

Was there a *Querelle des Femmes* in early modern medicine?

¿Hubo una Querella de las Mujeres en la medicina moderna?

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ABSTRACT

Historians have often emphasized the anti-feminist role played by medical argument in the early modern *Querelle des Femmes*. In this article, I argue that this interpretation should be reconsidered. Plenty of evidence suggests that medicine played an important role on the pro-woman side of the *Querelle*, but so far this evidence has been analysed only piecemeal. When we review it together, a different story emerges, one in which proto-feminist arguments appear to be an influential and enduring aspect of early modern medical discourse, related to important new trends in early modern medicine. In this essay, I first look at the transformation of gender roles in humanism, and particularly in medical humanism, as they are indicated by two significant female voices in the *Querelle*, Nicole Liébault and Lucrezia Marinella, both daughters of physicians. I then examine one of the most striking novelties of early modern medicine, the emergence of medical writings on women's diseases, newly addressed, to some extent, to a female public. It is especially in these texts that we find physicians voicing pro-women arguments, so much so that these works should be considered, in my view, as an integral part of the *Querelle*. On the basis of this evidence, I conclude that there was a *Querelle des Femmes* in early modern medicine. Older, scholastic views on women were challenged by some humanist physicians, and this had a profound and enduring impact on early modern medical culture.

Key words: Humanist medicine. *Querelle des Femmes*. Early modern gynecology. Early modern feminism.

RESUMEN

Los historiadores han destacado con frecuencia el papel que desempeñó la argumentación médica en la Querella de las Mujeres, en un sentido antifeminista. En este artículo, sostengo que tal interpretación debería reconsiderarse. Numerosas evidencias sugieren que la medicina desempeñó un papel en el bando favorable a las mujeres en el marco de la Querella, pero hasta ahora esas evidencias tan sólo se han analizado de manera fragmentaria. Cuando se

examinan conjuntamente, lo que emerge es una historia bien distinta, en la que los argumentos profeministas se muestran como un aspecto influyente y perdurable del discurso médico, en relación con importantes tendencias de la medicina moderna. En este artículo, considero en primer lugar la transformación de los roles de género en el humanismo, particularmente en el humanismo médico, tal como indican dos voces femeninas significativas en la Querella, las de Nicole Liébault y Lucrezia Marinella, ambas hijas de médicos. A continuación, examino una de las novedades más llamativas de la medicina moderna, la emergencia de los escritos médicos sobre enfermedades de las mujeres, dirigidos por primera vez, en cierta medida, a un público femenino. Es ante todo en estos textos donde encontramos a médicos que dan voz a argumentos favorables a las mujeres, hasta tal punto de que esas obras deberían considerarse, en mi opinión, como parte integral de la Querella. A partir de esa evidencia, concluyo que existió una Querella de las Mujeres en la medicina moderna. Algunos médicos humanistas desafiaron los argumentos más antiguos, de carácter escolástico, sobre las mujeres, y ello tuvo un impacto profundo y perdurable en la cultura médica moderna.

Palabras clave: Medicina humanista. Querella de las Mujeres. Ginecología moderna. Feminismo moderno.

SUMMARY

1.—A humanist physician speaks up for women. 2.—Physicians' daughters. 3.—Medicine on and for women in the Renaissance. 4.—Renaissance gynecology and the *Querelle des Femmes*.

1.—A humanist physician speaks up for women

In his *Examination of all syrups* (1538), the humanist physician Antonio Musa Brasavola presented a spirited dialogue between himself and an old apothecary. The two spar over an issue that seems to have no direct relation with the medical topic at hand. They heatedly discuss marriage and the treatment of wives, and it is made immediately clear that they hold opposite views.

“OLD APOTHECARY:

When I married, I firmly decided that she was going to say yes to all that I said, and do all that I wanted, whether sane or insane.

BRASAVOLA:

What an amazing and brutal folly! It is this attitude that brings to perdition those poor women who are joined in matrimony with rascals such as you! Don't you understand that there is no woman who doesn't have her proper amount of bile, her own susceptibility that should not be crossed? [...]

OLD APOTHECARY:

Some of the things I ordered her to do she would do, but some others she would not, and in that case I would beat her mercilessly. [...] On the night of our wedding, I laid on the bed a pair of women's trousers and

two sticks. When we were alone in the bedchamber, I threw the trousers on the ground, took up one of the sticks and gave her the other saying: «I want us to fight to decide who is going to wear trousers in this house»; and since she refused to fight [...] I gave her an egregious whipping.

BRASAVOLA:

Oh what an ass you are! A nice first night you gave her! How I wish she had picked up the stick and beat you black and blue as you richly deserved [...]

OLD APOTHECARY:

Once in a while I would order her to do, or agree to, something that was obviously crazy, to try her obedience and submission, so that she'd get used to obey my every word.

BRASAVOLA:

Oh most idiot of all idiots! So you wanted not a wife but a fawning parasite who always said yes to all you said. And tell me, did she obey you in everything eventually?

OLD APOTHECARY:

No. I have never been able, either by threats or blows, to make her do my bidding. There has always been an incessant war between me and this horrendous beast [...]

BRASAVOLA:

But who is the horrendous beast, she or yourself?"¹

The physician speaks up for a new vision of companionate marriage, an ideal drawn from humanist classics such as Erasmus' *Colloquia* and proto-feminist texts like Agrippa of Nettesheim's *On the Excellence and Nobility of Women*². Brasavola condemned in strong terms the brutal treatment of wives by traditional husbands like the old apothecary. Such brutality, the doctor implied, went hand in hand with the narrow habits of mind that the old apothecary personified in medical and pharmaceutical matters. In this text, the humanist physician championed a new attitude to women just as he championed reform and renewal in medicine and therapeutics.

Brasavola's views are evidence of a connection between medical humanism and the Renaissance debate on women that goes under the name of *Querelle des Femmes*. Historians have persuasively shown that the *Querelle* was associated from its beginning with the social phenomenon of humanism, namely, the creation of a new culture outside the monastic institutions, where learning had been confined in the middle ages, and the formation

1. Antonio Musa Brasavola, *Examen omnium syruporum*. Venice: Officina di San Bernardino, 1538, 1r-3v. Translations are mine unless otherwise specified.

2. See Franco Bacchelli, "Medicina, morale e religione: il caso di Antonio Musa Brasavola". *Annali di storia delle Università italiane*, 8 (2004), pp. 93-100, especially pp. 97-98.

of a new type of intellectual—a scholar who rejected celibacy and retreat from the world as the preconditions of the intellectual life. This new notion of culture had momentous consequences for women. It is in the households of some humanist scholars of the Renaissance that we find the first cases of the inclusion of women—daughters more commonly, but also wives occasionally—in the life of learning, the life that in the middle ages had been strongly associated with male celibacy and the establishment of the universities as “a world without women”³.

The connection between the *Querelle* and medical humanism is an intriguing aspect of Renaissance medical culture that has been under investigated so far, though Ian Maclean brought attention to it many years ago in a book that remains fundamental, *The Renaissance Notion of Woman* (1980)⁴. Maclean argued that at the end of the 16th century one can notice a sort of medical version of the *Querelle des Femmes*—a “curious combination of doctors claiming to be Galenists and feminists”, that is, believing “against Aristotle, that men and women are equally perfect in their sex”. “It is possible to argue—he claimed—that there is a feminist movement in medical spheres” in the late 16th century—which is particularly striking when compared to the strong conservatism on gender issues that we find in works of theology of the same period⁵. More recently, other scholars, such as Meredith K. Ray and Monica Bolufer, have brought renewed attention to the medical side of the *Querelle* for Italy and Spain. Ray has highlighted the significance of women’s medical and pharmaceutical knowledge in one of the most important texts of the late Renaissance *Querelle*, Moderata Fonte’s dialogue *Il merito delle donne* (*Women’s Worth*, 1600)⁶. Bolufer pointed out that an 18th-century classic of the *Querelle*, Benito J. Feijóo’s

3. Margaret L. King and Albert Rabil, Jr., eds., *Her Immaculate Hand. Selected Works By and About the Women Humanists of Quattrocento Italy*. Binghamton, N. Y.: Medieval and Renaissance Texts and Studies, 1983; David Noble, *A World Without Women. The Christian Clerical Culture of Western Science*. Oxford: Oxford University Press, 1992; Sarah Gwineth Ross, *The Birth of Feminism. Woman as Intellect in Renaissance Italy and England*. Cambridge, Mass.: Harvard University Press, 2009.

4. Ian Maclean, *The Renaissance Notion of Woman. A Study in the Fortunes of Scholasticism and Medical Science in European Intellectual Life*. Cambridge: Cambridge University Press, 1980, pp. 28-46, republished as “The Notion of Woman in Medicine, Anatomy and Physiology”. In Lorna Hudson, ed., *Feminism and Renaissance Studies*. Oxford: Oxford University Press, 1999, pp. 127-155. See also Anne-Liese Thomasen, “*Historia animalium contra Gynaecia* in der Literatur des Mittelalters”. *Clio Medica*, 15 (1980), pp. 5-23.

5. Maclean, *Renaissance Notion of Woman*, p. 29.

6. Meredith K. Ray, “Prescriptions for Women: Alchemy, Medicine and the Renaissance *Querelle des Femmes*”. In Anke Gilleir, Alicia Montjoy, Susan van Dijk, eds., *Women Writing Back/Writing Women Back*. Leiden: Brill, 2010, pp. 135-62.

Defensa de las mujeres (*Defense of women*, 1726) used medical arguments, drawn from the repertory of early modern medical anti-Scholasticism and anti-Aristotelianism, to rebut the theories that claimed a bodily foundation for women's intellectual inferiority⁷.

