Tropes of Expertise and Converso Unbelief: Huarte de San Juan's History of Medicine

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In the chapter of his *Examen de ingenios para las ciencias* devoted to medicine, the physician Juan Huarte de San Juan (d. 1588) recounted an entertaining and likely apocryphal story about the French king François I, who in 1542 was suffering from an illness that no Christian doctor in his court could cure. Desperate to regain his health, it occurred to François that a Jewish doctor might know an appropriate treatment, and so he dispatched a message to his rival, the Holy Roman Emperor and King of Spain Carlos V, to ask him to send such a physician. According to Huarte, 'This demand was much laughed at in Spain, and everyone concluded that it was the caprice of a feverish man'.¹ Despite this dismissive reaction, Carlos attempted to satisfy François' desire. Fifty years after the 1492 conversion-or-expulsion decree promulgated by Carlos' grandparents, the Catholic Monarchs Fernando and Isabel, however, there were no more Jewish doctors easily to be found in Spain. And so Carlos did what he considered the next best thing: he tracked down a New Christian doctor of Jewish decent and sent him to François' court.

The 'very amusing' first exchange between François and this Converso began with the King poking fun at what he believed to be his Jewish interlocutor's misguided anticipation of the Messiah. The doctor calmly responded to the jibe by insisting that he was not awaiting the savior promised in the Hebrew Bible. Moreover, he added in case there remained any doubt, 'we Christians have the number of days since his coming well counted, since from then to today are one thousand, five-hundred and forty-two years, and he was in the world thirty-three years, and at the end of them he died crucified, and on the third day he resurrected, and then he ascended to the heavens, where he is

1 Juan Huarte de San Juan, *Examen de ingenios para las ciencias* [1575], (ed.) Guillermo Serés (Madrid: Cátedra, 1989), p. 505: 'La cual demanda fue harto reída en España, y todos concluyeron que era antojo de hombre que estaba con calentura'. This essay benefited from the generous feedback of participants in Wesleyan University's Renaissance Seminar. I would like to thank Nadja Aksamija, Michael Armstrong Roche, Samuel García, Kenneth Stow and Magda Teter, as well as Or Hasson and the co-contributors to this volume, for their helpful comments and references. Unless otherwise noted, all translations are my own.

today'.² François answered this statement of chronological dogma by suddenly shifting into a more direct mode of questioning: 'Then, you are Christian?' he asked. 'Yes, sire, by the grace of God,' responded the doctor, maintaining the sort of concise assurance that he had undoubtedly cultivated in case the Spanish inquisitors ever came searching for him. François was disappointed. 'I was after a Jew', the King exclaimed in a play on inquisitorial interrogation, 'for in my opinion they are the ones who have the natural ability to cure'.³ But he remained determined, and after giving the Converso doctor leave to return to Spain, he asked his Ottoman allies to send him a real Jewish doctor from Constantinople. This second doctor, who perhaps hailed from Sultan Suleiman I's court, where the number of Jewish physicians nearly equaled the number of Muslim ones, was able to cure François, just as the ill King had anticipated in his bout of feverish insight.⁴ But as Huarte noted in the anecdote's concluding zinger, the successful prescription ended up being nothing more than a bit of donkey milk.

At first glance, François' simplistic understanding of the relationship between professional expertise and religious identity seems to be the butt of Huarte's joke. Reading the text in Spanish, we laugh along with Carlos' subjects at François' apparently narrow-minded wish to see only a Jewish doctor. And we enjoy the anecdote's ending, which leaves open the possibility of effective popular remedies and underscores the misguidedness of François' Jewish doctor obsession – no need to wait on Sephardic wisdom from the East when donkey milk abounds at home, the anecdote seems to teach. But upon further consideration, this pleasure of shared mockery blurs into the discomfort of the mocked. Consider in this regard the cultural and religious history marking the decades leading up to the appearance of the first edition of the *Examen de ingenios* in 1575: the *estatutos de limpieza de sangre*, or blood purity statutes, which beginning in the late fifteenth century had excluded New Christians from full participation in some local educational and religious institutions, had by the mid-sixteenth century been adopted, not without conflict, in

2 Huarte, *Examen de ingenios*, pp. 505–06: 'Pero puesto el médico en Francia y delante el rey, pasó un coloquio entre ambos muy gracioso ... Ese número de días tenemos los cristianos bien contados, porque hace hoy mil y quinientos caurenta y dos años que vino, y estuvo en el mundo treinta y tres, y en fin de ellos murió crucificado, y al tercero día resucitó, y después subió a los cielos donde ahora está'.

3 Huarte, *Examen de ingenios*, p. 506: 'Rey: Luego, ¿vos sois cristiano? Médico: Señor, por la gracia de Dios. Rey: ... ¡Por judío lo había yo, los cuales en mi opinión son los que tienen habilidad natural para curar!'.

4 Salo Wittmayer Baron, *A Social and Religious History of the Jews*, 2nd ed. (New York: Columbia University Press, 1983), vol 18, pp. 74–77.

important seats of peninsular erudition, such as the Cathedral of Toledo and the University of Salamanca.⁵ These laws institutionalized the ontological presupposition that buttressed both François' admiration of Jewish doctors and the popular, anti-Semitic perception that all Jews were instinctively and irredeemably treacherous. For converts from Judaism to Christianity, baptism had opened the path to eternal salvation, but this world's political and economic positions of power nevertheless remained out of reach. From this more unsettling perspective, François was ridiculous not simply because he thought only a Jewish doctor might be able to cure him, but also because he failed to see the basic equivalency, codified by the blood purity statutes and popularized by more than a century of polemical literature, between the Converso and the Jew. Conversion did not eradicate the Jew's innate perfidiousness any more than it destroyed his 'natural ability to cure', which was how Huarte's François glossed Jewish medical expertise.

Taking seriously François' point, Huarte defined the qualities of a good physician and reimagined medical education by invoking and historicizing this image of the Jewish or Converso expert. In so doing, he grappled with negative as well as positive medical stereotypes, such as that of the fraudulent doctor who only pretended to possess qualifications and knowledge or the popular healer who hawked falsehoods to a gullible crowd. Like their more flattering counterparts, these stereotypes of the inept or picaresque doctor were intertwined with anxiety around conversion: some doctors feigned their expertise just as some Conversos dissimulated their Christianity. Rather than obscuring this worrisome correspondence between tropes of professional expertise and New Christian unbelief, Huarte highlighted it. He employed what for him and his immediate audience was an obvious if worrisome parallel between the history of medicine and the history of the Jews as a test case for his larger objective in *Examen de ingenios*, which was accurately to map the influence of ancestry, climate and custom in the proclivities and abilities of the Spanish republic's inhabitants.⁶ Such a map was important to Huarte not primarily for the pur-

5 Albert A. Sicoff, *Los estatutos de limpieza de sangre. Controversias entre los siglos XV y XVII*, (trans.) Mauro Armiño (Newark: Juan de la Cuesta, 2010), pp. 89–133; Antonio Domínguez Ortiz, *La clase social de los conversos en Castilla en la edad moderna* (Granada: Universidad de Granada, 1991), pp. 53–79. For a famous mid-sixteenth-century criticism of the statutes, especially in the context of debate over minority communities and the health of the republic, see Agustín Salucio, *Discurso sobre los estatutos de limpieza de sangre* (Valencia: Artes Gráficas Soler, 1975), pp. 24–29.

