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"Doctor She": Women Practicing Medicine in Renaissance England and Their Representation in the Drama of Shakespeare

Abstract: The tradition of herbal writing emerged in England in the mid sixteenth century. To a great, but not always acknowledged, extent herbalism was practised by women. This article presents Hoby's diary and Mildmay's writings which both include hundreds of medical recipes and this, in turn, amply illustrates women's engagement in medical education and practice. Finally, the paper refers to Helena, the main character of *All's Well that Ends Well* to discuss to what extent this character of a female healer represents the world of early modern English female unauthorised practitioners.

Keywords: herbals, medicine, Renaissance, Shakespeare

Early modern England is a time when both literature and science were in a crucial moment of historical formation. Therefore, this period abounds in overlaps between literary and scientific discourses as modes of imaginative writing such as poetics, rhetoric, dramatic production fed on vocabulary, conceptual models and intellectual methods of newly emergent scientific fields such as astronomy, psychology, mathematics or herbalism and medicine. This article is yet another attempt at examining how the myths and practices of medical knowledge were interwoven into popular entertainment on the Early Modern stage. Firstly, it focuses on the lives and writings of two gentlewomen, renowned for their achievements in herbalism and medicine, namely Lady Margaret Hoby (1571-1633) and Lady Grace Mildmay (1552-1620) to finally compare and contrast them with the Shakespearean heroine – Helena from *All's Well That Ends Well.*

The tradition of herbal writing was established in England by William Turner (1508-1568), Henry Lyte (1529-1607), John Gerard (1545-1650) and John Parkinson (1567-1650). However, as Rebecca Laroche aptly remarks, their splendid volumes give little credit to women's practice in herbalism. Only Lady Margaret Hoby and Lady Grace Mildmay are mentioned with regularity which does not reflect at all the extent to which Elizabethan women were involved in herbalism and through that in medical education and practice (8).

In *An Essay to Revive the Ancient Education of Gentlewomen* (1673), Bathsua Makin observed that:

> To buy wooll and Flax, to die scarlet and purple, requires skill in natural philosophy (qtd in. Hunter and Hutton 3)

The same remark may well apply to Renaissance gentlewomen who in order to become competent in housewifeliness had to master basic skills in chemistry and medicine as

those were essential for even the most mundane of duties. The knowledge of those skills came from the books. From 1550s till 1620, there had been a thriving an constantly growing market for texts addressed to women on household science, medicine and pharmacy (Hunter 89). Thomas Tusser, John Partridge, Thomas Dawson, Hugh Plat and Gervase Markham were the five most popular writers, who in their publications offered a combination of medicine, cookery and household science, frequently emphasizing one or two of the aforementioned areas. Lynette Hunter points out to the fact that Hugh Plat's *Delights for Ladies* (1605) containing household and cookery recipes was often bound together with his *A Closet for Ladies and Gentlewomen* (1602) including household receipts and medicine which clearly shows the pressing need for knowledge in each of the areas (95). Since Galenic medicine, which advocated an understanding of the whole body, still dominated the sixteenth-century practice, recipes for food preparation and herbal remedy were indistinguishable as cookery (Hunter 96). Food and diet, on the other hand, were an inextricable part of women's duties in maintaining the health of the household. Therefore, additional medical information was extrapolated from numerous dietary books which appeared in the vernacular English following the publication of Andrew Broorde's *Dietary of Helthe* (1542) (96). There was a well-established tradition of the vernacular medical literature in early modern England. In fact, books in English offering medical advice were plentiful in London's bookshops what in turn encouraged self-medication (Pettigrew 15).

