

THE CHANGING POSITION OF THE SERVING BROTHERS  
AND THEIR CARITATIVE FUNCTIONS IN THE ORDER OF  
ST JOHN

IN JERUSALEM AND ACRE, ca 1070-1291

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## **An Abstract**

Study of the serving brothers of the Order of St John and of the way in which the original idealism of their hostel in Jerusalem was altered by forces of change has been neglected. The ultimate result of these forces was to change the main ideology of the brotherhood into an organisation which was dominated by knights and their desire to defend the Catholic Faith and the Crusader states. The importance of the original brothers and their position within the growth of the Order of St John changed. They became second class citizens in their own Order and this has been largely overlooked.

In order to appreciate how this development took place it is necessary to trace the changing circumstances of the serving brothers within the various stages of the history of the Order and the way these affected their caritative service to pilgrims, the poor and the sick. The purpose and ideals which formulated the Hospice of St Mary of the Latins are the essential beginnings of such a study.

Following the capture of Jerusalem by the Crusaders in 1099, the Hospice launched into a different phase of its history. The number of poor sick pilgrims visiting Jerusalem and being accommodated in the hospice or hospital, eventually forced the Hospital to become independent from its mother monastery. However, this became possible only after Pope Paschal II settled the problems of church and state experienced in the early years of the Kingdom.

## **An Appreciation**

It is with deep gratitude and heartfelt thanks that I acknowledge my indebtedness to the Centre for Medieval Studies of the University of Sydney, for the guidance and help that has been afforded to me over the past years. The consideration given to me over my serious illness and the twelve months recuperation period, which followed was much appreciated. In this regard my thanks are due to Professor M. Clunies Ross for her patience and understanding as well as her encouragement and advice.

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## TABLE OF CONTENTS

	Page
Preface	i
An Appreciation	ii
Table of Contents	iii
Abstract	iv
Introduction	vii
Chapter 1	1
Chapter 2	40
Chapter 3	72
Chapter 4	97
Chapter 5	120
Chapter 6	144
Chapter 7	165
Chapter 8	183
Chapter 9	209
Chapter 10	234
Chapter 11	258
Chapter 12	296
Conclusion	321
Bibliography	334

## **An Abstract**

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In order to appreciate how this development took place it is necessary to trace the changing circumstances of the serving brothers within the various stages of the history of the Order and the way these affected their caritative service to pilgrims, the poor and the sick. The purpose and ideals which formulated the Hospice of St Mary of the Latins are the essential beginnings of such a study.

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## Introduction

From the time the Order of St John became dominated by its military wing little attention has been given to the original reason for the foundation of the Order. The fact that without the idealism and contribution of the Order before the advent of the knights the later history would not have taken place, has largely been ignored. A great deal of research and writing has concentrated on the knights; however, the nursing and medical contribution of the brethren has slipped into a very definite second place.

This emphasis on the knights of the Order has resulted in a failure to appreciate fully the contribution made by the brothers in their Hospitals in Jerusalem and Acre. Despite the complicated events of the two hundred years or so of the Order in the Holy Land, the work of a ministry to destitute pilgrims and the poor was maintained throughout this period with only a short interval in the middle. The fall of Jerusalem caused a period of insecurity for the work until Acre was recaptured and its Hospital re-established.

In order to understand the organisation of the work of the Hospital it is necessary to delve into the evolution of its charitable endeavours. A difficulty arises however in trying to identify those brethren who spent most of their time in running a service for pilgrims. This was because in the first half of the twelfth century the Order was made up not only of brothers, some of whom became military brethren, but also of others who spent most of their time in some kind of service within the Hospital.

Early in the second half of the century the Pope gave permission for the Order to include priests among the brethren. These were accepted, although not granted privileges. As time passed the number of military

brethren increased and they became isolated in part from the work within the Hospital. Early in the history of the Hospital and at various times most of the brothers assisted in the actual work of nursing. However some military brethren were stationed in *casales*, areas of land with houses and villagers, or at outposts within the Crusader states. When the Hospital was separated from St Mary of the Latins, its mother-monastery, the work of the Hospital increased and the brother in charge assumed a larger responsibility and importance in the Kingdom.

As the military brethren became more involved outside the Hospital, the brethren serving at home became specialists in their work. The term 'serving brothers', is here understood to refer to those brethren who spent most of their time nursing in the Hospital, or working at other duties. Only after the Statutes of Alphonso were composed in 1206 were the military brethren termed Knights of the Order and a clear distinction made between them and other brethren.