For the most part, however, historians have emphasized the anti-feminist role played by medical argument in the *Querelle* —the fact that, as Monica Bolufer puts it, “medicine acted as a witness for the prosecution” in the debate. “Medical arguments —she argues— were generally used in the controversy to support misogynist attitudes about the inferiority and even perniciousness of women”⁸. But was this really the case? It is my belief that this thesis needs to be reconsidered. Plenty of evidence suggests, on the contrary, that medicine played an important role on the pro-woman side of the *Querelle*, but so far this evidence has been analysed only piecemeal. When we review it together, as I'll do in this paper, a different story emerges, one in which proto-feminist arguments appear to be an influential and enduring aspect of early modern medical discourse, related to important new trends in early modern medicine.

In this essay, I will first look at the transformation of gender roles in humanism, and particularly in medical humanism, as they are indicated by two significant female voices in the *Querelle*, Nicole Liébault and Lucrezia Marinella, both daughters of physicians. I will then examine one of the most striking novelties of early modern medicine, the emergence of medical writings on women's diseases, newly addressed, to some extent, to a female public. It is especially in these texts that we find physicians voicing pro-women arguments, so much so that these works should be considered, in my view, as an integral part of the *Querelle*. To answer the question posed in the title of this essay, I will argue that yes, there was a *Querelle des Femmes* in early modern medicine. Older, scholastic views on women were challenged by some humanist physicians, and this had a profound and enduring impact on early modern medical culture.

2.—Physicians' daughters

The *Querelle des Femmes*, the defence of women from conventional misogynistic views, developed in connection with an event that Virginia Woolf described as “of greater significance than the Crusades: the middle-class

7. Mónica Bolufer, “Medicine and the *Querelle des Femmes* in Early Modern Spain”. *Medical History*, 29 (2009), pp. 86-106.

8. Bolufer, “Medicine and the *Querelle*”, p. 87. At most, she finds only “attenuated misogyny” (Bolufer, n. 20).



Cristina de Pizán sentada en una cátedra impartiendo ante un grupo de hombres
Ms Harley 4431, fol. 259v., British Library, London.

woman began to write”⁹. This did not happen for the first time towards the end of the 18th century, as Woolf herself assumed, but much earlier, in the early days of humanism, when women writers like Christine de Pizan and Hélisenne de Crenne¹⁰ in France, or Laura Cereta and Isotta Nogarola¹¹ in Italy, mastered humanist erudition and used it to articulate for the first time a self-conscious vision of women’s role and value in society and culture. These women claimed a share of the treasured heritage of Antiquity. Like their male counterparts, who used classical learning to find alternatives to the narrow mind-set of medieval Scholasticism, they creatively selected from ancient culture those elements that could be used to argue for the advancement of women’s status and the broadening of women’s sphere. The

9. Virginia Woolf, *A Room of One’s Own*, London: The Hogarth Press, 1929, p. 97.

10. Charity Cannon Willard, *Christine de Pizan: Her Life and Works*. New York: Persea Press, 1984; Diane S. Wood, *Hélisenne de Crenne: At the Crossroads of Renaissance Humanism and Feminism*. London: Associated University Presses, 2000.

11. See Margaret L. King, *Humanism, Venice and Women: Essays on the Italian Renaissance*. Burlington, Vt.: Ashgate, 2005.

humanist poet Catherine des Roches, for example, drew on the repertory of classical learning to revive the ancient tale of Agnodice from Higynus's *Fabulae* —the story of an Athenian girl who disguised herself as a man to learn the art of medicine, which was forbidden to women. Catherine des Roches transformed this myth of the ancients into a plea for the right of women to education, to the “glory that comes from serving the Muses, daughters of Memory”¹².

The new access of some women to the intellectual life was made possible by two fundamental shifts in the social history of learning and scholarship. First, the moving of the site of learning from the universities —a world without women— to the princely courts, where women were present as powerful patrons and where they could occasionally carve out a role for themselves among the court literati, as did Christine de Pizan. Differently from the universities and the monasteries, which were based either on the total exclusion of women or on the rigid segregation of the sexes, in the Renaissance courts men and women could to some extent meet and interact in the pursuit of a new culture, aimed at the re-appropriation of the cultural heritage of antiquity.

Another, and perhaps even more important shift, was the transformation of the scholar's profile in relation to family ties. Until the fifteenth century, celibacy was the rule among Christian European scholars (more strongly among philosophers and theologians than lawyers and physicians). An established tradition connected the scholar's identity with the monastic ideal, often flavoured with a strong element of misogyny and contempt for family life. The scholar's social prestige was intimately bound up with the avoidance of the web of reciprocal obligations associated with family responsibilities¹³. In the famous interchange between Abelard and Heloise, reported in Abelard's twelfth-century *Historia calamitatum*, the life of the mind had been defined as completely incompatible with family life. Heloise understood it only too well, prompting her to choose to be “Abelard's whore” rather than his wife, in order not to damage his clerical identity

12. Anne K. Larsen, “Les Dames des Roches” in Katharina M. Wilson, ed., *Women Writers of the Renaissance and Reformation*. Athens: University of Georgia Press, 1987, pp. 250-56. On the reception of the Agnodice story, see Helen King, *The One-Sex Body on Trial: The Classical and Early Modern Evidence*. Burlington, Vt.: Ashgate, 2013, pp. 129-226 (212-15 on Catherine des Roches).

13. Gadi Algazi, “Scholars in Households: Refiguring the Learned Habitus”. *Science in Context*, 16: 1/2 (2003), pp. 9-42; *Idem*, “Habitus, familia und forma vitae: Die Lebensweisen mittelalterlicher Gelehrten in muslimischen, jüdischen und christlichen Gemeinden —vergleichend betrachtet”. In: *Beiträge zur Kulturgeschichte der Gelehrten im späten Mittelalter*, ed. Frank Rexroth, Ostfildern: Thorbecke Verlag, 2010, pp. 185-217.

and career¹⁴. The scholarly persona was by definition not only male, but also unencumbered by duties to women and family.

With humanism, traditional prohibitions against the marriage of scholars started to erode — a process that gained emphasis with the Reformation's rejection of clerical celibacy (but the overall trend had started well before the Reformation). Some humanists tried to do precisely what had been declared impossible, that is, to combine the pursuit of learning and higher knowledge with family life. In a few rare instances, this involved husband and wife jointly cultivating learning within marriage: this is the case of Thomas More's first marriage with Jane Colt (1488-1511) or the relationship of Conrad Peutinger (1465-1547) and Margarete Welser (1481-1552)¹⁵. But the scholarly habitus only very rarely included wives: it was more often transmitted from fathers to daughters: Christine de Pizan had been taught by her father, a medical practitioner, and this is the pattern we find for other women humanists such as, for instance, the Italian Caterina Caldiera and Lucrezia Marinella, or the French Nicole Liébault, all daughters of physicians¹⁶.

Of Caterina (or Catteruzza) Caldiera (d. 1463), we know very little¹⁷. We only know that her father Giovanni, a Venetian physician, personally took care of her education, and even wrote a text to help and encourage

14. *The Letters of Abelard and Heloise*, ed. Betty Radice, London: Penguin, 2003, letter 2: Heloise to Abelard, p. 51.

15. Ursula Hess, "Lateinischer Dialog und gelehrte Partnerschaft: Frauen als humanistische Leitbilder in Deutschland (1500-1550)". In Gisela Brinker-Gabler, ed., *Deutsche Literatur von Frauen*. Munich: Beck, 1988, vol. 1, pp. 113-48. But see also, on the ambiguities of More's view of women's education, A.D. Cousins, "Humanism, Female Education and Myth: Erasmus, Vives and More's *To Candidus*". *Journal of the History of Ideas*, 65, 2 (2004), pp. 213-30. See also Ross, *Birth of Feminism*, pp. 235-275.

16. Much more rarely, as can be expected, do we encounter a matrilineal transmission of the scholarly habitus within the family, as in the exceptional case of les Dames des Roches, Madeleine and Catherine, mother and daughter, both celebrated protagonists of French humanism. Madeleine des Roches (ca. 1520-1587) personally supervised the education of her daughter Catherine, instead of sending her to be educated in a convent, as was customary. See Madeleine and Catherine des Roches, *From Mother and Daughter: Poems, Dialogues and Letters by les Dames des Roches*, ed. and transl. Anne R. Larsen, Chicago: University of Chicago Press, 2006.

17. R. Sabbadini, "Briciole umanistiche, XIII: Caterina Caldiera". *Giornale storico della letteratura italiana*, 43 (1904), p. 245; Juliana Hill Cotton, "Giovanni Caldiera". In *Dizionario biografico degli italiani*. Rome: Istituto dell'Enciclopedia Italiana, 1973, vol. 16, s. v. ; Margaret L. King, *Venetian Ideology and the Reconstruction of Knowledge: Giovanni Caldiera (c. 1400-c. 1474)*, PhD Thesis: Stanford University, 1972; Eadem, *Venetian Humanism in an age of Patrician Dominance*. Princeton: Princeton University Press, 1985, pp. 98-117; King and Rabil, *Her Immaculate Hand*. Introduction, pp. 18-19.

her in her studies, an *Expositio* on the *Disticha Catonis*, a work used for the teaching of Latin¹⁸. He also wrote for her another work, *Concordantiae poetarum, philosophorum et theologorum*, to dissuade her, unconventionally, from abandoning scholarly pursuits to devote herself to the religious life. No work of Caterina herself is extant, though we know from her father that she wrote a *De laudibus sanctorum* (*On the praises of the saints*)¹⁹. We know more about other two physicians' daughters, Nicole Liébault and Lucrezia Marinella, who were important voices in the *Querelle des Femmes*. Nicole Liébault (1542-ca. 1584) was born into a very distinguished family of scholars and printers, the Estienne, pillars of French humanism. She was the daughter of Charles Estienne, physician, anatomist and scholar, the author of *De dissectione partium corporis humani* (1545), one of the most important anatomical texts of the Renaissance²⁰. Nicole married another physician, Jean Liébault, who wrote a book on women's diseases, to which we shall return²¹. Nicole herself authored a long poem on *Les misères de la femme mariée* (*The Woes of the Married Woman*), a spirited indictment of imposed marriages, and a strong condemnation of marriage itself as the legal foundation of women's oppression²². Like many texts of the *Querelle*, Nicole's poem might have been written as a rejoinder to a misogynistic work written in those years by the court poet Philippe Desportes²³.