In Tudor times it was common for the gentry to own medical books and after acquiring some medical skills and knowledge to deal with their own health problems. Many gentlewomen of wealthier families regarded it as their duty to become knowledgeable about medicines for various illnesses as well as ways of preparing them, diagnosis, practical skills and quite frequently medical theory. Among such self-taught female physicians we can find Margaret Giggs, Thomas More's foster daughter, who cured him of malaria, More's own daughter Margaret, who married William Roper and was admired at Canterbury for her medical skills, or Francis Bacon's mother (Hoeniger 246-247). Other notable aristocratic women who were renowned for their medical expertise include Lady Lisle, known for her great skill with planting and herbs or Ann Dacre, Lady Arundel noted for her "personal participation in the preparation of remedies" (Hunter 100). Women of the court also got involved in medical practice, Mary Sidney being a case in point. Lynette Hunter after Margaret Hannay, points out to the fact that Sidney in her time was not only known as "practitioner of chemistry" but also as a patron of at least two medical scientists. Additionally Hunter claims that if women of court continued such activities, the function of those practices must have changed. Practicing medicine for women was no longer only limited to "devotional exercises or social responsibility" but also became an intellectual engagement and challenge (101). Linda Pollock argues that it was a combination of "the paucity of licenced practitioners, the availability of vernacular medical treatises and the acceptance of the traditional nurturing skills" that allowed gentlewomen to find an intellectually and functionally satisfying outlet in medicine (2). Aristocratic women, protected by their social status, could practice medicine openly without any retribution from the Royal College of Physicians (Pettigrew 45).

Lady Mildmay's medical papers offer contemporary researchers a great insight into what type of medical care a gentlewoman of early modern England could offer. Grace

Mildmay's writings include observations on all possible aspects of medical treatment. She discussed and described causes and symptoms of diseases together with appropriate treatment that should be applied, even provided detailed information on manufacture of medications (Pollock 2). The scope and extent of Mildmay's engagement in medicine, as Pollock repeatedly underlines, clearly show that there was not much difference between the care offered by the licenced, university educated physician and a self-taught women (2).

Lady Grace was the second daughter of a landowner - Sir Henry Sharington of Lacock Abbey, Wiltshire. Educated at home, she received a strict religious upbringing, learned the different branches of housewifery. She was also given a grounding in medical skills that she later practiced at a large scale as a lady of the manor after her marriage to Anthony, son of Sir Walter Mildmay, a leading Elizabethan politician. Grace Mildmay lived a quiet, humble live of a country gentlewomen far away from the glitter and allurement of the court (Hartley 648). We might have known little if anything about that extraordinary woman were it not for the survival of her private papers which comprise her autobiography, religious meditations and medical papers. Those writings not only provide a reader with an insight into the inner life and practical activities of an Elizabethan lady, but also constitute an invaluable source for the study of the period. Lady Grace left a massive legacy of 85 folios of autobiographical recollections, over 900 folios of spiritual meditations and 250 folios on diseases, medicines and treatments (Pollock 1).

Amongst her autobiographical reminiscences we can find remarks on how she occupied herself throughout the days. Apart from fulfilling all the duties of a housewife, studying religious treatises and playing the lute she also admits to spending:

> some time in the herbal and books of physic and in ministering to one or other by the direction of the best physicians of my acquaintance, and ever God gave a blessing thereunto. (Mildmay 35)

Lady Grace, already in her childhood, received some basic education in medicine. William Turner's *A Newe Herball* and a book on surgery by John of Vigo were on her reading list assigned by her governess. Later on, she became familiar with the works of such medical authorities as Avicenna, Villanova, Da Monte and Paracelsus (Pollock 99). She incorporated all the medical information available but in her practice remained predominantly Galenic. Treating her patients she used the techniques of her time such as cutting, sweating and purges but always, as Galen advised, attended to the patients diet as well as medication (108).

Thanks to her expertise, Grace Mildmay was prepared to cope with a wide spectrum of both mental and physical diseases ranging from: falling sickness, syphilis, convulsions, smallpox, melancholy and madness to weak stomachs and digestive problems (101). However, in contrast to Lady Hoby, she never attempted any surgery, for instance she never removed cataracts although she described them, and she never assisted at childbirth (106, 108).

Lady Grace developed her medical knowledge and skills not only through self-study and experience but also collaborating and exchanging ideas with other practitioners and healers and for that won the acclaim of at least one professional physician, Richard Banister (99, 105). The type of care provided by Lady Mildmay rose far above infrequent

application of household remedies and random collection of medical recipes of dubious nature. Indeed, it did not differ much from that offered by professional physicians. Although the framework of her medical practice was predominantly Galenic, Lady Grace incorporated all medical information available, was up to date with medical treatment and made use of new techniques and medications (107,108).