6 Regarding the privileged place of medicine and, by extension, the history of the Jews in Huarte's schema, remember that on the title page of *Examen de ingenios* the author was listed as 'el doctor Juan Huarte'. Perhaps Huarte was particularly attuned to the formal parallel be-

pose of eliminating heterodoxy, but rather because it served as a tool for the management of the realm's human resources. To align each individual's *ingenio*, the name Huarte gave to these proclivities and abilities, with his or her best suited education and vocation was to foster the development of productive subjects. Together, these subjects might create a prosperous and efficient republic, one able to counter the ministrations of the recently established French-Ottoman alliance in the Mediterranean and to maintain imperial pre-eminence elsewhere in the Spanish empire.

As I show in this essay, most striking about Huarte's model of what a modern pedagogue might optimistically call 'enlightened tracking' is his candidness about the importance of Jewish and Converso history for demarcating the discipline of medicine and, by extension, for offering a taxonomy of other professions and their attendant bodies of knowledge. Such forthrightness demonstrates that by the late sixteenth century, anxiety about the illegibility of Converso belief was more than a stimulus for the blood purity statutes of the previous decades. My argument is that this anxiety also produced a newly flexible and skeptical scholarly language for addressing some of the period's most pressing epistemological questions: What was the relationship between inherited nature and acquired practices? How should conflicting views of this relationship shape evangelical strategy? To what extent was professional training and accreditation the product of savvy lobbying as well as intellectual commitments or public policy concerns? And finally, what was the role of narrative in the concomitant professionalization of doctors and related medical professionals, on the one hand, and the policing of Conversos and other New Christians, on the other hand?

Like Felipe Pereda in his contribution to this volume, Chapter 13, my goal is to explore the professional consequences and opportunities generated by the frayed connection between devotion and its always potentially duplicitous representation. Without ignoring the actual pain suffered by Conversos, Moriscos and other heterodox Christian groups in late medieval and early modern Spain, I argue that the multifaceted skepticism engendered by the forced conversions that began in the 1390s and concluded in the 1520s had by

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tween professional expertise and religious identity because his own medical credentials and Christianity were dubious. See, for instance, Mauricio de Iriarte, *El doctor Huarte de San Juan y su Examen de ingenios. Contribución a la historia de la psicología diferencial* (Madrid: CSIC, 1948), pp. 17–45. It is worth noting, however, that a recent archival survey has uncovered no definitive evidence that Huarte actually was a Converso. See Javier Virués-Ortega et al., 'A Systematic Archival Inquiry on Juan Huarte de San Juan (1529–88)', *History of the Human Sciences*, 24 (2011): pp. 21–47.

the end of the sixteenth century become an engine of pedagogical reflection and professional self-definition, not to mention an occasion for humor. Put concisely, anti-Semitic polemic and debate about forced religious conversion led to scholarly innovation as well as lived violence.⁷

Since this essay focuses on the professionalization of medicine as a discipline, my corpus consists of early modern works that elaborated taxonomies of medical expertise, including not only Huarte's *Examen de ingenios*, but also the Converso doctor Enrique Jorge Enríquez's *Retrato del perfecto médico* of 1595, the jurist and linguist Cristóbal Suárez de Figueroa's *Plaza universal de todas ciencias y artes* of 1615, and the Granadan humanist Pedro de Mercado's *Diálogos de filosofía natural y moral*, first published in 1558. These authors' varied approaches to sanctioning doctors as experts occurred against the backdrop of the Crown's repeated early modern efforts to reform the office of the *protomedicato*, which examined and licensed the realm's professional healers. It was through these extended debates over how to define and cultivate medical expertise that the image of the doctor as an accomplished reader of both corporal and textual signs took shape. The essay concludes by demonstrating that Huarte and his contemporaries understood this capacity for interpretation as a distinctively Jewish talent. This is why they often retold the François anecdote: since it was both a case history and good story in need of a careful gloss, the anecdote highlighted the relationship between literary interpretation and doctoring, even as it also explored the influence of religion on both skills. By the end of the sixteenth century, in sum, the image of the threatening but effective Jewish or Converso doctor had become a useful trope for defining both medical expertise and Christian orthodoxy.

Jewish Genealogies of Empiricism, Skepticism and Secularism

The Hebrew Bible provides several key pieces of evidence for Huarte's genealogy of Jewish medical expertise. This is because some ancient authors traced the origins of medicine to Egypt, where, as the book of Exodus recounts, the Israelites dwelt as slaves for several hundred years. Huarte explained that because mathematics, astrology and 'all those sciences that belong to the imaginative category were invented in Egypt', it made sense to presume that medicine, which according to Huarte required a particularly active capacity for

7 I develop this argument at length in my book, though the focus there is on law, philology and history writing rather than medicine. See Seth Kimmel, *Parables of Coercion: Conversion and Knowledge at the End of Islamic Spain* (Chicago: University of Chicago Press, 2015).

imagination in the interpretation of symptoms and identification of diseases, also originated there.⁸ In a *translatio studii* story, Huarte suggested that although the Israelites had rushed through the divinely parted Red Sea with their bread unleavened, they managed to leave Egypt with a deep familiarity with local medical knowledge.⁹ The François anecdote implied that this Jewish familiarity with Egyptian medicine included popular remedies as well as bookish erudition. For although Pliny the Elder and other ancient physicians documented donkey milk's special benefits as an anti-poison or cosmetic, its use became particularly associated with Egypt, not least because of the still persistent myth that the Egyptian Queen Cleopatra bathed in it to maintain her healthy skin.¹⁰

Not all of the Israelites' medical knowledge was of the erudite or popular variety, though. The experience of manual labor in a hot Egyptian climate and the consumption of local food and water also had left their imprint, but in a physical and emotional rather than a scholarly or folkloric way. Huarte argued that the Israelites passed along to their scattered descendants the corporal qualities acquired in Egypt, just as Ethiopians bestowed black skin upon on their progeny, even those living in Spain or elsewhere outside of Ethiopia.¹¹ In the case of the Israelites, the suffering of slavery in particular was key to the development of their inborn natures: 'Egyptian qualities stuck with the Israelites ... Since those that live in bondage, sadness and suffering in foreign lands generate a lot of burning anger (*cólera*) on account of their lack of freedom to speak about or avenge their grievances; and this humor, having been dried out', added Huarte in a creative application of his day's Galenic theory of medicine, 'is an instrument of cleverness, industry and malice'.¹² Elsewhere in this same chapter, Huarte underscored the correspondence between industry

8 'Todas las ciencias que pertenecen a la imaginativa, todas se inventaron en Egipto'; Huarte, *Examen de ingenios*, p. 504.