An even stronger voice in the *Querelle* and a much more complex authorial identity is that of Lucrezia Marinella (1571-1653). Marinella was born in Venice into a medical family: both her father Giovanni and her brother Curzio were humanist physicians. Her father was the author of a

18. The manuscript of Giovanni Caldiera's *Expositio* on the *Disticha Catonis* is held in Modena, Biblioteca Estense, Campori App. 293.

19. See Hill Cotton, "Giovanni Caldiera".

20. See Andrea Carlino, "Plaisir de l'anatomie, plaisir du livre: 'La dissection des parties du corps humain' de Charles Estienne (Paris, 1546)". *Cahiers de l'Association internationale des études françaises*, 55, (2003), pp. 251-74.

21. Jean Liébault, *Trois livres de la santé, fécondité et maladies des femmes*. Paris: Jacques du Puys, 1582. For a partial English translation, with introduction, see François Rousset, Jean Liébault, Jacques Guillemeau, Jacques Duval, and Louis de Serres, *Pregnancy and Birth in Early Modern France: Treatises by Caring Physicians and Surgeons (1581-1625)*, ed. and trans. Valerie Worth-Stylianou, Toronto: University of Toronto Press, 2013, pp. 75-137.

22. See Cathy Yandell, *Raconter le temps. La réflexivité dans Les misères de la femme mariée de Nicole Estienne*. Montreal: Université de Montreal, 1998; Régine Reynolds-Cornell, "Les misères de la femme mariée: another look at Nicole Liébault and a few questions about the woes of the married woman". *Bibliothèque d'Humanisme et Renaissance*, 64: 1 (2002), pp. 37-54.

23. Desportes' s *Stances de mariage* was written in 1578; the exact date of Liébault's *Misères* is not known, but believed to be between 1575 and 1580. So it is an open question whether Liébault wrote against him or he against her. See Reynolds-Cornell, p. 44.

vernacular treatise *Le medicine partendenti alle infermità delle donne* (1563) that he dedicated to “all gentle and honest women”, and which contained much information on how to deal with female and male sexual problems²⁴. Lucrezia was the author of many works, and in particular of an ambitious treatise, *Le nobiltà, et eccellenze delle donne: et i diffetti, e mancamenti de gli huomini* (1600), which she dedicated to a Venetian physician, Lucio Scarano²⁵. The title follows that of Agrippa’s *De nobilitate et praecellentia foeminei sexus* (1529), which had been translated into Italian and published in Venice in 1545²⁶. Marinella’s treatise is a pointed rebuttal of a misogynist text that had appeared in Venice in 1599, Giuseppe Passi’s *I donneschi difetti* (*Women’s Defects*)²⁷. It is interesting that another text of the *Querelle* of Venetian background, Moderata Fonte’s *Merito delle donne*, was also printed in the same year 1600 and by the same Venetian publisher. In fact, the publication of both works was probably the initiative of the Accademia Veneziana, an elite cultural association founded in Venice in 1558, of which the physician Lucio Scarano was a member²⁸. The most striking feature

24. Giovanni Marinello, *Le medicine partendenti alle infermità delle donne*. Venice: Francesco de’ Franceschi, 1563. Of the three parts of the book, the first is devoted to “those conditions that may rescind the conjugal bond” and deals with impediments, male or female, to sexual union in matrimony. The second part deals with sterility, and the third with pregnancy and childbirth. Marinello had also published a text on cosmetic medicine, also addressed to women, *Gli ornamenti delle donne* (Venice: Francesco de’ Franceschi, 1562).

25. Lucrezia Marinella, *Le nobiltà, et eccellenze delle donne: et i diffetti, e mancamenti de gli huomin*. Venice: G.B. Ciotti, 1600. A second, augmented version of the treatise was published the following year by the same printer, under the title *La nobiltà et l’eccellenza delle donne co’ diffetti et mancamenti de gli huomini* (Venice: Ciotti, 1601). A third edition followed, again with the publisher Ciotti, in 1621. See the English translation, *The nobility and excellence of women and the defects and vices of men*, ed. and transl. A. Dunhill, intr. L. Panizza, Chicago: Chicago University Press, 1999. For biographical and bibliographical information, see the entry by Paolo Zaja in *Dizionario biografico degli italiani*. Rome, 2007, vol. 70, s. v. “Marinella Lucrezia”. See also S. Kolsky, “The literary career of Lucrezia Marinella (1571-1653)”, in *Rituals, Images, and Words: Varieties of Cultural Expression in late medieval and early modern Europe*, ed. F.W. Kent and Ch. Zika, Turnhout: Brepols, 2005, pp. 325-342.

26. Agrippa’s text was translated by L. Domenichi in 1545 for the printing press of G. Giolito de’ Ferrari.

27. Giuseppe Passi, *I donneschi difetti*. Venice: G.A. Somasco, 1599. See S. Kolski, “Moderata Fonte, Letizia Marinella, Giuseppe Passi: an early seventeenth-century feminist controversy”. In *The Modern Language Review*, 91 (2001), pp. 973-989.

28. On this Academy, see Lina Bolzoni, “L’Accademia Veneziana: splendore e decadenza di una utopia enciclopedica”. In *Università, Accademie e Società scientifiche in Italia e in Germania dal Cinquecento al Settecento*, ed. L. Boehm and E. Raimondi, Bologna: Il Mulino, 1981, pp. 117-167; Eadem, *The Gallery of Memory: literary and iconographic Models in the Age of the Printing Press*. Toronto: University of Toronto Press, 2001, pp. 3-22.

of Marinella's treatise is her strong indictment of Aristotelian philosophy, which she saw as the *fons et origo* of scholarly misogyny. Anti-Aristotelian polemic was in fact a staple of the filo-feminist argument in the *Querelle*, especially when stemming from medical circles, as we shall see.

3.—*Medicine on and for women in the Renaissance*

When Nicole Liébault and Lucrezia Marinella wrote their contributions to the *Querelle*, important changes were happening in the attitude of physicians to women's health issues. Two big novelties, in fact, mark the history of women's medicine in the Renaissance:

- 1) First, the emergence of obstetrical writing in the vernacular addressed to literate midwives, as has been documented by Monica Green and Valerie Worth-Stylianou²⁹.
- 2) Second, the development of an extensive specialized literature on women's diseases³⁰. We thus see, in parallel, the first production of medical texts written specifically for women, and the rapid growth of a new literature focused on female health concerns. Of these two trends, I will examine here the second, which is strongly related to the *Querelle des Femmes*, as we shall see.

Sixteenth-century medical literature presents ample evidence of a new, strong interest in women's diseases. This interest is well attested by the growing number of works on gynecological subjects that were published in this period. Not only did physicians rediscover, comment and lecture upon the ancient works on women's conditions, they also wrote a variety of

29. Valerie Worth-Stylianou, *Les Traités d'obstétrique en langue française au seuil de la modernité: bibliographie critique des «Divers Travailleurs» d'Euchaire Rösslin (1536) à l'«Apologie de Louyse Bourgeois sage femme» (1627)*. Geneva: Droz, 2007; Monica Green, *Making Women's Medicine Masculine: The Rise of Male Authority in Pre-Modern Gynecology*. Oxford: Oxford University Press, 2008, pp. 267-273. On the rise of a medical literature for female readers, see also Montserrat Cabré, "From a Master to a Laywoman: A Feminine Manual of Self-Help". *Dynamis*, 20 (2000), pp. 371-393.

30. Both trends have been examined in detail by Monica Green in her fundamental book *Making Women's Medicine Masculine*, pp. 246-287. For a general overview on women and medicine in the early modern period, see also Leigh Whaley, *Women and the Practice of Medical Care in Early Modern Europe, 1400-1800*. London: Palgrave, 2011.

texts on a topic variously labeled as *muliebria*, or *morbi muliebres*, which emerged as a distinctive subfield of medical inquiry³¹.