Lady Margaret Hoby was the only child of a landed gentlemen Arthur Dakins of Linton. She received a general education in the Puritan household of Countess Huntingdon. She was married three times. Firstly to Walter Devereux, the younger brother of Queen Elizabeth's favourite, Earl of Essex, then to Thomas Sidney, brother of the poet Sir Philip Sidney and finally to Sir Thomas Posthumous Hoby. Margaret Hoby is predominantly known as the first English female diarist. Her diary, which is written in a very laconic but informative style, offers its readers an interesting picture of a life of a gentlewoman during Elizabethan period. It is mostly concerned with religious exercises but it also sheds some light on the estate management and proves that Hoby was a competent medical practitioner giving advice and treatment to her neighbours and tenants (Hartley 456).

As Laura Windsor notices, it is difficult to establish the depth of Lady Margaret Hoby's medical knowledge but she herself strongly believed that it was God who was the greatest healer. In her diary Lady Hoby made the following confession:

> I may truly conclude it is the Lord, and not the phisision, who both ordaines the medesine for our health and orderethe the ministering of it for the good of his children. (13)

God "for our health" and "for the good of his children" provided us with medicine. For the benefit of mankind God created the variety of herbs and plants. In this passage she echoes the basic philosophy of any sixteenth century herbal. Let us compare at this stage Lady Margaret's diary with the anonymously published *Grete herbal* of 1525, which informs the readers:

God in his goodness who is creator of all things has ordained, for the sustenance and health of his loving creature (mankind), who is made equally of the four elements and their qualities, and when any of these four […] has more dominion, it constraints the body of man to great infirmities or diseases; for which the eternal God has given of his abundant grace virtues in all manner herbs to cure and heal all manner of sicknesses or infirmities […] befalling him through the influence of these dominant elements and of the corruptions and venomous airs contrary to man's health. (qtd. in Hoeniger 246-247)

On the 30th of January 1599, Lady Hoby noted in her diary that after a private prayer she "dressed apoore boies legge" (58).[1] Since that date numerous entries appear in Hoby's diary where she mentions that she "dressed the sores" (58). Mary Fissel argues that lady Margaret had "a substantial healing practice, especially in surgery" (158). When one of her servants cut his foot with a hatchet, Margaret Hoby attended him the same day and changed the dressing for the ten consecutive days. Further, from the entry recorded under the date of 26th of June 1601 we learn that Lady Hoby had a child brought to examine

1 It needs to be remembered that lady Hoby is dating her diary according to the English calendar of the time.

> who had no fundament, and had no passage for excrements but att the Mouth: I was earnestly intreated to Cutt the place to se if any passhage Could be made, but, although I Cutt deepe and searched, there was none to be found. (161)

Margaret Hoby changed dressings, applied a variety of ointments and even performed surgical operations. It clearly shows the extent of her healing practice which definitely resembled that of the then contemporary surgeons. She not only used her medical knowledge for the good of the local community but also made efforts to expand it. Reading herbals, which she frequently mentioned, was part of her everyday life routine.

As Joanna Moody establishes, Lady Hoby not only could have been reading John Gerard's *Herball* (1597), a momentous folio consisting of 1,392 pages of text and illustrations but also could have visited his gardens. John Gerard superintended the gardens of William Cecil, 1st Baron Burghley to whom Lady Margaret's husband was related (46). In addition, Margaret Hoby ran her own herb garden at Hackness estate and shared the fruits of her work with the local people (145).

Hoby used neither exotic nor expensive ingredients just those that would fit the domestic circumstances of middling sorts and their betters. And so for swellings she applied an ointment that was made from sheep's suet and herbs such as: sage, rue and bay leaves (107). The medicine that she recommended for "any manner of aching sores" included wild celery, sorrel mixed with honey and egg white. A mixture of sage, rue and houseleek was used to prepare compresses for wounds that were hard to heal (108).

