda, 'Golden Age to Separate Spheres? A Review of the Categories and Chronology of English Women's History', *The Historical Journal,* Vol. 36.2 (1993), pp. 383-414.
Vidal, Fernando, *The Educated Brain: Essays in Neuroeducation* (Cambridge, 2008).
Vidal, Fernando, 'Brains, Bodies, Selves, and Science: Anthropologies of Identity and the Resurrection of the Body', *Critical Inquiry,* Vol. 28.4 (2002), pp. 930-974.
Vigarello, Georges, *A History of Rape: Sexual Violence in France from the Sixteenth to the Twentieth Century* (Cambridge, Oxford and Malden, 2001).
Villa, Anne C., 'Sex, Procreation and the Scholarly Life from Tissot to Balzac', *Eighteenth-Century Studies,* Vol. 35.2 (2005), pp. 225-257.
Wahman, Dror, 'Gender in Translation: How the English Wrote Their Juvenal, 1644-1815', *Representations,* Vol. 65 (1999), pp. 1-41.
Wahrman, Dror, 'Percy's Prologue: From Gender Play to Gender Panic in Eighteenth-Century England', *Past and Present,* Vol. 159 (1998), pp. 113-160.
Walker, Garthine, 'Everyman or a Monster?: The Rapist in Early Modern England, c. 1600-1750', *History Workshop Journal,* Vol. 76.1 (2013), pp. 5-31.
Walker, Garthine, 'Rape and Acquittal and Culpability in Popular Crime Reports in England, *c.* 1670-*c.* 1750', *Past and Present,* Vol. 220.1 (2013), pp. 115-142.
Walker, Garthine, *Crime, Gender and Social Order in Early Modern England* (Cambridge, 2003).
Walker, Garthine, 'Rereading Rape and Sexual Violence in Early Modern England', *Gender and History,* Vol. 10.1 (1998), pp. 1-25.
Walle, Etienne van de, 'Two Thousand Years of Menstrual Regulation', *The Journal of Interdisciplinary History,* Vol. 28.2 (1997), pp. 183-203.
Walsham, Alexandra, 'The Reformation of the Generations: Youth, Age and Religious Change in England, *c.* 1500-1700', *Transactions of the Royal Historical Society,* Vol. 21 (2011), pp. 93-121.
Wear, Andrew, *Knowledge and Practice in English Medicine, 1550-1680* (Cambridge, 2000).
Wear, Andrew, 'Medicine in Early Modern Europe', in Lawrence I. Conrad, Michael Neve, Vivian Nutton, Roy Porter and Andrew Wear eds., *The Western Medical Tradition: 800BC To AD1800* (Cambridge, 1995), pp. 215-362.
Webster, Charles, *The Great Instauration: Science, Medicine and Reform 1626-1660* (London, 1976).

Whitaker, Harry, Smith, C.U.M. and Finger, Stanley, 'Introduction', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 3-4.

Whitaker, Harry, Smith, C.U.M. and Finger, Stanley, 'Section E: Introduction: Medical Theories and Applications', in Harry Whitaker, C.U.M. Smith and Stanley Finger eds., *Brain, Mind and Medicine: Essays in Eighteenth-Century Neuroscience* (New York, 2007), pp. 211-212.

White, Catherine and McLean, Iain, 'Adolescent Complainants of Sexual Assault; Injury Patterns in Virgin and Non-Virgin Groups', *Journal of Clinical Forensic Medicine,* Vol. 13.4 (2006), pp. 172-180.

White, John P. and Potter, Paul, *Psyche and Soma: Physicians and Metaphysicians on the Mind-Body Problem From Antiquity to Enlightenment* (Oxford, 2000).

Whyte, Martin King, *The Status of Women in Preindustrial Societies* (Princeton, 1978).

Wilbrush, Joel, 'Menorrhagia and Menopause: A Historical Review', *Maturitas,* Vol. 10.1 (1988), pp. 5-26.

Williams, Elizabeth A., 'Sciences of Appetite in the Enlightenment, 1750-1800', *Studies in History and Philosophy of Biological and Biomedical Sciences,* Vol. 43.2 (2012), pp. 392-404.

Yallop, Helen, *Age and Identity in Eighteenth-Century England* (London, 2013).

Yallop, Helen, 'Representing Aged Masculinity in Eighteenth-Century England: The "Old Man" of Medical Advice', *Cultural and Social History,* Vol. 10.2 (2013), pp. 191-210.

Yolton, John W., 'Locke's Man', *Journal of the History of Ideas,* Vol. 62.4 (2001), pp. 665-683.