In the early 16th century, a decisive impulse to this trend came from the rediscovery of the Hippocratic gynecological works, most of which had been unavailable to Western readers for over 1500 years. It was the retrieval and circulation of these texts, poorly preserved and little known in the Middle Ages, that newly solidified the field of “gynecology” as a legitimate area of specialization of medical knowledge. In contrast with the Hippocratic conception of sex difference, the Aristotelian and Galenic views, prevalent in the late Middle Ages, had not emphasized the specificity of women’s bodies. Except for a work on the anatomy of the uterus, Galen never wrote specifically on women’s conditions, so the Galenic tradition did not offer a model for this medical field. A Latin translation of Metrodora’s Hellenistic recipe collection, *On the Diseases and Cures of women*, was misattributed to Galen in a 14th-century manuscript and was carried over to the *Opera Omnia* of Galen printed in 1490. But Galen’s authorship of this work was rejected in the 1530s—an interesting story in itself³². When the whole Hippocratic Corpus was translated into Latin and printed in 1525, the Hippocratic *Diseases of Women*, which had been known only partially in the Middle Ages, was now available in its entirety for the first time. The 1525 edition of the whole Hippocratic corpus in Latin translation was followed a year later by a separate publication of the Hippocratic gynecological works: *Diseases of Women and Nature of Woman*³³. In fact, even before the publication of the Latin version of *Diseases of Women* in 1525, we can see that physicians were very interested in the sections on women’s diseases in the available Hippocratic texts. For instance Ludovico Bonaccioli, in his *Enneas muliebris (Nine books on Women)*, published in Ferrara in 1502, drew

31. Recent historiography on these texts, besides the already quoted works by Monica Green and Valerie Worth-Stylianou at n. 29 above, includes Évelyne Berriot-Salvadore, *Un corps, un destin: la femme dans la médecine de la Renaissance*. Paris: Champion, 1993; Helen King, *Midwifery, Obstetrics and the Rise of Gynecology: The Uses of a Sixteenth-Century Compendium*. Aldershot: Ashgate 2007.

32. On the attribution of Metrodora’s work to Galen, see Green, *Making Women’s Medicine Masculine*, pp. 275-276, n. 88. On Metrodora herself, see M.-H. Congourdeau, “Métrodora et son œuvre”. In *Maladie et société à Byzance*, ed. E. Patlagean, Spoleto: Centro Italiano di Studi sull’Alto Medioevo, 1994, pp. 57-96; Holt N. Parker, “Women Physicians in Greece, Rome, and the Byzantine Empire”. In *Women Physicians and Healers*, ed. Lilian Furst, Lexington: University Press of Kentucky, 1997, pp. 131-150, at pp. 138-140.

33. Hippocrates, *De foeminea natura*, tr. Marco Fabio Calvi, Paris: ex officina Claudii Chevallonii, 1526. On Calvi’s Latin translation, see Helen King, *The Disease of Virgins: Green-Sickness, Chlorosis and the Problems of Puberty*. London: Routledge, 2003, pp. 38-44, 127.

on the sections on women's diseases in the Hippocratic *Aphorisms*³⁴. Most gynecological texts published in the 16th century were heavily influenced by Hippocratic gynecology. Although other ancient authors who had written on women's diseases were rediscovered and read in this period (Rufus of Ephesus, fragments of Soranus, Muscio) none was as influential as the Hippocratic texts³⁵.

The primary source for Renaissance gynecology is a collection of ancient and modern work, *Gynaeciorum libri* (*Books of women's conditions*), edited and published in 1566 by the physician Hans Kaspar Wolf. A second, enlarged edition followed in 1586-8, edited by the physician and naturalist Caspar Bauhin, and a third was produced by another medical doctor, Israel Spach, in 1597³⁶. The collection included Greek, Latin, and Arabic authors, ancient and modern. But the moderns were prevalent; in fact, most of the works included were either written or edited in the 16th century. It is clear that, apart from the rediscovery of ancient texts, a new strong interest in women and their diseases was present in this period. This interest was pan-European: the modern authors in the *Gynaeciorum libri* included a Spaniard (Mercado), the Italians Bonaccioli, Mercuriale, Bottoni and Trincavelli, the German-speaking Platter, Ruf and Bauhin, the French Akakia, de la Roche, Paré, Dubois, Rousset, le Bon, and de la Corde. The publication history of these texts indicates that there was a strong demand for them: Mercuriale, for instance, was published first in the Collection, and again separately a year later (1587)³⁷. Some texts originally written in the vernacular were translated into Latin on purpose to be included in the Collection, as was the case of Rousset's treatise on Cesarean section (first published in French in 1581, and republished in Latin version in the 1586 edition of the *Gynaeciorum libri*)³⁸. The need for revised editions suggests that the field was perceived as undergoing constant expansion and renovation, hence the need for updated version, including novelties. For instance, da Monte and Trincavelli's *consilia*

34. See Green, *Making Women's Medicine Masculine*, p. 276.

35. The only portion of Soranus' *Gynecology* known in the 16th century was a brief excerpt on the anatomy of the genitalia. The fuller text was not recovered until the 19th century. See Green, *Making Women's Medicine Masculine*, pp. 286-287, n. 124.

36. On the history of the *Gynaeciorum libri*, see Helen King, *Midwifery, Obstetrics and the Rise of Gynecology: The Uses of a Sixteenth-Century Compendium*. Aldershot: Ashgate 2007.

37. Girolamo Mercuriale, *De morbis muliebribus praelectiones*. Venice: Felice Valgriso, 1587.

38. See the English translation in *Pregnancy and Birth in Early Modern France: Treatises by Caring Physicians and Surgeons (1581-1625)*, ed. and trans. Valerie Worth-Stylianou, Toronto: University of Toronto Press, 2013, pp. 16-62.

for women patients were added to the 1586 *Gyneciorum* Collection, possibly as a consequence of the new interest in case histories³⁹.

The emergence of “women’s diseases” as a subfield of medical writing is clearly indicated by the constant growth of the number of publications on this topic. In 1591, Israel Spach’s medical bibliography, *Nomenclator scriptorum medicorum*, listed under “*de mulierum morbis*” a total of nineteen texts, of which six were ancient and medieval authors, while thirteen were modern ones (from the sixteenth century)⁴⁰. The third, newly augmented edition of *Gynaeciorum libri* (1597) included a total of sixteen modern works⁴¹. In 1606, the first bibliography specifically dedicated to early modern gynecology, *Pinax autorum qui gynaecia seu muliebra ex instituto scriptis exoluerunt et illustrarunt* (*List of authors who illustrated gynecology with their writings*) by Johann Georg Schenck of Grafenberg included 42 modern authors⁴². Schenck’s compilation gives a clear sense of a field in constant expansion. He listed not only printed texts but also manuscripts, which he hoped would be published, specifying their location in private and public libraries. The trend continued in the following decades, when more works on women’s diseases came out, as we can see from the entry “*Muliebria: mulierum morbis*” in Lipenius’ 1679 medical bibliography⁴³.

The main feature of this literature is the attention to the specificity of the female body in health and disease. The question was debated in Antiquity whether women’s illnesses are specific to them or are just the same as men’s conditions, and this debate was revived in the Renaissance. The ancient

39. Bauhin’s *Libellus variarum historiarum* (a collection of female cases excerpted from various medical texts) was added to the 1597 edition as an appendix to Rousset’s work, which contained many case histories.

40. Israel Spach, *Nomenclator Scriptorum Medicorum*. Frankfurt: Martin Lechler, 1591, pp. 130-32.

41. *Gynaeciorum sive de mulierum tum communibus, tum gravidarum, parientium, et puerperarum affectibus et morbis libri, ... partim nunc primum editi, partim vero denuo recogniti, emendati, necessarijs imaginibus exornati, et optimorum scriptorum autoritatibus illustrati*, ed. Israel Spach, Strasbourg: Lazarus Zetzner, 1597.

42. Johann Georg Schenk von Grafenberg, *Pinax autorum qui gynaecia seu muliebra ex instituto scriptis exoluerunt et illustrarunt*, in Joannes Guenther von Andernach, *Gynaeciorum commentariolus, de gravidarum, parturentium, puerperarum & infantium cura ... Accessit elenchus auctorum in re media cluentium, qui gynaecia scriptis clararunt & illustrarunt*, opera e studio Joan. Georgii Schenkii, Strasbourg: Lazarus Zetzner, 1606. Schenck published his work as an appendix to Guenther’s Commentary on the *Gyneciorum Libri*, whose manuscript he owned. See also Green, *Making Women’s Medicine Masculine*, Appendix 2, “Printed Gynecological and Obstetrical texts, 1474-1600”, pp. 344-357, which lists 87 works, of which the vast majority by late medieval and early modern authors.

43. Martinus Lipenius, *Bibliotheca Realis Medica*. Frankfurt: Johannis Fridericus, 1679, s. v.; Lipenius also included the entries “*Mulierum natura*” and “*Mulierum secreta*”.

Empirics had stressed that women have diseases specific to their sex, while more theoretically oriented physicians, such as Erasistratos and Herophilos, had disagreed⁴⁴. The ancient Empirics, in fact, had remained faithful to a central principle of Hippocratic gynecology, according to which the sexes do not differ only in the genital parts nor are the female genitals an inferior version of the male genitals, like in the Galenic “one-sex” model⁴⁵. For the Hippocratics, sexual difference is pervasive and it affects the whole body. The female flesh differs from male flesh in being more loose-textured and spongy, prone to retain moisture⁴⁶. It would certainly be misleading to speak of a “one-sex body” for the Hippocratic texts, and the same is true for most of the gynecological literature of the Renaissance⁴⁷.

Two points drawn from the Hippocratic corpus are often repeated in this period, both emphasizing the specificity of women’s conditions: first, a passage from *Places in Man* about the womb as “the cause of all diseases of women”⁴⁸. Giovanni Battista da Monte, a professor of medicine at the University of Padua, built on this view in his work *On Uterine Affections* (published posthumously in 1554), arguing that physicians had neglected the significance of the uterus and that a specific focus on this organ was necessary⁴⁹. Second, and even more significant, a passage from *Diseases of Women I*, which stated that “the healing of women’s diseases differs from the healing of men’s diseases”⁵⁰. So the Spanish physician Luis Mercado, in one of the most important sixteenth-century texts on *morbi muliebri*, stated emphatically that women should receive specific treatment: “Physicians commit a sin (*peccant*) when they cure women’s illnesses in the same way

44. As reported by Soranus, *Gynecology*, 3. 1-5, transl. Owsei Temkin, Baltimore: Johns Hopkins University Press, 1956, pp. 128-31.