9 Huarte, *Examen de ingenios*, p. 504, n. 27.

10 Pliny the Elder, *The Natural History* (London: H.G. Bohn, 1855), book 28, chs. 45, 47, 49–50.

11 Huarte, *Examen de ingenios*, pp. 522–23. For Huarte, there was something like a racial component to Israelite and Jewish medical expertise. But Huarte understood race to be dynamic and flexible in ways that a modern geneticist would consider erroneous. He wondered, for instance, about the length of time it would take for a group of black Ethiopians, divinely transported to 'our region' (*nuestra región*) just as the twelve tribes of Israel had been taken out of Egypt, to 'lose their colour, without mixing with white people' (*vinieran a perder el color, no mezclándose con los blancos*).

12 Huarte, *Examen de ingenios*, p. 508: 'al pueblo de Israel se le pegasen las calidades de Egipto ... Porque los que viven en servidumbre, en tristeza, en aflicción y tierras ajenas, engendran mucha cólera requemada por no tener libertad de hablar ni vengarse de sus injurias; y este humor, estando tostado, es el instrumento de la astucia, solercia y malicia'.

and imagination, arguing that the two terms were distinct names for the same choleric quality.¹³ I will return in a moment to the choleric's attributes, which suggest an unsettling if familiar equivalence between roguery and doctoring. For the moment, I simply want to emphasize that in Huarte's view, one that enduring Passover celebrations of the Exodus story seem to confirm, Jews continued to mark and remained marked by their experience in Egypt even several millennia after the fact.

Continuing this interwoven narrative of Jewish and medical history, Huarte invoked the Israelites' appetite as the first and best gauge of their natures, which, having taken shape through the process of acculturation in Egypt, were changeable rather than static. After the Israelites had spent generations adapting physically as well as culturally to their lives as slaves there, the sweet water and delicate manna that God provided during their escape to the Sinai wilderness was poorly suited to their hardy stomachs. Although this divine nourishment commenced a long process of spiritual transformation, it was at the time contrary to the fugitives' tastes. In offering this gastronomic account of the Israelites' departure from Egypt, Huarte underscored the parallel between eating the appropriate food and marshaling one's *ingenio* to the appropriate profession. Similarly, just as 'God accommodates himself to natural means' in offering the Israelites sustenance in the desert, personal and communal flourishing in the early modern republic required the ability to adapt to local circumstances.¹⁴ As historians of the early Jesuits or colonial Spanish America will recognize, this idea of accommodation was a contested, global evangelical strategy in the late sixteenth and early seventeenth centuries. The adaptation of evangelizers, conquistadors and diverse groups of indigenous peoples to

13 Huarte, *Examen de ingenios*, pp. 500–01: 'it is a gift born of the fecundity of the imagination, which goes by another name of *industry*, and which with common signs, doubts, conjectures, and little certainty can in the blink of an eye achieve a thousand different things related to power of healing, as well as prognosticate with certainty' (es gracia que nace de una fecundidad de la imaginativa que por otro nombre se llama *solercia*, la cual con señales communes, inciertas, conjeturales y de poca firmeza en cerrar y abrir el ojo alcanzan mil diferencias de cosas en las cuales consiste la fuerza del curar y pronosticar con certidumbre). On the fine line that Huarte and his contemporaries understood to differentiate an overactive, unbalanced imagination from a dynamic, productive one, see Elena Carrera, 'Understanding Mental Disturbance in Sixteenth-and Seventeenth-Century Spain: Medical Approaches', *Bulletin of Spanish Studies*, 87 (2010): pp. 105–36.

14 Huarte, *Examen de ingenios*, p. 512: 'Dios se acomoda a los medios naturales'. This citation is from the 1575 princeps edition published in Baeza. The 1594 edition replaces the word 'medios' with 'médicos,' which seems to be the work of overeager editorial correction rather than inquisitorial censorship, discussed below.

each other's eating practices was connected to the mutual transformation of their respective rituals and beliefs. Eating certain kinds of flora and fauna in the far reaches of the Spanish and Portuguese empires was a measure, however imperfect, of orthodoxy and accommodation as well as an experiment in comparative pharmacology and evangelical Galenism.¹⁵

On the peninsula too, the meaning and limits of accommodation were topics of intense debate. In his sixteenth-century edition and gloss of the Aragonese inquisitor Nicolau Eimeric's late fourteenth-century guide for fellow inquisitors, *Directorivm inqvisitorvm*, for instance, Franciso Peña acknowledged that first generation Conversos might convincingly explain their abstention from pork products – forbidden by Jewish law – by invoking taste. But for their children and grandchildren, such abstention was a sure sign of apostasy.¹⁶ Huarte's attention to food in his discussion of the histories of medicine and Jews echoes this conversation about the ambiguous relationship between Converso cultural practices and Christian orthodoxy. In both Peña and Huarte's views, the only hope for delineating this line between orthodoxy and apostasy, whether to root out false converts or to protect their sincere counterparts, was to think historically. Like Peña, that is, Huarte argued that tastes and other culturally inflected corporal markers changed across generations, even if, as Mercedes García-Arenal shows in her essay for this volume, Chapter 11, other contemporary polemicists emphasized that belief itself was inherited. My point is that in focusing on a biblical history of Israelite consumption, Huarte argued that professional expertise was analogous to culinary tastes. What looked

15 Rebecca Earle, *The Body of the Conquistador: Food, Race and the Colonial Experience in Spanish America, 1492–1700* (Cambridge: Cambridge University Press, 2012), pp. 19–53, pp. 156–86. The two most well-known of the early modern pharmacological compendiums with a global scope were the Portuguese Jewish physician's García de Orta's *Coloquios dos simples e drogas e cousas mediçinaes da India* of 1563 and the Portuguese botanist Cristóbal Acosta's *Tratado de las drogas y medicinas de las Indias Orientales*, published in Spanish in 1578. These texts complemented the Spanish converso doctor Andrés Laguna's Spanish translation and expansion of the ancient Greek physician Pedanius Dioscorides' encyclopedia of medicines, the *Materia médica*.

16 Nicolau Eimeric, *Directorivm inqvisitorvm* (Venice: Marcum Antonium Zalterium, 1595), p. 443. I have also consulted a modern Spanish translation of this text by Francisco Martín, *El manual de los inquisidores* (Barcelona: Muchnick, 1983), p. 161. For an amusing study of food stereotypes and insults, such as calling Jews and Conversos 'aubergine eaters' for their preference for eggplant as a meat substitute, see Juan Gil, 'Berenjeneros: The Aubergine Eaters,' in *The Conversos and Moriscos in Late Medieval Spain and Beyond: Departures and Change*, (ed.) Kevin Ingram (Leiden: Brill, 2009), pp. 121–42.

like the Israelites, Jews and finally the Conversos' natural facility in particular professions was in fact a feature of slowly shifting custom.