In the past, scholars have not approached the Order from the point of view of the changing position and ministry of the serving brothers to the poor and pilgrims. E. J. King exemplified this neglect when he wrote, long ago now, that those who actually served within the Hospital should "scarcely be regarded as properly speaking members of the Order".<sup>1</sup> He was drawing attention to the opinion of Abbé de Vertot who, referring to later Statutes, thought that those who were servants of office for common drudgery were of so little consequence that it was not proper to trouble the reader with them.<sup>2</sup>

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<sup>1</sup> King, *Knights Hospitaller*, pp. 71-72.

<sup>2</sup> Abbé de Vertot, *Histoire des Chevaliers Hospitaliers de St Jean de Jérusalem* (Paris, 1842).

Contrary to this, the actual ministry within the Hospitals at Jerusalem and Acre was most important from the points of view of charity, medical expertise, and also the history of the Order. The foundation bulls, letters and Statutes have a very different emphasis on the achievements of those brethren who established the original Order and who carried on their responsibilities despite difficulties and opposition.

To give due consideration to what may be termed the inner working of the Hospital in both Jerusalem and in Acre, it is necessary to place the evidence available within the overall history of its existence in the Holy Land. This will apply mostly to the Jerusalem Hospital, which was the centre of the Order and in many ways the pattern of operation for that in Acre. The thesis will begin with the original purpose of the Jerusalem Hospital and trace its progress through the various stages of change up to the Crusaders leaving Acre.

The most reliable sources point to arrangements made by Amalfitan merchants for the establishment or re-establishment of a hostel within the city of Jerusalem. At first this was to accommodate the visits of their people to the holy shrines associated with Christ. After the arrival of the Crusaders the hospice further prospered from an influx of poor pilgrims, although for some years there was little peace between the Church and Secular powers in Jerusalem and the kingdom.

There followed a period in which the work of the hospice, come hospital, was supported greatly both by the papacy and grateful returning pilgrims. When it became wealthy and independent, it began to support outside endeavours and under Raymond du Puy it acquired its own Rule and



some military brethren. The composition of the Rule of Raymond presents problems in trying to analyse its source materials and whether it was influenced by prior or contemporary monastic rules. Other rules may possibly have provided patterns for the organisation of the hostel, which by that time was taking on the nature of a hospital.

As the twelfth century moved on, the internal structure of the Hospital came under stress through near insolvency and this resulted in an organisational conflict which affected both the non-military brothers and the military brothers themselves. Despite this situation the actual work of the Hospital was strengthened and the ministrations to the poor and sick pilgrims continued unabated. The medical attention given to the destitute and ill, as well as to those injured in battle, became more specialised with the appointment of medical doctors. The physicians and surgeons were not members of the Order but were ably assisted by serving brothers and their servants. This work was later continued in the Acre Hospital.

One of the most important sources of information for the Hospitallers in the kingdom of Jerusalem is the Chronicle of William of Tyre. This is supplemented by such authors as James of Vitry, John of Wurzburg, Theodoricus, John of Salisbury, Walter Map and the Unknown Pilgrim to Jerusalem. The *Cartulaire* of Delaville le Roulx, however has been the centre and main source of the information.

Of the general histories of the Order, the volumes of E. J. King stimulated further books, articles, and chapters of books, on various aspects of the history of the Order of St John. However, neither the works of King, nor

those of Riley-Smith, concentrated on the fortunes and difficulties of the serving brothers and their caritative functions for the Order.

T. S. Miller has spent more time on the subject of the actual hospital work of the Order in Jerusalem. Others who have been useful and valuable have been Edgington, Luttrell, Hiestand, Richard and Risse. To this list could be added others, including Frings, Meffert, Kristeller, Jouanna and Wershub, who have assisted in building up a more complete picture of the hospital and medical work.

The aim of this thesis is to examine afresh and in depth the contribution of the serving brothers to the existence and well being of the Hospitals in Jerusalem and Acre. In doing so, it has been necessary to trace the internal and external history of the Hospital over the approximate two hundred years of its existence, and to examine some of the history and make up of the Order of St John.

Debate has centred on such topics as whether the Hospitallers developed from the Benedictine or the Augustinian Orders, the sources of the ideas found in the Rule of Raymond du Puy, and whether the Hospital was a nursing home only, or rather a medical institution. The serving brothers need to be given their rightful place in the important work of caring for the poor and pilgrims as well as the organisation of the medical and social ministry for which they became famous.