45. The ‘one-sex’ model was proposed by Thomas Laqueur, *Making Sex: Body and Gender From the Greeks to Freud*. Cambridge, Mass.: Harvard University Press, 1990. The model has been often criticized: see for instance, most lately, Monica Green, “Bodily Essences: Bodies as Categories of Difference”. In Linda Kalof, ed., *A Cultural History of the Human Body, Vol. 2: In the Medieval Age*. New York City: Berg, 2010, pp. 141-162; Heinz-Jürgen Voss, *Making Sex Revisited: Dekonstruktion des Geschlechts aus biologisch-medizinischer Perspektive*. Bielefeld: Transcript, 2010.

46. Helen King, *Hippocrates’ Woman. Reading the Female Body in Ancient Greece*. London: Routledge, 1998.

47. See Helen King, *The One-Sex Body on Trial: The Classical and Early Modern Evidence*. Aldershot: Ashgate, 2013.

48. Hippocrates, *Places in Man*, 47.1: ed. and transl. Paul Potter, in *Hippocrates*, vol. VIII, Cambridge: Harvard University Press, 1995, p. 95.

49. Giovanni Battista da Monte, *Opuscula: de characterismis febrium, quaestio de febre sanguinis, de uterinis affectibus*. Venice, 1554.

50. Hippocrates, *Diseases of Women*, 1. 62, transl. Anne Ellis Hanson. *Signs. A Journal of Women in Culture and Society*, 1 (1975), pp. 567-584.

as those of men. The treatment of women's diseases is very different from that of men's conditions"⁵¹.

Was this an abstract principle or did it actually inform medical treatment? We have extensive and detailed evidence that this was practiced, not just preached. The evidence comes from the collections of case narratives, called *Curationes* and *Observationes*, which started to be published in the second half of the 16th century, and quickly became an important new genre of medical literature⁵². In these collections, physicians reported large numbers of their cases, including the treatment adopted, so these sources offer an invaluable window into the actual medical practice of the period. Since these collections routinely included a considerable number of female cases, they can tell us much about the medical care women asked for and the medical care they received. In the first example of the new genre, *Curationum medicinalium centuriae*, by the Jewish physician Amatus Lusitanus, published in installments between 1551 and 1566, we find seven hundred cases, of which female patients are about 30%⁵³. (I find a similar sex ratio in other case collections of this period, with women being typically about 1/3 of the patients)⁵⁴. This does not mean necessarily that Amatus treated more men than women, because of course his case collection represents a selection of his practice, that is, those cases that he considered most interesting for publication purposes. Amatus seems to have given specific attention to the illnesses of his women patients, taking their gender into account as a relevant category in the understanding and treating of disease. Interestingly, his female cases indicate a wider interest in women's conditions than one limited to their reproductive functions. Among his female cases, non-reproductive

51. Luis Mercado, *De mulierum affectionibus libri quatuor*, Valladolid: D. Fernandez, 1579, which I cite from the 1597 edition of the *Gyneciorum* Collection, p. 807: "Medici peccant mulierum ... velut viriles morbos sanantes. Multum enim differt muliebrum morborum ac virilium curatio".

52. On the rise of medical case literature in this period, see Gianna Pomata, "Sharing Cases: the *Observationes* in Early Modern Medicine", in *Early Science and Medicine*, 15/3 (2010), pp. 193-236.

53. Amatus Lusitanus, *Curationum medicinalium centuriae septem*, Florence, Venice, Lyon, Paris, 1551-1566. Male cases are 495 (70,5%) and female cases are 205 (29,5%). For a detailed analysis of this source, see my forthcoming article, "Female patients in early modern case literature", in Concetta Pennuto, ed. *Santé, maternité et maladies des femmes de l'Antiquité à la Renaissance: les savoirs en dialogue*, Paris: Champion, 2014.

54. That is the case, for instance, also in the following case collections: François Vallerioli, *Observationum medicinalium libri sex*, Lyon: Gryphius, 1573; Martin Ruland the Elder, *Curationum empiricarum et historicarum in certis locis et notis hominibus optimè, riteque probatarum & expectarum centuriae*, Basel: Henricpetrus, 1578-1595.

conditions outnumber reproductive illnesses 60% to 40%⁵⁵. This suggests that he was interested not only in diseases specific to women but also in the varying course that the same disease (for instance, pleuritis, or the French disease) could have in male and female individuals. Such variation in his eyes required different therapies. For instance, relating the cases of husband and wife both affected by the French disease, he specified that the man required bloodletting, while the woman did not. The therapeutic diet he prescribed to each of them was also significantly different. This was not just a consequence of differences in their individual temperament or constitution, but also of gender-related circumstances⁵⁶.

Sixteenth-century case collections clearly show that doctors took gender into account to take care of their female patients⁵⁷. They knew that some diseases are common to men and women, but they were also strongly aware that both women and men suffer from gender-specific conditions⁵⁸. When they organized their case collections by type of disease, women-specific illnesses (*morbi muliebri*) is one of the categories they used. So for instance in one of the most important exemplars of this kind of texts of the late 16th century, Pieter van Foreest's *Observationes et Curationes medicinales* (1180 cases), a whole book (book 28, with 82 cases) is devoted to *morbi muliebri*⁵⁹. It has been noted that late sixteenth-century anatomy indicates

55. 123 to 82, over a total of 205 cases (see n. 53 above).

56. See Amatus Lusitanus, *Curationum medicinalium centuriae septem*, centuria VI: curatio 48; centuria IV: curationes 26, 27.

57. My findings on continental case collections are confirmed by what found by Wendy Churchill in English sources: see her *Female Patients in Early Modern Britain: Gender, Diagnosis and Treatment*. Aldershot: Ashgate, 2012.

58. Mercado, for instance, distinguishes between diseases common to both sexes, such as fevers, and those specific to each sex (*De mulierum affectionibus*, pp. 805-8). He states: "Consimiles etiam uterque sexus patitur affectus ex communi viventium temperamento: nam licet foeminam a viro quodam modo differre temperie dictum sit, cum hoc tamen communi quodam temperamento convenire philosophis omnibus compertum est... Sic febres omnis generis ambobus esse communes evidenter constare arbitror, sicut alios innumeros affectus, quos ex naturae unitate et reliquis in quibus convenire dictum est, illis accidere comperimus" (p. 806). He also argues, however, based on examples from the Hippocratic *Epidemics*, that even when men and women are exposed to the same pathological conditions, the same disease may affect them in different ways: "In libris fere omnibus de morbis vulgaribus plures reperiuntur morborum constitutiones, in quibus longe diversa accidentia viris succrescebant ab iis, quae foeminis accidisse. Lib. 6 Epid. Par. 7. Ex quibus constare censeo, viros sua propria, et peculiaria pati vitia, non solum in iis omnibus, in quibus a foeminis dissidere cognoscimus, sed et in communibus; nam qua ratione sua cuique sanitas est, sua etiam vivendi ratio, eadem proculdubio peculiare morbos obtinere necessum erat" (p. 807).

59. Pieter van Foreest, *Observationum et curationum medicinalium libri XXXII*. Antwerp: Plantin, 1584-1609.

a new attention to the specificity of the female body⁶⁰. The case literature of this period indicates much the same thing for therapeutics.

What motivated these physicians' interest in women's illnesses? The motivations they give are concern for female patients, compassion for their sufferings and a genuine intellectual curiosity for their experience of disease. Most strikingly, we find in this literature evidence of doctors' eager interest in learning from female informants about bodily experience that women only could know about, as for instance the excruciating pain of cracked nipples in breastfeeding, and about remedies for such conditions drawn from female lore. Taddeo Duno, a Swiss humanist physician who published a book on medications for women's diseases culled from ancient and medieval authors (1565), included also a woman among his sources, and carefully detailed the remedy he had learned from her. "Once when I was talking with an honest and pious matron from Locarno, my countrywoman, about the cracks in the nipples that much afflict women who have given birth, she started to tell me of the severity of the pain [they cause] and of a most excellent remedy to prevent this problem"⁶¹. Not only a woman appears here as a trusted source of information, but also, and perhaps even more strikingly, the physician himself seems very attentive to a condition that is exclusively female, showing a high sensitivity to women's pain and discomfort in health problems. The expression of concern for women as patients is central to the distinctive authorial voice adopted by several Renaissance physicians and surgeons who wrote on women's diseases⁶². Some later texts of Renaissance gynaecological literature even adopt the rhetorical

60. On the interest in women's anatomy, see Michael Stolberg, "A Woman Down to her Bones. The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries". *Isis*, 94 (2003), pp. 274-99; Katharine Park, "The Rediscovery of the Clitoris: French Medicine and the Tribade, 1570-1620". In *The Body in Parts: Fantasies of Corporeality in Early Modern Europe*, ed. David Hillmann and Carla Mazzio, New York & London, Routledge, 1997, pp. 171-193, and especially Katharine Park, *Secrets of Women: Gender, Generation, and the Origins of Human Dissection*. New York: Zone Books. 2006.

61. Taddeo Duno, *Mulierum morborum omnis generis remedia, ex Dioscoride, Galeno, Plinio, Barbarisque et Arabibus studiose collecta et disposita*. Strasbourg: Iosias Rihelius, 1565, p. 103: "Cum aliquando apud honestam, et piam matronam Locarnensem, conterraneam meam, de papillarum rimis puerperas plurimum molestantibus, verba facierem, illa et mali magnitudinem et remedium ad id precavendum longe excellentissimum pluribus mihi exponere coepit." For remarkable evidence of a physician's reliance on women informants, see Michael Stolberg, "Learning from the town folks. Academic physicians and urban lay medical culture in the 16th century", paper presented at the conference *Physician, Paper and Polis*, Charité-Universitätsmedizin, Berlin, 25 October, 2013. See also, more in general, Green, *Making Women's Medicine Masculine*, pp. 291-301.