Given the sluggish pace of adaptation to new climactic and social conditions, Huarte urged the individual and the republic alike to accommodate rather than resist the pedagogical and professional circumstances on the ground. Even though it was neither an ideal nor permanent state of affairs in Christian Spain that Jews and Conversos be admired as skilled doctors, in other words, in Huarte's view it was imprudent public health policy to ignore this fact. Better to acknowledge these individuals' special skills, and to act accordingly. This was King François' insight, to which Huarte dedicated nearly the entirety of his chapter on medicine.¹⁷ Offering a realist pedagogical plan for imperial efficiency, Huarte aimed to jumpstart a languishing peninsular science. Although there were complex economic and political reasons for the disparity between Spain and Italy, France and England in the scientific fields, the oppression and subsequent departure of many of Spain's highly educated Jews and Conversos was one important factor, even if it was also true that critics from Spain's rivals nations tended for political and religious reasons to exaggerate both the scientific disparity itself and Spain's relative Jewishness. Nevertheless, Huarte was doing more than simply rebutting a dually 'lachrymose' narrative of peninsular Judaism and scientific inquiry, one whose high water mark of Jewish prestige, security and intellectual innovation was in the late Middle Ages.¹⁸ Huarte aimed instead to transform the actual conditions

17 Huarte, *Examen de ingenios*, pp. 504, 507, 517. However entertaining, the François anecdote was crucial to Huarte's argument, which is why he introduced it as a form of convincing evidence: 'But the *argument that most convinces* me on this issue is that, François of Valois' [emphasis mine] (Pero el argumento que a mí más me convence en este propósito es que, estando Francisco de Valois). Upon completion of the story, moreover, Huarte presented the remainder of the chapter as a 'demonstration of the opinion of the King of France' (demostración de la opinión del rey de Francia). Finally, near the end of the chapter, Huarte underscored again François' crucial insight, 'marvelously' (maravillosamente) reached and utterly reliable, though perhaps Huarte protests a bit too much: 'and what he said was neither a rant, nor even less the invention of the devil' (y no fue delirio ni menos invención del demonio lo que dijo). The Jewish role in peninsular public health policy of the late medieval period undoubtedly shaped Huarte's view that Jewish medical expertise was central to the wellbeing of the republic. See Luis García-Ballester's study of the *regimina sanitatis*, in his collection of previously published articles (with their original pagination), *Medicine in a Multicultural Society: Christian, Jewish and Muslim Practicioners in the Spanish Kingdoms, 1222–1610* (Aldershot: Ashgate, 2001), pp. 119–29, ch. 5.

18 On the early modern costs of Jewish coercion and expulsion, see José María López Piñero, *Ciencia y técnica en la sociedad española de los siglos XVI y XVII* (Barcelona: Labor Universitaria, 1979), p. 73; Luis S. Granjel, *La medicina española renacentista* (Salamanca:

of scientific inquiry and practice. Although he was largely unsuccessful as an institutional reformer, that diverse readers ranging from Enrique Jorge Enríquez in the late sixteenth century to the historians José María López Piñero and Julio Caro Baroja in our own day have focused on *Examen de ingenios* in general and cited the François story in particular underscores Huarte's lasting influence on conceptualizations of the relationship between professional expertise and Converso unbelief.¹⁹

Despite all his Galenic vocabulary and biblical history, the central paradox that Huarte reformulated to his own innovative ends was in fact a late medieval and early modern peninsular one: to be a good doctor was to risk being perceived as a bad Christian. This was the paradox that allowed the trope of Jewish medical talent to coexist with a darker, anti-Semitic narrative of arrogant Jewish and Converso physicians who poisoned or dismembered Christian babies and sought to harm adult Christian patients, just as their ancestors supposedly had requested the crucifixion of Jesus. The late fifteenth-century polemicist Alonso de Espina is perhaps the most famous proponent of this narrative, but as contemporary stories of the torture and mutilation of St Simon of Trent or the poisoning of the Niño de La Guardia in Toledo demonstrate, the idea that Jewish doctors employed their specialized knowledge of narcotics and dissection to nefarious ends was a widespread one among late fifteenth and sixteenth-century Christians.²⁰ So systemic in the peninsular context were such accusations of Jewish perfidy that the verb *quintar* came to denote, among other more inoffensive things, Jewish doctors' deliberate killing

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- Universidad, 1980), pp. 12–14. On the spectacular professional success of some medieval Jewish doctors, both on the Iberian Peninsula and beyond, see Joseph Shatzmiller, *Jews, Medicine and Medieval Society* (Berkeley: University of California Press, 1994), pp. 56–77.
- 19 López Piñero, *Ciencia y técnica*, pp. 75–76; Julio Caro Baroja, *Los judíos en la España moderna y contemporánea* (Madrid: Arion, 1961), vol. 1, p. 172; Enrique Jorge Enríquez, *Retrato del perfecto médico* (Salamanca: Juan and Andrés Renaut, 1595), p. 146; David B. Ruderman, *Jewish Thought and Scientific Discovery in Early Modern Europe* (New Haven: Yale University Press, 1995), p. 286.
- 20 Alonso de Espina, *Fortalitium fidei contra iudeos saracenos aliosque christiane fidei inimicos* (Nuremberg: Anton Koberger, 1494), book 3, consideration 7, 'crudelitas' 13. Some of these stories of murderous Jews became newly popular during Huarte's day. For instance, Friar Rodrigo de Yepes published his *Historia de la muerte y glorioso martirio del Sancto Inocente, que llaman de La Guardia* in 1583, a text that served as inspiration for Lope de Vega's play *El niño inocente de La Guardia*. Outside of the peninsular context, Martin Luther referenced Jewish doctors' familiarity with potentially toxic medicines to suggest that they would kill all Christians if they could. See Baron, *A Social and Religious*, vol. 12, pp. 158–64; Ronnie Po-Chia Hsia, *Trent 1475: Stories of a Ritual Murder* (New Haven: Yeshiva University Library and Yale University Press, 1992), pp. 26–50.

of one out every five patients.²¹ However troubling these sorts of accusations, they served as an explanatory narrative for what in the early modern period was an imprecise art of healing. Doctors of that period labored with limited resources on the knife's edge between life and death. Medical outcomes were inconsistent and doctors' standings unstable.

Nowhere was this linked fragility of life and reputation more apparent than at the bedside of the gravely ill. While physicians concentrated on clinical matters and sought to rally the strength of the patient, priests charged with administering the last rites aimed to turn the patient's focus toward the world to come. According to the historian Andrew Keitt, longstanding tensions between physicians and priests only ebbed in the high and late Middle Ages, as the former began successfully to define and protect their professional autonomy and the latter grew increasingly concerned about a wide range of popular superstitions.²² For dying patients of sixteenth-century Jewish and Converso physicians, however, an intensified sense of religious distrust paradoxically accompanied this hard-earned clinical legitimacy, whose consolidation I examine in more detail below. That is, after the formation of this alliance between physicians and priests against superstition, ill-intentioned doctors possessed greater power to delay or withhold the last rites, an act that paralleled tinkering with lethal medications or playing fast and loose with the scalpel. Control over the soul was in this way inseparable from control over the body. Against this backdrop of competing anxieties over death and doctors, to consult a folk healer, even a New Christian one, did not perhaps look like an imprudent option. At the very least, such consultations, like the one between Cardinal Francisco Jiménez de Cisneros and an elderly Morisca reported by the Jesuit historian and author of the 'false chronicles' Jerónimo Román de la Higuera, made for encouraging stories of successful treatment and effective criticism of erudite medicine. As Michele Olivari has suggested, moreover, to narrate the early sixteenth-century story of Cisneros' consultation with a Morisca, an option suggested, according to Román de la Higuera, by a Granadan Jewish woman previously baptized by Cisneros, also represented a subtle call

21 Domínguez Ortiz, *La clase social*, p. 147. Citing Domínguez Ortiz, López Piñero reminded his readers of the more pleasant trope of Jewish expertise, captured in an aphorism of the period: 'Without any particular reason, they take the swordsman for an Old Christian and the doctor for a Jew' (Sin más razón, tienen al espadero por limpio y al médico por judío); see López Piñero, *Ciencia y técnica*, p. 75.