## Chapter 1

### Important Sources and Authors

There has been in the past a neglect of the contribution and history of those brothers who concentrated on a caritative ministry within the Order of St John. In this regard it has been necessary to demonstrate this aspect of the Hospitallers, by first considering the various scholars who have written about the serving brothers of the Order, and their various interests in its history. This will illustrate, how the serving brothers have been given no credit for their achievements, and no appreciation expressed of the way they lost control of the Order to the knights.

By this means there will be shown areas within the history of the Order which have been totally or partially neglected in the past. These include topics such as; the influence of St Mary of the Latins over its hostel; a serious examination of the Hospitallers' origins; the possible reaction of the serving brothers to warfare; the work of Piers Mitchell in archaeological medicine and the way in which the Hospital and its medical standards compared with Eastern Hippocratic medicine.

The primary sources for the history of the serving brothers and their caritative work within the larger history of the Order of St John are limited. They include the *Cartulaire* of Delaville le Roulx, the *Chronicon* of William of Tyre, the *Historia occidentalis* of Jacques de Vitry and a history of the Order of St John by William of St Stephano. There is also some primary evidence in documentation from pilgrims to Jerusalem such as John of Würzburg, Theodericus and an Unknown Pilgrim.

Of the primary sources, the monumental *Cartulaire général de l'Ordre des Hospitaliers de St Jean de Jérusalem* of Delaville le Roulx is fundamental. It contains correspondence, Papal bulls, and statutes, all of which are evidence for the development of the Order and its history in Syria, Rhodes and Malta. However, Delaville le Roulx did not include all the material held in the archives of the Order in Malta but rather concentrated on those between 1100 and 1310, the approximate date when the Hospitallers moved from Cyprus to Rhodes. The continuation of the *Cartulaire* beyond 1310 was scarcely a practical possibility and even printing the fourteenth century records, according to Luttrell, would have been impossible in full.<sup>1</sup>

Unfortunately many of the records of the Order have been lost or misplaced. Some may have been lost at the fall of Jerusalem in 1187 and some disappeared when Acre was captured in 1291. The records kept on Cyprus between 1291-1310 were misplaced and some of those at Rhodes from 1310-1522 were lost during the final siege. However, an important section of the archives at Rhodes was taken to Malta in 1530 and now forms part of those archives.<sup>2</sup>

As well as those records lost, many were taken from Syria to the West prior to 1291 and an inventory of what remained of those documents from Acre was made at Manosque, Provence in 1531. Some were taken to Malta while some remained in Provence and a great number were lost or dispersed. Another group was held by William of St Stephano (1278-1303), and other early documents were kept in various Hospitaller archives in the West, while

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<sup>1</sup> Luttrell, "Delaville le Roulx", pp. 1-2.

<sup>2</sup> Luttrell, "Early Written Records", p. 135.

still more were to be found in various other libraries and archives and many of these were published in Delaville's *Cartulaire*.<sup>3</sup> The records of the German house in Jerusalem and centres apart from Acre have been lost, as well as those lost from Cyprus and Rhodes.

The history and details of the present texts and sources of the Hospitallers have been recorded by Luttrell. The codex compiled by Fr Guglielmo also survives. Luttrell has analyzed the various records kept in Western priories and has included an outline of the history of the early statutes which he claims is "equally complex". He concludes that it was only after the time of Giacomo Bosio in the late sixteenth and early seventeenth centuries that the Order began, "to arrange effectively for the chronicling of its own history and much still needs to be done".<sup>4</sup>

Delaville's *Cartulaire* is the primary source for the diplomatic history of the Order and supplants earlier collections. However, the Hill Monastic Manuscript Library in Collegeville, Minnesota, has filmed the Archives of the Order of St John, which are now in the National Library of Malta at Valletta, and makes them available. Vann explains that the work at Hill in codifying and cataloguing these archival records corrects wrong dating. She also warns about the possibility of forgeries, especially of documents regarding property and finance which favoured the Hospitallers.<sup>5</sup>

Borchardt's "Two forged thirteenth-century alms-raising letters used by the Hospitallers in Franconia", illustrates why critical examination of Hospitaller documents is necessary, as many documents may not be genuine.

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<sup>3</sup> Luttrell, "Early Written Records", p. 136, n. 3.

<sup>4</sup> Luttrell, "Early Written Records", pp. 136-154.

<sup>5</sup> Vann, "Hospital Record Keeping", p. 284.

