Tradition as the Genealogy of Truth
Hippocrates and Boerhaave between assimilation, variation and deviation*

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Toutes les sciences ont leur chimère, après laquelle elles courent, sans
la pouvoir attraper; mais elles attrapent en chemin d’autres
connaissances fort utiles.
Bernard le Bovier de Fontenelle, *Dialogues des morts: Entre Artemise
et Raimond Lulle*

Summary

It is a matter of fact that rarely in the history of modern medicine has a
physician gained such immediate and universal fame, and rarely has his
contribution to medical knowledge and teaching been so promptly and almost
unanimously recognized as a fundamental and, so to speak, a foundational one,
as in the case of Boerhaave. In fact, the contribution he gave to provide
medicine with a ‘scientific’ framework, and medical teaching with solid
methodological bases, proved decisive. Otherwise, his appraisal of the
Ancients (and especially of Hippocrates) and his will to refer to Hippocrates as
a model for medical teaching were proverbial. Taking the corpus of his
orations as a point of reference, I will thus try to elucidate 1) Boerhaave’s
main focus and theoretical goals; 2) the argumentative and methodological
strategies he adopted in order to achieve them; 3) the position that the key-
concept of ‘tradition’, the figure of Hippocrates, and the notion of
‘Hippocratism’ hold within these strategies.

Introduction

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physician gained such immediate and universal fame, and rarely has his
contribution to medical knowledge been so promptly and almost
unanimously recognized as a fundamental and, so to speak, a foundational one, as in the case of Boerhaave. It suffices to recall the emphatic exclamation with which Albert Schultens praised the death of his intimate friend in Boerhaave’s funeral oration: *Non finitus est Boerhaavius noster, neque unquam finietur,¹* the words with which Haller, who was the most famous and certainly the most gifted of Boerhaave’s pupils, set forth that ‘perhaps coming ages will bring forth someone equal to him in view of genius and erudition, but hardly of such character’,² or, in even more recent times, the opinion of an influential historian like Guthrie, according to whom Boerhaave was ‘the greatest physician and medical teacher of his time’.³ In fact, scholarly portraits of Boerhaave never fail to refer to these two aspects of his personality.⁴ On the one hand, we know that his activity as a practitioner was untiring, which has led a scholar like Dankmeijer to remark that ‘in his time Boerhaave stood as a solitary figure, solitary because he was one of the very few who took the study and treatment of the sick as his main objective’.⁵ On the other hand, it is well known that Boerhaave’s ability to teach attracted a number of students from the most diverse countries to the already renown Medical Faculty of the University of Leiden and soon became proverbial enough to win him the appellative of *Europae communis praeceptor.*⁶ This zealous ability,

¹ Schultens (1738).
³ Guthrie (1945).
⁴ See, for instance, King (1965) 3: ‘In the first half of the eighteenth century Herman Boerhaave was unquestionably Europe’s greatest physician […] He was, to be sure, an outstanding clinician and teacher…’.
⁶ Lindeboom (1970b) 36, affirms that ‘Indeed, Boerhaave was first of all a teacher’. See also Lindeboom (1968) 362-373, Vriend-Vermeer (1963). It is not a matter of surprise, therefore, that the appellative of *Europae communis praeceptor*, first given to Boerhaave by Haller (cf. Lindeboom (1968, 355), has been used by modern scholars as well. In fact, the use made of this appellative has been so massive and indiscriminate as to change it into a commonplace of scholarship as well as into a sort of label distinctive of Boerhaave and accepted (often uncritically) by the majority: see, by way of example, Wiersinga (2002). The work of reference on the spread and influence of Boerhaave’s teaching, however, remains Underwood (1977) (at least as concerns English-speaking students), but see also Heller (1984) for detailed biographical information on his Swiss students (among those one must count Albrecht von Haller). Otherwise, one cannot fail to notice that the University of Leiden and especially its Medical Faculty had had a well established reputation for a long time before Boerhaave started his teaching activity (see Dankmeijer 1970; Beukers 1987-1988), and also that the intellectual life of Leiden was