22 Andrew W. Keitt, *Inventing the Sacred: Imposture, Inquisition and the Boundaries of the Supernatural in Golden Age Spain* (Leiden: Brill, 2005), pp. 156–57.

for the re-imagination of peninsular cross-cultural encounter in the late sixteenth century, when the Morisco expulsions loomed.²³

In his *Plaza universal de todas las ciencias y artes*, an early seventeenth-century translation of the Italian Tomaso Garzoni's 1585 taxonomy of scholarly knowledge and professional expertise, Cristóbal Suárez de Figueroa opened his discussion of doctors by underscoring this inconsistency and potential treacherousness of medical treatment with a series of entertaining vignettes about ancient thinkers' advice for avoiding physicians all together.²⁴ Socrates and Cato the Elder, recounted Suárez de Figueroa, suggested barring doctors from cities in order to save ordinary citizens from the mortal danger posed by malpractice, ignorance and fraud. Ausonius thought that luck rather than medical skill or knowledge was the usual explanation for the recovery of sick patients. And in an emblematic image of the authority born of popular experience rather than university study, Herodotus and Strabo described how the Lacedaemonians, Egyptians and Portuguese brought their sick to the public plazas, where others who had themselves suffered and survived illness could offer their personal advice. Even in these three centers of medical erudition, many thought it preferable to chart a path to recovery with the help of a trustworthy neighbor than with an unknown and potentially dishonest or inept interloper, whatever his supposed qualifications.²⁵ Although these vignettes suggest ways to circumvent fraught encounters with doctors, they at the same time reiterate a longstanding tension between medical training based on philosophy or natural science and empirical know-how gleaned from clinical experience.

23 The Cisneros episode is recounted and analysed in Michele Olivari, *Avisos, pasquines y rumores. Los comienzos de la opinión pública en la España del siglo XVII* (Madrid: Cátedra, 2014), pp. 385–91. On Morisco clinicians and the tension among academic, empirical and folk medicine, see García-Ballester, *Medicine in a Multicultural Society*, pp. 246–52, ch. 8.

24 As Suárez de Figueroa's indebtedness to Garzoni suggests, the histories of Spanish and Italian medicine are linked, particularly in the early part of the sixteenth century, when the Colegio de España in Bologna welcomed a considerable number of aspiring doctors from Spain. Fewer made the journey by mid-century, when Felipe II, concerned about a peninsular 'brain-drain', prohibited Spaniards from studying or teaching at universities abroad. See Jon Arrizabalaga, 'Spanish Medical Students' *peregrinatio* to Italian Universities in the Renaissance', in *Centres of Medical Excellence? Medical Travel and Education in Europe, 1500–1789*, (ed.) Ole Peter Grell, Andrew Cunningham and Jon Arrizabalaga (Farnham: Ashgate, 2010), pp. 93–126.

25 Cristóbal Suárez de Figueroa, 'De los médicos' (discourse 16), in *Plaza universal de todas ciencias y artes* (Madrid: Luis Sánchez, 1615), p. 68.

Pedro de Mercado's *Diálogos de filosofía natural y moral* thematized the boundaries between disciplines and their respective standards of evidence and modes of interpretation by similarly addressing the problem of professional ineptitude in a cross-cultural context. The text's fifth dialogue featured a testy discussion between the doctor Juanicio and an unnamed jurist, who disagreed over the relative value and efficacy of their chosen professions. While Juanicio invoked the universality of medicine by pointing out that among 'Greeks, Latins, Jews, Christians and Moors, and all nations one will find those knowledgeable of it', the jurist saw medicine more cynically.²⁶ In his view, incompetence was the only quality that universally characterized medicine in its global diversity of practice. He joked that Greek doctors killed their patients by bleeding them from the side of their pain while Arab doctors achieved the same result by bleeding them from the opposite side. 'You put the whole business into such doubt', exclaimed the jurist to Juanicio, who struggled with his defense of doctors, 'that it becomes necessary to ask the patients if they want to be cured according to the Greek or Arab method'.²⁷

Through Huarte, Suárez de Figueroa and Mercado's complementary lenses, the professionalization of the field of medicine looks more like a futile endeavor to unmask the varied hucksters who masqueraded as skilled experts than an earnest concern about medical training. Given the limitations of the period's medicine, however, it was difficult in practice for sick and injured patients to distinguish between dishonesty and ineffectiveness and for doctors to protect themselves against the accusations of both. When court advisors and doctors advocated in the sixteenth century for more rigid protocols for training, examining and licensing new medical professionals, they were seeking to address these problems. The shortcoming of this strategy was that although the professionalization of medicine slowed or softened charges of ineptitude, it exacerbated the accusation of religious dishonesty. For Huarte, this was a deal he was willing to cut. He mitigated uncertainty about professional expertise by actively replacing it with a different kind of anxious humor about New Christian dissimulation. In his pragmatist view, I argue, the loss of *only* one out of five patients appeared to be convincing evidence of medical skill rather than proof of apostasy.

26 Pedro de Mercado, *Diálogos de filosofía natural y moral* (Granada: Hugo de Mena and René Rabut, 1558), fifth dialogue (n.p.): 'Griegos, Latinos, Judíos, Christianos, y moros, y de todas las naciones se hallarán sabios en ella'.

27 Mercado, *Diálogos de filosofía*, fifth dialogue (n.p.): 'poneys el negocio en tanta duda, que es necessario preguntar a los enfermos, si quieren ser curados segun Griegos o Arabes'.

Moreover, by overlaying geographic and climactic genealogies for the faculty of imagination, Huarte employed Jewish history to secularize medical expertise as whole. The Jews possessed a uniquely admirable and fearsome combination of moral relativism and practical aptitude that ran counter to sincerity of faith. However useful the figure of the stubbornly literalist Jewish reader was as a tool of self-definition for generations of Christian scholars, in *Examen de ingenios* Huarte invoked a different kind of Jewish reader, one who may have been blind to Christ but who nevertheless was uniquely attentive to the referents hidden beneath corporal and textual surfaces. Huarte's Jewish reader understood his own imagination as a form of interpretive authority, and he was unafraid to wield it. By building his account of medical expertise up from the foundation of the François story and its varied readings, Huarte underscored the professional power inherent in this particularly Jewish mode of interpretation. This Jewish mode of interpretation, furthermore, was generalizable to life beyond the clinical context: glossing Democritus and Hippocrates in the second prologue to the 1594 edition of *Examen de ingenios*, Huarte saw the world itself as an enormous clinic, one where 'man from birth to death is nothing but a perpetual sickness'.²⁸ However counterintuitive it may seem, because of Huarte and others' popular anti-Semitic idea that Jews and Conversos were by nature astute readers of bodies and texts as well as vengeful, greedy and duplicitous heretics, medicine came to stand out as unique among the various peninsular communities of scientists. Unlike engineers, cartographers and other groups of experts, only medicine experienced both a process of professionalization *and* secularization during the sixteenth century.²⁹

From the extra-peninsular perspective of the intellectual historian Richard Popkin, this capacity for imagination and interpretation was the condition not only for an empiricist medical practice, but also for what he called 'constructive or mitigated skepticism'.³⁰ Ignited by the revival of Sextus Empiricus and other ancient skeptics, early modern epistemological doubt about the workings of the human mind and body, the laws of physics, and even theological order drove the emergence of a new empiricism. Unable to know with certainty the nature of the cosmos, late sixteenth- and early seventeenth-century scientists such as Marin Mersenne, Pierre Gassendi, and René Descartes manipulated and represented it with new precision. Although, as Jeremy

28 'El hombre dende que nace hasta que muere no es otra cosa más que una perpetua enfermedad'; Huarte, *Examen de ingenios*, p. 174.