These two documents trace the early *Miracula* traditions and speak of the worthiness of the Hospitallers and their high moral standing as well as the rewards available to those who support their work in the Holy Land. However, due to inconsistencies in some of the times and places mentioned, Borchardt has rejected them as false, even though they may have been based partly on Hospitaller communications.<sup>6</sup>

The earliest recorded account of the beginning of the Hospital in Jerusalem is in the *Chronicon* of William of Tyre, which covers the years from the preaching of the First Crusade in 1095 until 1184. He wrote it between 1170 and 1182, just before his death on 9 September 1184 and before the end of the Frankish era in Jerusalem in 1187. Relating the history of the lands conquered by the Crusaders, it has been used from the beginnings of modern scholarship and accepted as being of the “utmost importance”.<sup>7</sup>

William is thought to have been born in Jerusalem around 1130. He mentioned that his progenitors lived in the city and indirect evidence suggests that he was born into a burgess family and that throughout his lifetime his relatives lived in Jerusalem.<sup>8</sup> Ralph, a burgess and brother of the Archbishop of Tyre, was a witness in a document in the *Cartulaire* of the Holy Sepulchre. In the *Chronicon* he says nothing about himself and the only member of his family mentioned in it was his mother. However in the “lost chapter” he told of following the schools of philosophy and the universities of the liberal arts in France and Italy as well as the beneficial dogmas of higher philosophy (theology) and the wisdom of the law, both ecclesiastical and Roman.<sup>9</sup> It

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<sup>6</sup> Borchardt, “Alms-Raising Letters”, pp. 52-6.

<sup>7</sup> Edbury and Rowe, *William of Tyre*, p. 1.

<sup>8</sup> Bresc-Bautier, *Cartulaire*, no. 160, p. 312.

<sup>9</sup> Huygens, “Guillaume de Tyr étudiant”, pp. 822-3.

seems that William spent his growing years during the 1130s and 1140s in Jerusalem, and then nearly twenty years travelling in the West before returning to Palestine in 1165, where he had a successful, but ultimately frustrated, career in the church and state.<sup>10</sup> In 1174 William became Chancellor of the Kingdom of Jerusalem, and because of his background and position he would have known about the Hospitallers and their close links with the local church, as well as their quarrels with the Patriarch.

William's *Chronicon* is a close contemporary record of events concentrating on local politics, battles and the activities of kings. The history of popes and the trading activities of maritime republics are treated as background to his story. Although he set his work within the framework of divine providence, he did digress at times to include the activities of the Church in the East.<sup>11</sup> His brief history of the Hospitallers and their caritative work is an *excursus* from his main theme but is of exceptional value.

Naturally enough, in a work of such magnitude, critics have uncovered flaws and inconsistencies, and Nicholson has pointed out some of these in "Before William of Tyre: European reports on the Military Orders' deeds in the East, 1150-1185".<sup>12</sup> However, overall the *Chronicon* is much to be admired. William's references to the Hospitallers are of a general nature and tend to accord with the documents of Delaville le Roulx in that they present a background to the various bulls and charters.

A number of chronicles were added to *The Eracles*, or what has been called the Old French Translation of William of Tyre's *Chronicon*, in the

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<sup>10</sup> Huygens, "Editing William of Tyre", pp. 461-2 and Huygens, "Guillame de Tyr étudiant".

<sup>11</sup> Edbury and Rowe, *William of Tyre*, p. 2.

<sup>12</sup> Nicholson, "Before William of Tyre", pp. 112-18.

thirteenth century. These have become known as the History of Heraclius or the *Estoire de Eracles* and the author, or authors is generally accepted as unknown.

The later chronicles cover the period from 1184 to well into the thirteenth century and concentrate on reporting about the leading figures in the East as well as the conflicts with the Muslims. Pryor has described the subject matter contained in the *Eracles* as being “composed as an epic chronicle of the deeds of the French nobility in the crusades and in many respects suggests a prose version of a *chanson de geste*”.<sup>13</sup> However, the *Eracles* has not proved to be helpful for the main social and charitable work of the serving brothers of St John. It gives only general comments or details regarding hospitality, burial places and the Hospitallers’ military and political involvements.

However it is important to explain something about some of these texts in order to clarify their backgrounds. The Lyon continuation of William of Tyre is a single manuscript (MS. 828) held in the Bibliothèque municipale in Lyon. It covers the period 1184-1248, and its section 1184-1197 is peculiar to this manuscript alone, and is regarded as the longest and most reliable of any of the continuations. This section was published by Ruth Morgan.<sup>14</sup> It has been translated by P. W. Edbury.<sup>15</sup>

The Colbert-Fountainbleu *Eracles* is the text published in the *Recueil des Historiens des Croisades* from two manuscripts.<sup>16</sup> MS. 2634 is the

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<sup>13</sup> Pryor, “*Eracles* and William of Tyre’, p. 293.

