CHAPTER 13

Medical Effects and Affects: The Expression of Emotions in Early Modern Patient–Physician Correspondence

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From the year, one thousand, five hundred and fifty, I began to feel a great illness, with a trembling of all my Members, especially after meat and sleep. A pain goes from the middle of my Hip, directly to the brain, comprehending all the right side of my backbone, and reaching into my Arm on the same side; and all my members remain heavy, so as not to be moved, and to desire nothing but to sleep, especially after meals. And I feel through the whole habit of my body, a certain fluxion under the skin of waters, which sometimes make a tumult like a swift torrent; and sometimes they run slowly, so that you would say it were only the elevation of a thick water, through the Nervous parts, as far as my Gums. Now my Head is frequently vexed with coldness, as also other outward parts of my body; nor can I longer stand upright, nor endure to lie still; and the right side of my body seems absolutely fallen away and pined.1

This letter was written to Parisian physician Jean Fernel (1497–1558) in 1554, from whom the author sought medical advice. Fernel did not put a name to the condition, but attributed the cause to

A frequent distillation falling upon the Muscles, Nerves and Membranes… whereto is added a weakness of your Body, by reaction of the ill Constitution of your Stomach and bowels.2

The man’s condition was evidently sorely distressing. Illness, apart from possibly causing pain, could prevent a patient from continuing what they considered to be their normal lifestyle. The degree of emotional response to such deprivations would have depended upon the nature of the disability involved and the individual’s expectations. For instance, the situation of Fernel’s patient

1 Johannes Fernelius, Select Medicinal Counsels… Being pick’d and chosen out of four hundred consultations and advices, etc., trans. Nicholas Culpeper (London, 1658), 344.
2 Fernelius, Select Medicinal Counsels, 344.
was different in degree to the case of a cleric who became aware of the extent to which his sight had become impaired when he found himself unable to read the Church offices. Nonetheless, he also was emotionally affected. These are examples drawn from the extensive French language records of correspondence between patients and physicians in the early modern period.

The provision of written medical advice developed in the late Middle Ages. Early on, written advice (consilia) that was provided to a patient resulted from face-to-face medical encounters with a physician, particularly those associated with the leading medical schools. The practice spread from northern Italy into France, Switzerland, the German states and the British Isles. A further development of this process was for written advice, the consultation, to be provided without the physician seeing the patient, but rather in response to a written request from either the patient or another physician. This method of obtaining medical advice peaked in the eighteenth century. Substantial numbers of consilia and consultations have been the subject of historical analysis, particularly over the past twenty years, and historians have used such resources for a variety of purposes. Laurence Brockliss and Lisa Smith have examined epistolary consultations to exemplify the day-to-day practices of individual physicians. Swiss historians have mined the extensive records of Samuel Auguste André David Tissot (1728–97) to elucidate the relationship between patient and physician. Joël Coste has drawn attention to the role of rhetoric employed by French physicians in such correspondence when making diagnoses. It would

8 Joël Coste, “La rhetorique des consilia et consultations (France milieu XVIe siècle –début XIXe siècle),” in *La Rhétorique médicale à travers les siècles: actes du colloque international de*