29 López Piñero, *Ciencia y técnica*, p. 52, p. 71.

30 Richard Popkin, *The History of Skepticism: From Erasmus to Spinoza* (Berkeley: University of California Press, 1979), pp. 129–50.

Robbins has argued, there were numerous Spanish intellectuals and artists who were either familiar with the above figures or participated in the European-wide debates that produced them, the peninsular story of skepticism's rise is nevertheless distinct. For as I claim in this essay, in Spain the 'skeptical posture' was closely tied to the history of false conversion and partial assimilation in addition to a renewed interest in the ancient skeptics.³¹ Galen's perspective on the uncertainty constitutive of natural philosophy and medical practice is as crucial to this story as the multiple strands of fifteenth-century peninsular doubt examined by Stefania Pastore in her contribution to this volume, Chapter 10. Read through Huarte's later chapter on the connected histories of the Israelites and medicine, for instance, the description of medicine as a necessarily uncertain science points toward his larger point: Jews and Conversos were particularly well suited to the inexactitude of medicine because of their capacity for relativism, which in the medical context entailed pragmatic empiricism as well as intellectual flexibility. It was Old Christian doubt about the beliefs and commitments of the Conversos as well as the disillusionment of the New Christians themselves that, as my reading of *Examen de ingenios* demonstrates, shaped the image of science in early modern Spain.³²

For Huarte, 'choler' was the Galenic linchpin holding together the processes of professionalization and secularization and the word he employed to denote the skeptical posture described above. Although there was a Paraclesian strand of naturalistic and anti-academic medicine in early modern Europe, Galen's theory of the humors, along with his balance between erudition and clinical experience, constituted the foundation of the period's medical education and practice. Galen's prestige in the sixteenth century was the result of the recovery and careful edition of some of his Greek texts by scholars like the Italian physician Niccolò Leonicensio, and the translation into Latin of those texts by the doctor and linguist Thomas Linacre, among others. Between 1500 and 1600 more than 590 separate editions of Galen were published, and during that same period the famous Venetian Aldine press published complete works of

31 Jeremy Robbins, *Arts of Perception: The Epistemological Mentality of the Spanish Baroque, 1580–1720* (New York: Routledge, 2007), p. 5; Ruderman, *Jewish Thought*, p. 276. The phrase, 'skeptical posture' is Ruderman's, but the idea has a storied history among hispanists such as Américo Castro and Stephen Gilman. Popkin's principle nod to the Converso history of peninsular skepticism occurs during his analysis of the philosopher Francisco Sánchez, who spent most of his life in France.

32 Huarte, *Examen de ingenios*, p. 348. See also Robbins, *Arts of Perception*, pp. 32–33. This is a slightly different question than the danger or desirability of doubt about both New and Old Christians' ancestry. Here debate about Morisco expulsion as well as Converso integration was central. See Salucio, *Discurso sobre los estatutos*, fols. 22r–24v.

both Galen and Hippocrates in the original Greek.³³ Unique about Huarte's Galenism amidst this explosion of interest in Galen was its diachronic quality and explicitly political use. Huarte employed Galen's vocabulary as a tool of historical inquiry and contemporary polemic. Along with the three other temperaments (sanguine, melancholic, and phlegmatic) determined by imbalances of the bodily fluids, the choleric temperament was for Huarte more than a sign of illness. 'This dried out choler ... was the instrument of cleverness, industry, shrewdness and malice', he explained in a charged repetition of the list cited above. Huarte linked medical skill to this choleric constitution, which, as he put it, 'is accommodated to the conjectures of medicine, and with it one hits upon the illness, the cause and its remedy'.³⁴ Good doctors possessed the very same traits that made the Conversos both effective dissemblers of false Christianity and social malefactors who slaughtered Christians. It made so much sense to Huarte's contemporaries that to be fit for medicine was also to be fit for picaresque or heretical deception that inquisitorial officials thought it necessary in the late 1570s to censor this very list of adjectives. The censors left only the first term, 'cleverness', in the expurgated 1594 version of *Examen de ingenios*, which according to Huarte's son was corrected by the author himself before his death in 1588.³⁵ The inquisitorial guardians of the Christian community undoubtedly worried that to characterize doctors, even Christian ones, in these unfavorable terms was imprudent if not also unorthodox.

Despite this history of censorship, in the revised version of *Examen de ingenios* Huarte preserved his subtle recuperation of Converso cleverness as a condition of medical proficiency. This recuperation was a feature of his redefinition of *ingenio*, a word that, like *astucia*, *solercia*, *industria* and other related terms, carried the ambiguous connotations of deception and unscrupulousness as well as practical knowledge.³⁶ My point is that the ready stockpile of

33 For a collection of previously published articles (with their original pagination) on Galen, see Luis García-Ballester, *Galen and Galenism: Theory and Medical Practice from Antiquity to the European Renaissance* (Aldershot: Ashgate, 2002), especially chapters 2 and 10. Other helpful introductory resources on Galen are the 'Medicine' and 'Galen' entries in Paul F. Grendler (ed.), *Encyclopedia of the Renaissance* (New York: Scribners and The Renaissance Society of America, 1999), vol. 3, pp. 1–2; vol. 4, pp. 100–01.

34 Huarte, *Examen de ingenios*, p. 517: 'Esta cólera retostada ... era el instrumento de la solercia, astucia, versucia, y malicia; y esta es acomodada a las conjeturas de la medicina, y con ella se atina a la enfermedad, a la causa, y al remedio que tiene'.