<sup>14</sup> Morgan, M. R., ed., *La continuation de Guillaume de Tyr(1184-1197)* [Documents relatifs à l’histoire des Croisades, 14] (Paris, 1982).

<sup>15</sup> Edbury, W., *The Conquest of Jerusalem and the Third Crusade:sources in translation* [Crusade texts in translation, 1] (Aldershot, 1998).

<sup>16</sup> Paris, *Bibliothèque nationale de France*, Ms. Fr, 2634 and Ms 2628.



*Eracles* continued to 1248 and containing the so-called Rothelin continuation from 1229-1261, whereas MS. 2628 is the *Eracles* continued to 1265. Up until 1248 these two texts form what was called the Colbert-Fontainbleau *Eracles* by Louis de Mas Latrie. The *Recueil* contains the *Eracles* in RHCOcc, vol. 2, 1-481; followed by the *Continuation de Guillaume de Tyr de 1229 à 1261, dite du manuscrit de Rothelin*, in RHCOcc, vol. 2, 483-639.

Another work edited by P. Paris, *Guillaume de Tyr et ses continuateurs: texte français du XIIIe siècle*, contains only the French *Eracles* translation of William of Tyre.<sup>17</sup> The continuations were never published. The Rothelin Continuation covers the period 1239-61 and is translated by J. Shirley,<sup>18</sup> who also translates the *Eracles* from the RHC text for the same years 1239-61.

There are a series of manuscripts with a continuation for the period 1184-97 which has a shorter text than either the *Lions Eracles* or the Colbert-Fontainbleau *Eracles*. Morgan gave it the name “abridgement” (*abrégé*). The Florentine *Eracles* is a unique manuscript in the *Biblioteca Medicea-Laurenziana* MS Pluteus LXI, 10 which traces the history of the East from 1184-1277. It is in two sections, one covering 1184-1191, which follows the *abrégé* and holds no interest while the section 1191-1277 is a unique text which is closely related to the Lyon *Eracles*. Morgan edited this section in parallel to her edition of the Lyon *Eracles*.

The *Chronique d'Ernoul et de Bernard Le Trésorier* is a separate text which is not derived from the Old French translation of William of Tyre. This

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<sup>17</sup> Paris, P., *Guillaume de Tyr et ses continuateurs: texte français du XIIIe siècle*, 2 vols (Paris, 1879-80).

chronicle starts with the death of Godfrey and the accession of Baldwin I after the First Crusade and ends in 1227 in some manuscripts and 1231 in others. Between 1184-97 the text is almost identical to the *abrégé* version, while the part which comes after 1197 follows along the same lines of the other continuations of the *Eracles*. It is from an included section of the chronicle that Morgan proposes *Ernoul* to be its author.<sup>19</sup>

Each of the versions of the *Eracles* must come under the criticism made by Edbury about the Lyon *Eracles* when he warns that “like all narrative accounts of past events, the Lyon *Eracles* version of the Continuation of William of Tyre presents a story, that is flawed and distorted”. There are problems of lack of verification of evidence and personal interpretation of circumstances and of the past, mostly because of “fallible memories, carelessness and unreliable informants”.<sup>20</sup>

Among other relevant chronicles and books the *Itinerarium peregrinorum* is a short work on the Third Crusade which ends in November 1190, and which Mayer argued was compiled by an English Templar chaplain in Tyre around 1192. There are two versions of this chronicle, the first edited by H. Mayer.<sup>21</sup>

The second chronicle is a much longer work, traditionally attributed to Richard of the Holy Trinity, who used the *Itinerarium peregrinorum* and Ambrose to produce the *Itinerarium peregrinorum et gesta*

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<sup>18</sup> Shirley, J., *Crusader Syria in the thirteenth century: the Rothelin continuation of the history of William of Tyre with part of the Eracles or Acre text* [Crusader texts in translation, 5] (Aldershot, 1999).

<sup>19</sup> Morgan, *The Chronicle of Ernoul*, p. 59.

<sup>20</sup> Edbury, “The Conquest of Jerusalem”, p. 7.

<sup>21</sup> Mayer, H., *Das Itinerarium peregrinorum* [Schriften der Monumenta Germaniae Historica, 18] (Stuttgart, 1962).