62. Worth-Stylianou, Introduction, in *Pregnancy and Birth in Early Modern France*, pp. XI-XIII.

topos of a critique of medicine from women's viewpoint. For instance, in his attempted summa of gynaecological knowledge, *De universa mulierum medicina* (1603), a lengthy treatise in two volumes on women's "nature" and diseases, the Portuguese doctor of Jewish origin Rodrigo de Castro endorsed women's bitter invective against male doctors, as reported by the ancient physician Soranus: "You write book upon book on the slightest of your afflictions, you fill libraries with heavy volumes, and we meanwhile are tortured with the direst and most grievous pains of which you make not the slightest mention"⁶³. This same invective is cited by the French surgeon Jacques Guillemeau in his obstetrical treatise *De l'heureux accouchement des femmes (On the Safe Delivery of Women, 1609)* as the motivation that spurred him to write his work⁶⁴.

In all likelihood, this declared concern for women had to do with the fact that several of the new gynecological texts, though addressed primarily to male learned readers, were in fact written for female patrons. For example, Ludovico Bonaccioli's *Nine books on Women* (1502) was dedicated to Lucrezia Borgia, duchess of Ferrara⁶⁵. In 1539, another Italian physician, Giovanni Giorgio Biandrata, summarized Bonaccioli's text for Bona Sforza and her daughter Isabella, which gained him the appointment as Bona's personal physician when she became queen of Poland in 1540⁶⁶. In Venice in 1563 Giovanni Marinelli, Lucrezia's father, explicitly dedicated his vernacular treatise on women's diseases to "all gentle and honest women", as we know⁶⁷. In France in the 1550s Guillaume Chrestien translated three learned texts on female physiology and generation for royal female patrons⁶⁸. His vernacularization of Jacques Dubois's *Book on the nature and usefulness of women's menstruation* was dedicated to Diane de Poitiers, mistress of

63. Rodericus a Castro, *De universa mulierum medicina*. Hamburg: Froben, 1603, preface, unpaginated: "Vos de qualibet levissima vestrarum affectionum libros ex libris facientes, bibliothecas voluminibus oneratis, et nostris interea diris ac difficillimis cruciatibus nulla vel exigua mentione facta".

64. See Jacques Guillemeau, *Les oeuvres de chirurgie ... augmentées [...] de plusieurs traictez*, Rouen: Jean Viret, 1649, p. 258; cf. the transl. by Worth-Stylianou, *Pregnancy and Birth in Early Modern France*, pp. 154-219.

65. See Luigi Samoggia, "Lodovico Bonaccioli medico ostetrico di Lucrezia Borgia in Ferrara", in *Atti dell'Accademia dei fisiocritici in Siena*, sezione medico-fisica, 13:1 (1964) pp. 513-31.

66. Giovanni Giorgio Biandrata, *Gynaecorum ex Aristotele et Bonaciolo... noviter excerpta de fecundatione, gravitate, partu et puerperio*. Strasbourg, 1539. On his remarkable career as physician, diplomatist and religious dissenter, see Antonio Rotondó, in *Dizionario Biografico degli Italiani*, Vol. 10, Rome, 1968, s. v.

67. See n. 24 above.

68. Green, *Making Women's Medicine Masculine*, p. 302.

the King of France Henry II. Diane was interested in medical practice and gave advice to the king and queen on matters of fertility⁶⁹. Nicholas de la Roche's *De morbis mulierum curandis* (included in the *Gyneciorum libri* since the 1566 edition) was dedicated to a wealthy gentlewoman and humanist, Catherine d'Amboise, herself an author in the *Querelle*. The text by Brasavola mentioned at the opening of this essay was also dedicated to a woman, Eleonora, daughter of Alfonso d'Este and Lucrezia Borgia, a nun in the Corpus Domini convent in Ferrara⁷⁰. The rise of Renaissance gynecology, as these sources indicate, was fueled not only by a new medical offer of works *on* women, but also by some elite female readers' new demand of medical works *for* women.

4.—Renaissance gynecology and the *Querelle des Femmes*

This new concern and attention for women's health went often hand-in-hand in the medical literature with the rejection of misogynist stereotypes and the challenging of conventional views of female subordination and inferiority. This is where we find a direct link between Renaissance gynecology and the *Querelle des Femmes*. Though deeply entrenched negative views of the female body (the menstrual blood as poison, the uterus as "sewer") are still present, the gynecological texts often mention these misogynist stereotypes only to question and debunk them. We still find, for instance, the old metaphor of the uterus as a "drain, or sewer" to which humors travel from all over the body to be evacuated—an image that goes back to Avicenna. In the *Gyneciorum* collection, authors such as Trincavelli and Mercuriale still use this metaphor⁷¹. But this disparaging view of the uterus is also challenged and refuted. Da Monte's *On Uterine Conditions*, in particular, redefined the uterus as a very important part of the body, where the heart, brain, liver (the three main organs of Galenic physiology) are brought into sympathy with each other, and which affect the natural, animal and vital

69. Helen King, "Engendrer la femme: Jacques Dubois et Diane de Poitiers", in Cathy McClive and Nicole Pellegrin, eds., *Femmes en fleurs, femmes en corps. Sang, santé, sexualités, du Moyen Âge aux Lumières*, Saint-Étienne: Publications de l'Université de Saint-Étienne, 2010, pp. 125-138.

70. On de la Roche's dedication, see King, *Midwifery, Obstetrics and the Rise of Gynecology*, p. 17; on Catherine d'Amboise, see Ariane Bergeron-Foote, *Les Œuvres en prose de Catherine d'Amboise, dame de Lignières (1481-1550)*, thèse de doctorat, École nationale des chartes, 2002. For Brasavola, see *Examen omnium syruporum*, dedication.

71. King, *Midwifery, Obstetrics and the Rise of Gynecology*, p. 55.

faculties. Far from describing it as an inferior organ, Da Monte raised the status of the uterus by making it an object of admiration and eulogy⁷².

Most importantly, the gynecological texts indicate a new distancing from the negative view of woman associated with Aristotelianism (woman as monster, or error of nature), and to some extent even with Galenism, including a challenge to the Galenic homology of the male and female genitalia (uterus = inverted penis, ovaries = testes), which had always been used to stress women's inferiority. Medical arguments against the conventional view of woman's inferiority were present in the *Querelle* already in the book that can be considered the founding text of the genre, Agrippa's *De nobilitate & praecellentia foeminei sexus* (*On the Nobility and Excellence of the Female Sex*, 1509, pub. 1529). In contrast with the Aristotelian image of woman as "an error of nature", Agrippa proposed a new appreciation of the female body as "*miraculum naturae*", a wonder of nature, the masterpiece of nature's virtuosity⁷³. This was indeed a daringly new view, which reversed the conventional assumption of male superiority. Most significantly, using the medical authorities Galen and Avicenna against Aristotle, Agrippa countered the traditional argument that woman contributes only passive matter to the embryo, and has therefore only an inferior role in reproduction. In fact, he argued,

"Nature gave women a higher role than men in procreation, as we can see clearly because only the female semen, as testified by Galen and Avicenna, gives matter and nourishment to the foetus, whereas the man's semen [does that] only minimally, as it enters the foetus only as an accident of the substance"⁷⁴.

For Aristotle, the notion that woman contributed the material element to the embryo, while the male semen provided an exclusively spiritual component, was key to proving the inferiority of woman's role in generation. Agrippa used the same notion to argue exactly the opposite —man does not bring anything material to generation, and therefore his contribution is inferior.

72. See n. 49 above, and Maclean, *Renaissance Notion of Woman*, p. 33; King, *Midwifery, Obstetrics and the Rise of Gynecology*, p. 55.

73. Henricus Cornelius Agrippa, *Declamation on the Nobility and Preminence of the Female sex*, tr. and ed. Albert Rabil, Jr., Chicago: University of Chicago Press, 1996, pp. 59-61.

74. Agrippa, *Declamation*, pp. 56-57: "Galeno et Avicenna testibus, solum muliebne semen est materia & nutrimentum foetus, viri autem minime quod illi quodammodo ut accidens substantiae ingrediatur". It is interesting that this medical reason for woman's superiority (her greater part in generation) was already mentioned by a 15th-century Spanish pioneer of the *Querelle*, Rodríguez de la Cámara, in his *Triunfo de las Doñas*, (ca. 1440). For Rodríguez de la Cámara's influence on Agrippa, see Rabil, Introduction to Agrippa, *Declamation*, p. 19.