In 1631, Richard Brathwaite authored a conduct manual entitled *English Gentlewomen*. According to him, the perfect English gentlewoman should be "not only chaste, modest and honourable but also an avid reader" (qtd in. Leong 561-562). In fact, Brathwaite specifically recommends English gentlewomen to first peruse herbals and then to deepen their medical knowledge. Margaret Hoby, who had a habit of having herbals read to her, definitely followed his advice.

The involvement and achievements of women in medical practice are best depicted in Shakespeare's play *All's Well that Ends Well* which is believed to have been written around 1604-1605 so it overlaps with the time when Lady Margaret penned down her diary (1599-1605) and was most active with her medical undertakings. As Barbara Traister showed, doctors and healers play few major roles in the drama of Shakespeare but as Shakespeare's career developed he began to show medical practitioners with increasing respect and seriousness. Among twenty-three plays written by the playwright in the Elizabethan period only two contain characters who are physicians or healers. In both cases they are presented as pompous and medically incompetent quacks. In Jacobean period, on the contrary, medical practitioners take stage in seven out of fifteen plays and none of this figures is presented as a comical, laughable character. However, only Helena from *All's Well That Ends Well* an "empiric" and "doctor She" has a leading role and her treatment of the King of France is presented as a "spectacularly, almost miraculously successful" (43).

In the third scene of the first act Helena reveals to the Countess of Rousillon her plan to cure the King of France, and to get as a reward, a husband of her choice. At this stage Helena is already aware of the nature of the health problem that troubles the King (the King suffers from fistula). As an orphaned daughter of Gerard de Narbon, a

once "famous in his profession" (1.1.24) physician at the court of Rousillon, she must fully realize the difficulty of her undertaking. However, nowhere in her passionate response to the Countess does she openly admit having any medical knowledge let alone training. She presents herself merely as a guardian of her father's "prescriptions" and "good receipt".

> I will tell truth, by grace itself I swear.
> You know my father left me some prescriptions
> Of rare and proved effects, such as his reading
> And manifest experience had collected
> For general sovereignty, and that he willed me
> In heedfull'st reservation to bestow them,
> As notes whose faculties inclusive were
> More than they were in note. Amongst the rest,
> There is a remedy, approved, set down,
> To cure the desperate languishings whereof
> The king is rendered lost (1.3.218 - 228)

A closer reading of her words reveals that she is, indeed, well familiar with the world of medicine. Helena in her speeches uses phrases that are characteristic for the medical discourse of that time. She mentions the "general sovereignty" of certain medicines and their "faculties inclusive", she stresses the fact that her father invented the cure for fistula thanks to "his reading and manifest experience" (1.3.220 - 224). And so Helena echoes the Paracelsians favored concept of master medicines of "general sovereignty" with "faculties inclusive" and refers to their pamphlet war with the Galenists where they defended unorthodox medicines and preventive devices as confirmed by "manifest experience" , while Galenists objected to them on the grounds of "manifest reason." David Hoeniger proves in his work *Medicine and Shakespeare in the Renaissance* that Helena herself can't be taken for a Paracelsian because the belief that certain herbs or recipes have "general sovereignty" was old and popular and by no means confined to Paracelsians. [2] Similarly, Shakespeare's audiences would have taken for granted that a good doctor based his practice on both learning and experience (290, 304).

Still, disregarding the whole Paracelsians/Galenists war, the language that Helena uses clearly indicates that she is well familiar with medical problems. Her skills and knowledge were passed down by her father. From the very beginning of the play Shakespeare carefully establishes impeccable reputation of Helena's father, Gerard de Narbon. In the first scene the reader is informed by the Countess about miraculous abilities of the court physician and cannot resist thinking that Helena, his flesh and blood, is also his representative and extension of medical skills.

However, when asked by the Countess, how she "a poor unlearned virgin" would win the trust and credit of the King and convince him to try her remedy she modestly implies that:

2 Hoeniger successfully challenges Richard Stensgaard's claim that by the time Helena departs for Paris, the audience would be ready to associate the heroine with the Paracelsian medical thinking (303-304).