*regis Ricardi* which finishes with Richard's return to England.<sup>22</sup> This was translated by H. J. Nicholson.<sup>23</sup>

Neither of the following two works were of any help in understanding the caritative ministry of the serving brothers of St John. Ambroise wrote a poem written about the Third Crusade, based on the *Itinerarium peregrinorum* or a now lost common source.<sup>24</sup> Philip of Novara was edited by G. Raynaud. in *Les gestes des Chiprois*. It has been translated by J. L. La Monte and M. J. Hubert in *The Wars of Frederick II against the Ibelins in Syria and Cyprus*.<sup>25</sup>

Fulcher of Chartres' *Historia Hierosolymitana* was a record of the expedition to Jerusalem and the early years of the Kingdom of Jerusalem; however, it does not mention the serving brothers and their caritative work. His most helpful comment is that the Latins in the Levant had acclimatised culturally into the way of life of the inhabitants of Palestine.<sup>26</sup> This adds weight to the opinion that the Franks may have accepted local doctors into their way of life and that this would have influenced the Hospital's medical practice.

Another who was in a position to make comments about the Hospital and its charity work was Jacques de Vitry, bishop of Acre 1216-1228, in his *Historia Hierosolimitana (Historia orientalis, liber tertius)*.<sup>27</sup> His being in Acre when the Hospitallers were living and serving in the city means that his opinions of the Order should be taken as primary evidence for its work and

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<sup>22</sup> Stubbs, W., ed., *Itinerarium peregrinorum et gesta regis Ricardi, ut videtur, Ricardo canonico Sanctae Trinitatis Londoniensis*, in vol. 1 [Rolls series, tome 38, vol. 1] (London, 1864).

<sup>23</sup> Nicholson, H. J., *Chronicle of the Third Crusade: a translation of the Itinerarium peregrinorum et Gesta regis Ricardi* [Crusade texts in translation, 3] (Aldershot, 1997).

<sup>24</sup> Paris, G., *L'estoire de la guerre sainte* (Paris, 1897), J. L. La Monte and Hubert, M. J., trans., *The Crusade of Richard the Lion-Heart* (N.Y., 1941).

<sup>25</sup> Raynaud, G., *Les gestes des Chiprois* [Société de l'Orient Latin, Série historique, 5]; pp. 25-138 also *RHCDoc.Arm.*, vol. 2 (Paris, 1906). J. L. La Monte and M. J. Hubert, trans., *The Wars of Frederick II against the Ibelins in Syria and Cyprus* (N.Y., 1936).

<sup>26</sup> Fulcher of Chartres, *Expedition to Jerusalem*, pp. 35-6, 271-2.

<sup>27</sup> Bongars, J., *Gests Dei per Francos*, 2 vols in 1 (Hanau, 1611), vol., 1, 1047-1145.

reputation. However, his *Historia Hierosolimitana* was mostly based on William of Tyre and, like William, he has praise mainly for the early days of the Hospital and the “godly” work of the serving brothers. Nevertheless, his praise was more fulsome than that of William and his condemnation of their later attitude and behaviour was not so stringent. His criticism, like that of William of Tyre, was based on his conceptions of what he considered to be correct standards of church order.<sup>28</sup>

His general advice to hospitallers and their charges in his *Sermones ad status* and *Historia occidentalis* reveal some of his observations and experiences through visiting and preaching in hospices and hospitals in Europe and the Near East. He was trained in moral theology in Paris, and emphasised moral reform and charity for pilgrims, the poor and the afflicted. In his sermon to Hospitallers, which included European hospitals and their charges, he expressed his opinions on how hospitals should be controlled and organised. He wrote not only from theory but also from what he had observed personally and his outlook is remarkably similar to that of the Hospitallers. Seeing the Hospitallers in action in Acre helped him to formulate his ideas before he returned to Europe.<sup>29</sup>

William of Saint Stephano was a member of the order and wrote a history of it between 1290 and 1302.<sup>30</sup> As *preceptor* of Cyprus at the time he began to preserve the Order’s manuscripts and “made two compilations of its rules, statutes, *esguards* and customs covering the period from 1125 to 1304,

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<sup>28</sup> Jacques de Vitry, *Historia orientalis*, vol. 1, p. 1082.

<sup>29</sup> Bird, trans., “Medicine for Body and Soul”, pp. 91-134.