Agrippa used an argumentation strategy based on the paradox, the figure of speech that introduces unheard-of ideas by turning the received view upside down. This is a way of arguing that we often find in the *Querelle* of the first half of the 16th century⁷⁵ —a fact that indicates how difficult it must have been to advance new views about women in a context that was still dominated by Scholastic emphasis on the authority principle and the compliance with tradition. The paradox of women's superiority may have been argued by some humanists simply as a way of displaying virtuosity in the art of debate, without real belief in the substance of the argument. Thus for instance the mysterious Italian physician (and probably heretic) Ortensio Lando in his *Paradossi* (1543) amused himself and his readers by arguing that “Woman is more excellent than man” and that “Aristotle was not only an ignoramus but also the most villainous man of his times”⁷⁶. In the latter paradox, it is the doctrine of generation of “that blockhead moron Aristotle” that is singled out, like in Agrippa, as an object of scorn. This may have been tongue in cheek —nothing more than a joke. Some historians have argued that this use of the paradox was just an intellectual game, a display of ingenuity through the elaborate defence of what most people would consider preposterous (that woman is excellent, and that Aristotle was an idiot)⁷⁷. But this reading does not consider that in the Renaissance the paradox was often used to introduce new ideas of serious import: Copernicus's theory, for instance, was initially called a paradox⁷⁸. In any case, the paradox format allowed heterodox ideas to circulate. Lando's *Paradossi* found a wide readership beyond Italy. The French physician and anatomist Charles Estienne, Nicole Liébault's father, successfully adapted it for the

75. On the use of paradox in the *Querelle des Femmes*, see Rosalie Colie, *Paradoxia epidemica. The Renaissance Tradition of Paradox*. Princeton: Princeton University Press, 1966, p. 102 ff.

76. Lando's *Paradossi* was first published in Lyon in 1543. I quote from the second edition: Ortensio Lando, *Paradossi cioe, sententie fuori del comun parere, novellamente venute in luce*, Venice: Arrivabene, 1544, 78v-85v; 94r-95r. See also the modern edition, O. Lando, *Paradossi*, ed. A. Corsaro, Rome: Edizioni di storia e letteratura, 2000. Lando certainly knew Agrippa's *Declamation*, which he had discussed in a previous work, *Forcianaes quaestiones* (1535). Another work of Lando's also related to the *Querelle* is *Lettere di molte valorose donne, nelle quali chiaramente appare né di eloquentia né di dottrina alli huomini inferiori*, Venice: G. Giolito, 1549.

77. For this interpretation, see Jean-Claude Margolin, “Le Paradoxe, pierre de touche des ‘Jocoseria’ humanistes”. In *Le Paradoxe au temps de la Renaissance*, ed. M. T. Jones-Davies, Paris: Touzot, 1982, pp. 59-84.

78. On the paradox as a vehicle of new ideas, see Rosalie Colie, *The Resources of Kind: Genre-Theory in the Renaissance*, ed. Barbara K. Lewalski, Berkeley: Univ. of California Press, p. 308 ff. On the subversive intent of the paradox, See also Maclean, *The Renaissance Notion of Woman*, p. 91.

French public⁷⁹. His paradox XXIV “Pour les Femmes”, corresponding to Lando’s *paradosso* XXV, “That woman is more excellent than man”, inspired in turn a female voice of the *Querelle*, Marie de Romieu⁸⁰.

By the second half of the 16th century, the argument against the Aristotelian-Scholastic view of woman had gained real weight and gravity in medicine. By then, as pointed out by Ian Maclean long ago, most authors of gynaecological texts rejected the Aristotelian / Scholastic view of woman as “imperfect male” and “error of Nature”, replacing it with the idea that both sexes are equally important in reproduction, each being perfect according to its own function. The female sex was no longer thought to be the inferior and incomplete version of the male. Thus the Spanish physician Luis Mercado wrote in 1579:

*“I don’t believe that the female is more imperfect than the male. The perfection of all natural things has to be investigated in relation to Nature’s intention [...]. And considering the goal for which woman has been created, I am led to believe that she is equally as perfect as man”*⁸¹.

In the same years, the Italian Girolamo Mercuriale expressed an identical opinion in his Roman lectures on women’s diseases:

*“I marvel at Aristotle, who said that women and all females are monsters. But if we only consider the importance of women in the propagation of the species [...] as well as the usefulness of women for a good and happy life [...], we clearly see that the female is certainly not a monster, as argued by Aristotle, but on the contrary a primary goal of Nature’s intention”*⁸².

79. Charles Etienne, *Paradoxes, ce sont propos contre la commune opinion*. Paris: Charles Estienne, 1553.

80. Anne R. Larsen, “Paradox and the Praise of Women: from Ortensio Lando and Charles Estienne to Marie de Romieu”. In *The Sixteenth-Century Journal*, 28:3 (1997), pp. 759-74.

81. Luis Mercado, *De mulierum Affectionibus*, Venice: Felice Valgrisi, 1587, 2nd ed., p. 7: “Non existimo foeminam esse viro imperfectiorem. Nam omnis naturalium rerum perfectio (...) ex fine naturae intento quaerenda proculdubio est... Quibus sane rationibus moveor, ut credam, habito respectu ad finem foeminam esse aequae perfectam viro”.

82. Girolamo Mercuriale, *De Morbis Muliebribus Praelectiones*. Venice: Giunta, 1591, 3rd ed., pp. 1-2 (1st ed. 1582). For similar views, see Martinus Akakia, *De morbis muliebribus*, in *Gyneciorum sive de mulierum tum communibus, tum gravidarum, parientium, et puerperarum affectionibus & morbis*, Strasbourg: Zetzner, 1587, p. 745; Rodrigo de Castro, *De universa muliebrium morborum medicina*. Hamburg: Froben, 1603, pp. 126-31; Jean de Varanda, *De morbis et affectibus mulierum*, Lyons: Bartholomeus Vincentius, 1619, p. 2. Cf. Maclean, *Renaissance Notion of Woman*, p. 103, n. 9.

We find these statements in Mercado and Mercuriale's texts on women's diseases, both included in the *Gyneciorum* Collection and both an important contribution to the gynaecological literature of this period.

From the gynaecological texts, this rejection of the Aristotelian view of woman spread to anatomy, a sub-discipline that had newly become over the course of the 16th century a central and dynamic part of medical research. Some years after Mercado and Mercuriale, the Montpellier physician André Du Laurens condemned the Scholastic definition of woman in his *Historia anatomica humani corporis* (*Anatomical Description of the Human Body*, 1593), an influential late-Renaissance anatomical text. Du Laurens minced no words in rejecting the Aristotelian notion of woman as "*primum monstrum naturae, animal mutilum, occasionatum*": "We do not approve of this opinion of Galen and Aristotle. We believe instead that Nature intends to generate both female and male. Saying that woman is an error, or false step, of Nature, is unworthy of a true philosopher—it is a barbarous opinion"⁸³. Du Laurens was also critical of the Galenic homology of the male and female genitalia, and stressed that female anatomy could not be simply constructed by analogy from the anatomy of the male, but it required a "*peculiaris historia*", a specific research and description⁸⁴. What had started as a paradox in the *Querelle* of the first half the 16th century, had become by the late 16th century a serious program of anatomical research on the female body, which would bear fruit, most conspicuously, in a new understanding of women's role in reproduction (ovism) in the 17th century⁸⁵.

The link between the *Querelle* and the gynaecological literature was at its highest in the last decades of the 16th century and the first half of the 17th, when we find texts that can only be defined as hybrids of the two genres—that is to say, texts that combine the treatment of women's health issues with an articulate and passionate defence of women from negative stereotypes. An example of this kind of text is Jean Liébault's *Three Books Dealing with the Infirmities and Illnesses of Women* (1582). Liébault, Nicole's husband, drew considerably on the Italian text by Giovanni Marinello, father of Lucrezia Marinella. It is intriguing that two important authors of the gynaecological literature were personally and intimately related to two of

83. André du Laurens, *Opera anatomica in quibus historia singularum partium accurate describitur*. Frankfurt: Peter Fischer, 1595, 2nd ed. (first ed. 1593), pp. 280-81: "Verum haec Aristotelis & Galeni opinio nobis non probatur. Naturam enim in foeminae, non minus quam maris generationem intendere existimamus, & foeminam Naturae erratum ac prolapsionem dicere, indignum est Philosopho".

84. Du Laurens, *Opera anatomica*, p. 269.

85. Jacques Roger, *Les sciences de la vie dans la pensée française du XVIIIe siècle: la génération des animaux de Descartes à l'Encyclopédie*. Paris: Colin, 1971, pp. 256-93.

the most striking female voices in the *Querelle*. Jean Liébault applied to Marinello's text the same technique of creative translation and adaptation that his father-in-law Charles Estienne had adopted with Lando's *Paradossi*—namely, to take a text composed in a foreign language which had already proved commercially successful, and then translate, revise and extend it, recasting it for a French readership. In fact, Liébault's work is substantially larger and different from Marinello's volume. Whereas Marinello addressed the first edition of his work (1563) to well-born women, and the second (1574) to 'physicians, midwives and well-born ladies', Liébault wrote with a wider audience in mind, including a male lay readership interested in questions of generation and sexuality⁸⁶. His message of defence of women from negative stereotypes and sympathy for their afflictions in childbirth and disease was thus addressed to both sexes. In even stronger terms than Mercado and Mercuriale, Liébault refuted the Aristotelian and Galenist theories of women's innate inferiority, arguing that Nature purposely made women different, and praising the design of the female reproductive anatomy.

Liébault's was one of the most enduringly popular works on this subject in the French language: it was reissued ten times between 1582 and 1674⁸⁷. Another physician,

Lazare Pena, published in 1609 a revised and enlarged edition of Liébault's volume, with a new preface addressed 'to chaste young women', underlining the work's interest for a predominantly female elite readership. Pena went even further than Liébault in his praise of woman as "one of the great miracles of Nature, and a subject in which philosophy finds more to study than in all the other things in creation"⁸⁸. When we follow the transformations of Marinello's original text through its adaptation to the French late 16th and early 17th-century public, first by Liébault and then by Pena, we clearly see that the theme of women's apology acquired more and more prominence and was treated with stronger and stronger fervour.