35 See Guillermo Serés' introduction in Huarte, *Examen de ingenios*, p. 114.

36 I have examined the religious, political and literary uses of these various related terms, particularly *industria* and *ingenio*, in Seth Kimmel, 'No milagro, milagro: The Early Modern Art of Effective Ritual', *Modern Language Notes*, 128 (2013): pp. 433–44.

images and preconceptions surrounding the history of the Jews and Conversos served Huarte as an instrument of pedagogical reform and professional self-definition, rather than as a tool of Converso apologetics, as David B. Ruderman has suggested. That Huarte managed to find a diverse and eager audience for *Examen de ingenios*, which was published in numerous late sixteenth and early seventeenth-century versions and in a host of vernacular translations, suggests that novel uses for familiar tropes of professional expertise and New Christian unbelief were at least thought provoking or entertaining, if not also convincing. Most early modern Spaniards found doctors, along with Jews or Conversos, to be liminal and threatening figures, even though (or precisely because) they cared for monarchs and consorted with powerful royal advisors. This was why historical episodes of Converso doctors, such as Elija Montalto, whom Queen Marie de Médicis invited to Paris, or Rodrigo López, who cared for Queen Elizabeth in London, drew so much accusatory interest and perhaps inspired Tirso de Molina and Shakespeare.³⁷ Although the relevant archives have revealed grains of truth to the accusations against these doctors, the mixture of imperial tension and royal and religious intrigue that characterized the episodes was the stuff of fiction. Unlike some of his contemporaries, Huarte did not seek to capitalize on this threatening Jewish and Converso monopoly on medical expertise. He instead demystified it in order to transform medical discourse from a debate about the inescapability of nature to one about the political stakes of education.

Conclusion: The Law and the Lure of an Exemplary Story

Huarte's sly use of his day's tropes of professional expertise and Converso unbelief must not obscure the long and earnest legal struggle to distinguish doctors from crank healers and assorted superstition peddlers, who, as Mercedes García-Arenal and Fernando Rodríguez Mediano have argued, often traded in a variegated economy of New Christian talismans and magical symbols.³⁸ The peninsular legal codes collected in the early nineteenth-century

37 Baron, *A Social and Religious*, vol. 14, pp. 108–10; Eric Griffin, *English Renaissance Drama and the Specter of Spain: Ethnopoetics and Empire* (Philadelphia: University of Pennsylvania Press, 2009).

38 Mercedes García-Arenal and Fernando Rodríguez Mediano, *The Orient in Spain* (Leiden: Brill, 2013), p. 115. On Galenism the medical critique of superstition, see Andrew W. Keitt, 'The Devil in the Old World: Anti-Superstition Literature, Medical Humanism and Preternatural Philosophy in Early Modern Spain', in *Angels, Demons and the New World*, (ed.) Fernando Cervantes and Andrew Redden (Cambridge: Cambridge University Press, 2013), pp. 15–39.

Novísima recopilación de las leyes de España recount the history of this struggle in fascinating detail: around the time of the founding of the inquisition in Spain, the Catholic Monarchs Fernando and Isabel began the effort to centralize the licensing of medical professionals. Drawing on some late medieval precedents, they created the royal office of the *protomedicato*, which was charged with examining and certifying the knowledge and skill of doctors and, to a lesser degree, of other medical professionals. By insisting that the head of this office, the *protomédico*, fulfill his duties in proximity to court, soon-to-be Carlos V tried to crack down on what between the 1490s and 1510s evidently had become a corrupt process. As with so many other early modern Spanish institutions, the conflict here was between an imperial center that attempted to consolidate power and regional or local authorities that aimed to protect their longstanding privileges. After numerous minor addendums, in 1588 the chronically ill Felipe II significantly expanded the educational prerequisites that aspiring doctors had to complete before their examinations, insisting, for example, upon two years of medical school after the bachelor of arts. He also enlarged the *protomedicato* by dividing examination responsibilities by field of specialization and naming larger panels of experts.³⁹ Although it is tempting to chart this peninsular history of professionalization as one of collusion between kings and doctors, in fact it was a period of conflict and compromise. Competing communities of doctors, whose local interests often clashed both with each other and with the privileged practitioners that cared for the Habsburg Monarchs, negotiated the new boundaries and implicit hierarchies of their field in conversation with the Crown. As the ample ‘medico-political’ literature of the late sixteenth and early seventeenth century and the imperial tensions of Huarte’s François episode suggest, the politicization of medical expertise accompanied its professionalization.⁴⁰

39 *Novísima recopilación de las leyes de España* (Madrid: J. Viana Razola, 1805), vol. 4, book 8, titles 10–11. For an introduction to this legal material and its medieval precedents, see Rafael Muñoz Garrido and Carmen Muñoz Fernández, *Fuentes legales de la medicina española (siglos XIII–XIX)* (Salamanca: Universidad de Salamanca, 1969), pp. 13–21; Michelle Clouse, *Medicine, Government and Public Health in Felipe II’s Spain: Shared Interests, Competing Authorities* (Farnham: Ashgate, 2011), pp. 15–41. On the *protomedicato* and the physicians in the service of Felipe II, see Francisco Javier Puerto Sarmiento, *La leyenda verde: naturaleza, sanidad, y ciencia en la corte de Felipe II (1527–1598)* (Salamanca: Junta de Castilla y León, 2003), pp. 233–38.

40 Despite this process of professionalization, popular belief in the king’s healing touch existed in Spain, though to a much lesser degree than it did in France. This difference adds another layer to the humor of Huarte’s episode, which from this perspective looks like a

Just as the gradual sacralization of Converso and Morisco cultural life through the expansion of the blood purity statutes served the interests of inquisitors, this growing medical bureaucracy served the interests of doctors. It was paramount for physicians to establish a clear hierarchy among the myriad medical providers, which included bone-setters, surgeons, blood-letters, barbers, midwives, apothecaries, uroscopists (who diagnose illness from examining urine), lithotomists (who operate on bladder stones) and varied folk healers, while also emphasizing and celebrating a high religious and educational barrier of entry to working as a doctor proper.⁴¹ The articulation of this hierarchy unfolded in distinct ways in different places. While Huarte and his Spanish contemporaries privileged medical expertise based on a combination of interpretive acumen and experience with diverse patients, in late sixteenth-century Padua, for example, to be an elite doctor was to be skilled surgeon.⁴² To borrow an apt image employed by the influential *protomédico* Luis Mercado in his address to readers at the beginning of his work on the art of bone-setting, this process of stratified professionalization in the field of medicine was an attempt to close a 'doorless corral' (*corral sin puerta*).⁴³ As Zacuto Lusitano,

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jab at the overlap between French nationalism and superstition. On royal thamaturgy in the Spanish context, see 'Medicinal Monarchy,' in Keitt, *Inventing the Sacred*, pp. 183–201.

41 On the variety of specialists competing in the early modern medical marketplace, see the entry on 'Medicine' in Grendler (ed.), *Encyclopedia of the Renaissance*, vol. 4, p. 98. With the extension of the blood purity statutes over the course of the sixteenth century, Jews and Conversos were at least technically barred from medical education, though many found ways around the prohibition. As the founding of the University of Granada medical school as a tool of assimilation in the 1530s underscores, the story of the Moriscos and medicine is different. See García-Arenal and Rodríguez Mediano, *The Orient in Spain*, pp. 115–20; Luis García-Ballester, *Los moriscos y la medicina. Un capítulo de la medicina y la ciencia marginadas en la España del siglo XVI* (Barcelona: Labor Universitaria, 1984), pp. 52–54.