<sup>30</sup> Riley-Smith, *Knights*, pp. 32-3.

although the bulk of the material was contemporary to his era”.<sup>31</sup> He used the *Chronicon* of William of Tyre in his account of the growth of the Order although he added information from other sources. He believed that Benedictine monks were sent by the Amalfitans to staff the monastery of St Mary of the Latins in Jerusalem and claimed that St John the Baptist was the real patron of the Order. He also understood that the first hospice had been under the abbot of St Mary of the Latins and that the abbot had nominated those who had worked there.

For the pre-history of the Hospital William included some legends which have been called the *Miracula* and which tried to establish the foundation of the Hospital during the reign of the Seleucid king Antiochus IV Epiphanes (175-163 B.C.E.). William rejected these claims as having no general evidence to support them.<sup>32</sup> However he did concede that an early hospice may have been destroyed by Titus in the fall of Jerusalem in 70 C.E.<sup>33</sup>

As well as the records of the Order and authors who were in a position to record some primary evidence, there were pilgrims who had close contacts with the Hospitallers. There are three who were most informative about the serving brothers and their caritative work for pilgrims and the poor. They are: John of Würzburg, Theodoricus and an Unknown Pilgrim.<sup>34</sup> Each of these visited the Hospital in Jerusalem and described aspects of the work of the

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<sup>31</sup> Vann, “Hospitaller Record Keeping”, p. 278; Luttrell, “Introduction to J. Delaville le Roulx”, p. 1.

<sup>32</sup> Riley-Smith, *Knights*, p. 33.

<sup>33</sup> Chapter 2, pp. 48-51.

<sup>34</sup> John of Würzburg, pp. 79-141.

servicing brothers. Both John and Theodoricus were appreciative of the work done by them and their attitude towards the sick. John was impressed by the size of the Hospital and the amount of work performed, as well as the expense of running such a large concern. He comments on its good organization and the way the patients were well treated. Theodoricus admired the beauty of the building and the generosity shown to the sick in the care they received and words failed him in trying to describe the Hospital and the dedication of the staff, to their service for the patients.<sup>35</sup>

The Unknown Pilgrim went even further and composed an essay on Christian charity as displayed in the Hospital. As a patient he saw and experienced kindness to all comers, thoroughness in nursing care, and interest in the patients' well being and he compared these virtues to the indifference to suffering which he saw in the outside community. The text began with a eulogy on the virtues of Christian charity and then proceeded to describe the Hospital in which he had been a patient. It described the work done by the serving brothers but not their history or worth to the Order. This text has proved to be extremely valuable in understanding the inner life and working of the Hospital.<sup>36</sup>

Two further sources refer to early visitors to the Jerusalem Hostel. Amatus of Montecassino, a Benedictine monk, wrote the eight books of his *L'ystoire de li Normant* around 1080 to describe the history of the Normans in the Mediterranean from the point of view of his monastery, which was an important cultural and religious centre in the eleventh century. He reported

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<sup>35</sup> Theodoricus, p. 131.

<sup>36</sup> Kedar, "Jerusalem Hospital", pp. 3-26.

that two hospitals were founded by the Amalfitans at Antioch and Jerusalem.<sup>37</sup>

The second brief source of information about the years before 1099 is in the so-called *Amalfitan archbishops*. This work has a reference to Archbishop John of Amalfi visiting the Holy City around 1080, where he saw two hospitals one for men and the other for women.<sup>38</sup>

Of the Western chroniclers, Matthew Paris's *Chronica majora* included material on the Crusades but did not mention anything regarding the caritative work of the Order or of the serving brothers.<sup>39</sup> No other Western source known to me does either. Of modern scholars who have addressed the caritative work of the Order, none have approached the overall history of the Order from the point of view of the serving brothers.

Writing in the 1930s E. J. King was the first English author to take up in great detail the subject of the Order of St John. Of his two books, *The Knights Hospitallers in the Holy Land* and *The seals of the Order of St John of Jerusalem*, the first covered the general history of the Order and the second presented much of its early documentation translated into English. At that time these two volumes helped to rekindle interest in the Hospitallers and provided a background of general knowledge on which later scholars could build.

However, King did not approach the subject of the serving brothers and their caritative work within the Order of St John in any special way. He was more interested in the exploits of the military brethren and the later knights. He mentioned only that the serving brothers did domestic duties in the Convent and Hospital and that, like other religious orders, the Hospitallers

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<sup>37</sup> Amatus of Monte Cassino, *L'ystoire de li Normants*, ch. 3, p. 231.

consisted of monks and serving brothers. He did not describe the difference between the two groups.