An even more striking example of this trend is the work of a physician from Lyons, Louis de Serres, *Discours de la nature, causes, signes et curation des empeschemens de la conception et de la sterilité des femmes* (*A Discourse on the Nature, Causes, Signs and Treatment of the Failures to Conceive and Sterility among Women*, 1625). De Serres's arguments that sterility can be equally imputed to men and women, and his strong

86. Worth-Stylianou, Introduction to her translation of Liébault's text, *Pregnancy and Birth in Early Modern France*, pp. 69-71.

87. Cf. the transl. by Worth-Stylianou, *Pregnancy and Birth in Early Modern France*, p. 87.

88. Worth-Stylianou, Introduction to her translation of Liébault's text, *Pregnancy and Birth in Early Modern France*, pp. 66-74.

rebuttal of a long tradition of misogynist stereotypes in legal, political and theological matters are quite impressive. In chapter III of his work, which purports to discuss ‘Whether women who bear only daughters should be called sterile?’, he borrows directly from the *Querelle* literature, engaging in a wide-ranging debate on the equality of women, including their ability to hold temporal power, their share in Christian creation and redemption, and the theological doctrine on their nature in the afterlife. As noted by Valerie Worth-Stylianou, de Serres’ clear affirmation that to bear female children is in no way to be considered a form of sterility is one of the most resounding examples of the proto-feminist voice in early modern medical literature⁸⁹. His text should be considered in all respects as an important contribution to the *Querelle des Femmes*. One more example of the hybridization of the gynecological literature with themes and formats drawn from the *Querelle* is the aptly titled work of the German physician and poet Johann Peter Lotichius, *Gynaecologia, id est de nobilitate et perfectione sexus feminei* (*Gynecology, that is, on the nobility and perfection of the female sex*, 1630), a text originated as a public disputation held at the Academia Rintelana, where the author drew liberally on the pro-women side of the *Querelle*, including medical authorities like André Du Laurens and Rodrigo de Castro⁹⁰.

As we have seen, humanist physicians were prominent among the male authors who contributed to the *Querelle des Femmes* as defenders of the cause of women. We may ask in conclusion: why so? Why were medical men so ready to shake off a long tradition of misogyny and to adopt a new attitude of philogyny in its stead? Some of their motivations we have already seen. They were striving to meet a new demand for better health care by upper-class women and their families, while they were also trying to reach a new reading public interested in issues of sexuality and reproduction. Undoubtedly, they were also courting the favour of women rulers in the competition for patronage. For these physicians as well as for other humanist literati, moreover, the new attitude to women was fostered by the rejection of the old scholarly persona of the medieval cleric, with its appendages of celibacy and misogyny. This fused with another, and possibly even more important reason - the rejection of Scholasticism. The most distinctive trait of the humanists’ defence of women was the attack on Scholastic culture and its philosophical cornerstone, Aristotelianism. From Agrippa of Nettersheim in the early 16th century to Poullain de la Barre

89. Louis de Serres, *Discours de la nature, causes, signes et curation des empeschemens de la conception et de la sterilité des femmes*. Lyons: Antoine Chard, 1625.

90. The book was also published in German in 1644, with a dedication to Hedwige, Landgravine of Hessen.

in the late 17th, anti-Aristotelianism was a long-term feature of the early modern *Querelle des Femmes*.

Medicine was particularly well suited, among humanist disciplines, to take up the gauntlet in the fight against Scholastic Aristotelianism. Aristotelian authority was never as strong in medicine as in other disciplines, such as natural philosophy or theology. Already in the middle ages Galen had been opposed to Aristotle as supreme medical authority over many issues, and especially on the theory of generation. This resistance of medicine to Aristotelian philosophical hegemony was strongly reinforced in the Renaissance by the revival of the Hippocratic tradition. We have seen the profound influence of Hippocratic gynaecology on the 16th-century literature on women's diseases, but the Hippocratic revival was pervasive on most branches of medicine, in particular therapeutics and medical practice. As a medical philosophy, Renaissance Hippocratism differed profoundly from the Aristotelian epistemic framework, and did in fact open the door for the diffusion among early modern doctors of ideas derived from ancient philosophies, such as empiricism and scepticism, which were directly opposed to Aristotelianism, especially in its Scholastic version⁹¹. So it is not surprising to see early modern doctors vigorously attacking Aristotelian opinions, among them the definition of woman as "monster of nature", which became a sort of shorthand for all that was considered Scholastic irrational prejudice. Misogyny and Scholastic Aristotelianism fused in the eyes of humanist physicians into a single object of rejection and scorn.

In the medicine of the late Renaissance, the fortunes of Aristotelian authority were low and subject to frequent challenge. At the end of the 16th century, even a woman was confident enough to attack the greatest philosopher of antiquity. Strong of her humanist education, the Venetian Lucrezia Marinella, daughter and sister of physicians, upbraided Aristotle as the main slanderer of women in her contribution to the *Querelle*, once more a treatise *On the excellence and nobility of women* (1600)⁹². Also significant, in this respect, is the posthumous fame of a book whose connection with the *Querelle* has been only recently highlighted and analysed, Oliva Sabuco's *Nueva filosofia de la naturaleza del hombre* (1587)⁹³. The French iconoclastic

91. See Gianna Pomata, "A Word of the Empirics: The Ancient Concept of Observation and its Recovery in Early Modern Medicine". *Annals of Science*, 65, no. 1 (2011), pp. 1-25.

92. See n. 25 above.

93. See Gianna Pomata, Introduction, in Oliva Sabuco, *The True Medicine*, ed. transl. and intro. Gianna Pomata, Toronto: Center for Reformation and Renaissance Studies, 2010, pp. 62-64; see also Marlen Bidwell-Steiner, *Große Welt - kleine Welt - verkehrte Welt: die philogyne Naturphilosophie der Renaissance-Denkerin Oliva Sabuco de Nantes y Barrera*. Vienna: Studien Verlag, 2009.

N V B V A
FILOSOFIA
 DELA NATVRALEZA
 del hombre, no conocida ni alcançada
 de los grandes filósofos antiguos: la
 qual mejora la vida y salud humana. Com-
 puesta por doña Oliva Sabuco.



Con privilegio,
 En Madrid, por P. Madrigal,
 M. D. LXXXVII

Portada de la *Nueva filosofía del hombre*
 (1587) de Oliva Sabuco.

physician and chemist Étienne de Clave, the co-author of some radically anti-Aristotelian theses that were condemned by the University and the Parlement of Paris in 1624, mentioned Oliva Sabuco in his *Paradoxes, ou Traités philosophiques des Pierres et Pierreries* (1635) listing her, interestingly, next to the most prominent 16th- and early 17th-century opponents of Aristotle (Francesco Patrizi, Sébastien Basson, Tommaso Campanella and Pierre Gassendi). “This learned Spanish woman Dona Catharina Oliva—he wrote—refutes him [Aristotle] on several topics, to the point of calling some opinions Aristotelian nonsense (*badineries Aristoteliques*)”⁹⁴. For their contemporaries, Lucrezia Marinella and Oliva Sabuco were definitely part of the anti-Aristotelian camp.

The most enduring contribution of Renaissance medical humanism to the long-term history of feminism may well have been the association of a negative view of women with the irrational prejudice and blind obedience to authority attributed to the Aristotelian-Scholastic mind-set. In 1674 the Cartesian philosopher and feminist Poullain de la Barre, arguing for the mental equality of the sexes and for women’s right to education, candidly confessed that, as an ex-Jesuit, he had to shake off a lot of Scholastic baggage before he could adopt a rational view of women. “When I was a Scholastic, I considered [women] scholastically, that is to say, as monsters, as

94. Étienne de Clave, *Paradoxes, ou Traités philosophiques des pierres et pierreries, contre l’opinion vulgaire*, Paris: chez la veuve Pierre Chevalier, 1635, p. 186. On de Clave’s anti-Aristotelian theses, see Didier Kahn, “Entre atomisme, alchimie et théologie: la réception des thèses d’Antoine de Villon et Étienne de Clave contre Aristote, Paracelse et les ‘cabalistes’ (24-25 août 1624)”. *Annals of Science*, 58 (2001) pp. 241-86. See Pomata, Introduction, in Oliva Sabuco, *The True Medicine*, pp. 72-73.

beings inferior to men, because Aristotle and some theologians whom I had read, considered them so”⁹⁵. The inequality of the sexes, Poullain stressed, was simply a prejudice —“of all prejudices, the most remarkable”— an irrational belief that the true philosopher was bound in honour to confute and combat wherever he met it. We find this conviction, based on the same mix of anti-Aristotelian and proto-feminist themes, in the *Defensa de las mujeres* (1726) by the Spanish Enlightenment author Benito J. Feijóo, as Monica Bolufer has shown. Feijóo was the friend of the neo-Hippocratic physician Martín Martínez, who championed the ideas of Oliva Sabuco and reissued an abridged version of her work⁹⁶. From the Renaissance to the Enlightenment, we find over and over again that medical culture was an important vehicle of the defence of women in the *Querelle des Femmes*. Renaissance medicine strongly contributed to the view of misogyny as irrational prejudice —a view that was going to be a lasting legacy of the early modern *Querelle* to the feminism of later centuries.

95. François Poullain de la Barre, *De l'éducation des dames pour la conduite de l'esprit dans les sciences et dans les moeurs*. Paris: Jean Du Puis, 1674, pp. 327, pp. 331-34. Poullain's *De l'égalité des deux sexes* (1673), a fundamental text of the *Querelle*, was translated into English as *The Woman as Good as Man, or the Equality of Both Sexes*, London: N. Brooks, 1677.

96. On Martínez, Feijóo and Sabuco, see Pomata, Introduction, in Oliva Sabuco, *The True Medicine*, pp. 65-68.