There's something in't,
More than my father's skill, which was the greatest
Of his profession, that his good receipt
Shall for my legacy be sanctified
By th' luckiest stars in heaven: and would your
honour
But give me leave to try success, I'd venture
The well-lost life of mine on his grace's cure
By such a day and hour (1.3.240 – 247).

In this passage, Helena gives the assertion of the sanctified nature of the remedy. It is not her knowledge and skill that will cure the royal patient but divine intervention. She sounds very much like Lady Margaret Hoby who in her diary remarked that it is the Lord who provides medicines for our health.

Why doesn't she disclose her skills and knowledge of the physician? Firstly, showing that she is ready to take up a role that men, traditionally dominant in the learned professions, have assumed they were empowered to do, she would openly challenge the patriarchal society. Secondly, she is the unlicensed empiric, bound to be prosecuted by the College of Physicians of London. If she openly admits her medical skills, she will certainly share the fate of Margaret Kennix, a femal empiric at the court of her majesty queen Elizabeth I. Kennix was found by the college's physicians to be "an outlandish, ignorant, sorry woman" and banned from practice on 22nd of December 1581. Even the support and humble plea of Sir Francis Walsingham, the principle secretary to Elizabeth I, who in a letter to the London College of Physicians clearly indicated that it was "her Highness' pleasure" that the poor woman should be permitted to exercise 'her small Talent' " quietly did not change anything (qtd in Kerwin 93-94). The London College of Physician could do little towards a countess or ladies, such as Lady Hoby and Lady Mildmay, practicing medicine but a low born woman and especially such that showed some efficacy in her trade would definitely have been found an unwelcome competition.

Still, in Shakespeare drama, the most spectacular healing is performed by Helena who would not have received a license from the London College of Physicians. The King's initial response to Helena's offer of medical help is rather brusque and indicates Shakespeare's awareness of the educational, social and political tension between the London College of Physicians and the empirics whom they found contemptible and refused to license.

We thank you, maiden,
But may not be so credulous of cure,
When our most learned doctors leave us, and
The congregated College have concluded
That labouring art can never ransom nature
From her inaidable estate. I say we must not
So stain our judgement or corrupt our hope,
To prostitute our past-cure malady
To empirics, or to dissever so
Our great self and our credit, to esteem
A senseless help, when help past sense we deem (2.1.113-123)

The "learned doctors" have already pronounced their diagnosis. The King is in 'inaidable estate" - the limits of the medicine practiced by the Royal College of Physicians have been reached. It seems pointless if not humiliating, in this situation, to seek the help of the self-taught empiric. Only after Helena disclaims all agency – "of heaven, not me, make an experiment" (2.1.154) and wagers her sexual reputation and her life on "heaven's" success, will the King allow her to intervene, will he accept her "appliance" on his behalf. Helena has no wealth or rank with which she could underwrite her medical practice but she is nevertheless the healer to whom Shakespeare gives the most attention. Although she is neither one of "most learned doctors" nor a member of "the congregated College" she succeeds in healing the King's fistula despite everyone's assumption that it is incurable.

Similarly to Lady Hoby and Lady Mildmay, Helena has a vast medical knowledge and surgical skills which, sadly enough, she can't openly admit because of her low status. Therefore, she pretends to be only a mere tool of divine intervention. To fend off any bitter criticism of female practitioners, both Hoby and Mildmay used an incredibly clever strategy and stressed the religious obligation to utilize talents to their fullest extent in the name of God. Apart from the social status, there is yet another crucial difference between the Shakespearean heroine and the ladies. Margaret Hoby and Grace Mildmay practice medicine because they find it their godly duty to help the sick and needy, which, further, could earn them eternal life, whereas Helena uses her excellent medical skills to get a reward, a husband of her own choice. Nevertheless, Todd Pettigrew's claim that Shakespeare's play makes a bold comment suggesting that female medical practice is of an extreme value still holds true. After all, even the King who firstly dismisses Helena as an "empiric" soon won by her sincerity and eagerness refers to her as "sweet practiser" (2.1.185). This way royal support is given to Helena's practice and by extension to all non-licensed female practitioners.