42 As Cynthia Klestinec has shown, the surgical theaters of Padua and elsewhere, constructed in the 1580s and 1590s, transformed Italian medical education and helped to recuperate the image of the surgeon, whom until that point physicians had dismissed as an empirical technician. Even so, those very physicians who cultivated interests in philosophy and natural history as well as clinical work eventually managed to co-opt and redefine surgery and anatomical knowledge as more than a necessary component medical craft and education. See Cynthia Klestinec, 'Medical Education in Padua: Students, Faculty and Facilities', in *Centres of Medical Excellence? Medical Travel and Education in Europe, 1500–1789*, (ed.) Ole Peter Grell, Andrew Cunningham and Jon Arrizbalaga, pp. 193–220; and Klestinec, *Theaters of Anatomy* (Baltimore: Johns Hopkins University Press, 2011), pp. 55–123.

43 Luis Mercado, *Instituciones para el aprovechamiento y examen de los Algebristas* (Madrid: Pedro Madrigal, 1599). Explaining why he chose to write his guide to bone-setting in

Francisco López de Villalobos, Andrés Laguna, Rodrigo de Castro and other early modern Converso doctors undoubtedly recognized, there were many formal similarities between the effort to encircle this metaphorical corral by defining medical expertise and the effort to demarcate Old and New Christians by pursuing an inquisitorial agenda.⁴⁴ Converso doctors involved in the professionalization of medicine turned their own hard-earned lessons of religious exclusion to the project of professional apologetics.

Not surprisingly, in their efforts to define this increasingly professional physician, Huarte's first readers and commentators were drawn in particular to the François anecdote. In his *Retrato del perfecto médico*, published just a year after the appearance of the revised edition of *Examen de ingenios*, the converso doctor Enrique Jorge Enríquez reiterated Huarte's insistence upon the utility to the republic of a skilled class of doctors and underscored his distinction between the expertise born of erudition and experience. He also notably included the entirety of the François story within an extended gloss on Huarte's account of the relationship between imagination and medical skill. In Enríquez's view, doctors required imagination because of its link to knowledge of particular examples of illnesses and treatments. Successful implementation of the 'conjectural art' of medical diagnostics entailed a flexibility born not of adherence to incorruptible universals, Enríquez explained, but rather of a wide experience with actual illnesses suffered by diverse patients.⁴⁵ Transitioning from this defense of experiential knowledge to Huarte's François story, Enríquez highlighted both the humor and the analytical purpose of the episode by recalling Huarte's straight-faced admiration of 'King François' imagination.⁴⁶

Castilian rather than Latin, Mercado explained that the field had been 'abandoned by the learned and lettered; it is now unknown and unpracticed except by pastors, or rustic laborers, or women of little reputation, who, lacking another diversion by which to live, enter this field through a little door, or better said, a doorless corral' (*desamparada de los doctos y letrados, ya no la conocen ni tratan sino pastores, o labradores rústicos, o mujercillas, que a falta de otro entretenimiento para vivir, se entran por este portillo, o por mejor decir, corral sin puerta*). On the question of vernacular writing's 'utility,' see Michael Solomon, *Fictions of Well-Being: Sickly Readers and Vernacular Medical Writing in Late Medieval and Early Modern Spain* (Philadelphia: University of Pennsylvania Press, 2010), pp. 16–39.

44 Julio Caro Baroja, *Inquisición, brujería y criptojudasmo* (Valencia: Círculo de Lectores, Galaxia Gutenberg, 1996), pp. 106–10; Caro Baroja, *Los judíos en la España*, vol 1, pp. 177–86.

45 Enríquez, *Retrato del perfecto*, p. 141: 'arte conjectural'.

46 Enríquez, *Retrato del perfecto*, pp. 145–47: 'imaginacion del Rey Francisco'. For more on Enríquez's reformulation of Huarte and his own view of medicine's utility to the republic, see Jon Arrizabalaga, 'The Ideal Medical Practitioner in Counter-Reformation Castile: The

By attributing the faculty of imagination to the sick king in addition to the Jewish doctor, Enríquez connected the dots established by Huarte: to truly comprehend the complex nature of medical expertise, it was necessary to know how to read and interpret stories. Enríquez recognized that the concurrence between the imagination of the king and his doctor rendered the episode both illustrative and humorous.

Enríquez's reframing of Huarte's story thus highlights the extent to which early modern empirical medicine was, as a late modern doctor might anachronistically put it, also narrative medicine. Beginning in the first half of the sixteenth century, the Lyonese physician Symphorien Champier began a trend of collecting *historia medica*, which were case histories culled from ancient and medieval sources as well as contemporary experience. Champier's *Galenii historiales campi* of 1532 established a precedent that the Italian antiquarian Luigi Mondella and Zacuto Lusitano expanded with their mid-sixteenth-century *Theatrum Galeni* and *De medicorum principium historia* of 1636, respectively.⁴⁷ The rise of these case collections, which were a combination of reference text, short story anthology and self-promotion, meant that it was possible to gain breadth of expertise through close readings as well as clinical experience. That is, doctors could improve their ability to read the signs of the sick body and interpret the clues proffered by ailing patients by studying medical anecdotes in these new compendiums, which marginalized the philosophical bookishness of sixteenth-century medical humanism even as they confused the boundary between the narrative and the empirical. To interpret *exempla* or *historiae* – precisely Huarte's project in the *Examen de ingenios* chapter on medicine – was to cultivate clinical skill.

I have joined Enríquez in retelling and analyzing Huarte's account of François' illness for the same reason as Ruderman, Caro Baroja and López Piñero, not to mention Miguel de Cervantes, whose Don Quijote is a choleric with an overly active literary imagination if there ever was one: because the story is a gracefully crafted, succinct and entertaining representation in what is otherwise a dense and challenging text.⁴⁸ By allowing the anecdote's literary

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Perception of the Converso Physician Henrique Jorge Henriques (c. 1555–1622), in *Medicine and Medical Ethics in Medieval and Early Modern Spain: An Intercultural Approach*, (ed.) Samuel S. Kottek and Luis García-Ballester (Jerusalem: The Magnes Press of Hebrew University, 1996), pp. 61–91, esp. pp. 74–88.

47 Gianna Pomata, 'Praxis Historialis: The Uses of *Historia* in Early Modern Medicine', in *Historia: Empiricism and Erudition in Early Modern Europe*, (ed.) Gianna Pomata and Nancy G. Siraisi (Cambridge: The MIT Press, 2005), pp. 105–46, esp. pp. 105–06, and 122–37.

48 On *Examen de ingenios* as a source text for *Don Quijote* and a diagnostic manual for its eponymous hero, see Otis H. Green, 'El Ingenioso Hidalgo', *Hispanic Review*, 25 (1957): pp. 175–93, pp. 313–32. Numerous scholars have sought subsequently to refine Green's

quality to coexist with its argumentative usefulness, it is possible to see that Huarte employed narrative to train his readers' interpretive attentiveness and religious nimbleness. He demonstrated that along with tropes of unbelief, stories were also tools for the demarcation of professional expertise. To read the François anecdote as a doctor reads his patients was thus to participate in the politicization of knowledge in the early modern period, and it remains so for us today.

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argument. See, for instance, Chester S. Halka's attention to the relationship between Don Quijote's sleep and his lucidity in 'Don Quijote in the Light of Huarte's *Examen de ingenios*: A Reexamination', *Anales Cervantinos*, 19 (1981): pp. 3–13.