Works Cited

Field, Catherine. "Sweet Practicer, thy Physic I will try': Helena and her 'Good Receipt' in *All's Well that Ends Well.*" *All's Well That Ends Well. New Critical Essays.* Ed. Gary Waller. New York and London: Routledge, 2007. 194-208.

Fissel, Mary. "Women in healing spaces." *Early Modern Women's Writing.* Ed. Laura Knoppers . Cambridge: CUP, 2009. 153-164.

Furst, Lilian, ed. *Women Healers and Physicians. Climbing a Long Hill.* Lexington: The University Press of Kentucky, 1997.

Hartley, Cathy. *A Historical Dictionary of British Women.* London and New York: Europa Publications, 2003.

Hoeniger, David *Medicine and Shakespeare in the English Renaissance*. Newark: University of Delaware Press; London and Toronto: Associated University Press, 1992.

Hunter, Lynette and Sarah Hutton, eds. *Women, Science and Medicine: Mothers and Sisters of the Royal Society.* Stroud: Sutton, 1997.

Hunter, Lynette. "Women and Domestic Medicine: Lady Experiments, 1570-1620." *Women, Science and Medicine: Mothers and Sisters of the Royal Society.* Eds. Lynette Hunter and Sarah Hutton . Stroud: Sutton, 1997. 89-107.

Jardine, Lisa. "Cultural Confusion and Shakespeare's Learned Heroines: 'These Are Old Paradoxes.'" *Shakespeare Quarterly.* Volume 38. (1987) 1-18.

Kerwin, William. "Where Have You Gone, Margaret Kennix? Seeking the Tradition of Healing Women in English renaissance Drama." *Women Healers and Physicians. Climbing a Long Hill.* Ed. Lilian Furst. Lexington: The University Press of Kentucky, 1997. 93-113.

Knoppers, Laura. *Early Modern Women's Writing.* Cambridge: CUP, 2009.

Laroche, Rebecca. *Medical Authority and Englishwomen's herbals, 1550-1650.* Farnham and Burlington: Ashgate, 2009.

Leech, Clifford. "The Theme of Ambition in *All's Well That Ends Well*" *English Literary History.* Volume 21. Issue 1 (1954) 17-29.

Leong, Elaine. 'Herbals she peruseth': Reading Medicine in Early Modern England" *Renaissance Studies*. Volume 28. Issue 4 (2014) 556-578.

Moody, Joanna ed. *The private life of an Elizabethan lady: the diary of Lady Margaret Hoby 1599-1605.* Stroud: Sutton, 1998.

Moss, Stephanie and Kaara Peterson ed. *Disease, Diagnosis, and Cure on the Early Modern Stage.* Aldershot: Ashgate, 2004.

Pelling, Margaret. "Thoroughly Resented? Older Women and the Medical Role in Early Modern London" in: Hunter, L. and Sarah Hutton (eds.) (1997) *Women, Science and Medicine: Mothers and Sisters of the Royal Society.* Stroud: Sutton. 89-107

Pettigrew, Todd. *Shakespeare and the Practice of Physic.* Newark: University of Delaware Press, 2007.

Pollock, Linda, ed. *With Faith and Physic: The Life of a Tudor Gentlewoman: Lady Grace Mildmay 1552-1620.* London: Collins & Brown, 1993.

Stensgaard, Richard. "*All's Well That Ends Well* and the Galenico-Paracelsian Contorversy" *Renaissance Quarterly.* Volume 25. Issue 2 (1972) 173-188.

Traister, Barbara. "Note Her a Little Farther': Doctors and Healers in the Drama of Shakespeare." *Disease, Diagnosis, and Cure on the Early Modern Stage.* Ed. Stephanie, Moss and Kaara Peterson. Aldershot: Ashgate, 2004. 43-52.

Waller, Gary ed. *All's Well That Ends Well. New Critical Essays.* New York and London: Routledge, 2007.

Windsor, Laura. *Women in Medicine. An Encyclopedia.* Santa Barbara-Oxford: ABC-CLIO, 2002.

Wells, Stanley and Gary Taylor, eds. *The Oxford Shakespeare. The Complete Works*. Oxford: Clarendon Press, 1994.