King's opinion of the early days and formation of the Hospitallers may be summed up in his words, "The capture of Jerusalem by the Crusaders in 1099 is the true natal day of the Order of St John". He went on to say that until then it had been but a local charity of the Benedictines.<sup>40</sup> From his point of view, this may indeed have been the case, since only the knights were considered. At that point King mentioned the Blessed Gerard as the guardian and administrator of the Hospital and that he was imprisoned by the Egyptian governor until released because a miracle excused him from the accusation of aiding the besiegers.

King proposed, without giving any evidence, that the brethren of St Mary of the Latins left Jerusalem during the siege of 1099 and concluded that because of this Gerard was able to secure control of the Hospital.<sup>41</sup> This is at odds with the evidence of Paschal II's bull of 1112, in which the Pope commended the monastery for its charitable work up to that point. It also passes over the evidence that the Hospital was under the control of the abbot throughout the period before 1099 and up to 1113. King did not give any consideration to the influence of the monastery over its hostel, and this research area needs further examination.

In 1940 E. E. Hume published his *Medical work of the Knights Hospitallers of Saint John of Jerusalem*, in which he outlined the growth and service of the Order up to that time. He began by tracing the foundation of the

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<sup>38</sup> Ughelli, "Amalphytani Archiepiscopi", vol. 7, p. 198.

<sup>39</sup> Matthew Paris, *Chronica Majora* (London, 1571).

<sup>40</sup> King, *Knights Hospitallesr*, p. 19.

<sup>41</sup> King, *Knights Hospitallers*, p. 22.



Order through its papal bulls and then presented the descriptions of the Hospital given by Theodericus and John of Würzburg. His work included the final capture of Acre by the Moslems as well as bringing the history of the Order up to the time of his writing. The early segment of his book is the only part of it which is at all relevant to this study but it does not deal in any depth with the serving brothers and their work.<sup>42</sup>

Johnathan Riley-Smith is the most respected author on the subject of the Hospitallers since Delaville le Roulx and his work has covered many aspects of crusading. His *The Knights of St John in Jerusalem and Cyprus, c. 1050-1310* has become the definitive work on the overall early history of the Order. In it he deals with the beginnings of the Benedictine hostel as well as the organisation of the Order, its widespread privileges and its possessions in Syria. Even though his work is pitched at a deeper level, Riley-Smith has also concentrated on the development of the knightly order more than the history within the Order of the serving brothers and the caritative work they performed. Of course he does outline their position within the structures of the Order, but he gives little attention to the challenges which they faced to their religious concepts of charity.

In the chapter on "Members of the Order", Riley-Smith concentrates mainly on the military and judicial side of the organisation of the Order. He gives no full explanation of the serving brothers or their work and presents no separate description of those members of the order who in many ways represented the original religious reason for the Order's existence.<sup>43</sup> He has

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<sup>42</sup> Hume, *Medical Work of the Knights Hospitallers*, pp. 1-26.

<sup>43</sup> Riley-Smith, *Knights*, pp. 229-273.

sections only on brother priests, brother knights, brother sergeants, sisters of St John, and *confratres*.

One important aspect of the work of the serving brothers not considered at all by Riley-Smith was their involvement with contemporary medical practices in the Holy Land. Since the Hospitallers employed the doctors of the Hospital and the serving brothers assisted and oversaw their work, the organising of the medical side of the Hospital with its associated responsibilities, was an important part of their caritative work. This was especially true considering the size and importance of the Jerusalem Hospital and the part the serving brothers played in extending its good reputation.

Another issue which Riley-Smith does not examine was the close connection of the Hostel with St Mary of the Latins prior to 1099. At that stage the Benedictine abbot of the monastery was in charge of the hospice and had been ultimately responsible for its organisation for at least thirty years. This necessitates consideration of the Benedictine Rule, which specified that a hospice should be organised within the authority structures of a monastery. At that time monasteries were undergoing changes in the way they staffed and managed hostels and the more practical aspects of monastery life. This was crucial to St Mary of the Latins since it had been founded for a special reason and had the responsibility of caring for pilgrims and the poor.

Changes to a basic principle such as caring for peoples' social and health requirements need further consideration. The needs of the serving brothers who professed to serve the spiritual, medical and social needs of pilgrims and the poor need to be put into clearer perspective. They and their

caritative work for the Order should become a central object of attention within the history of the Order.

The most recent history of the Order of St John by Alain Beltjens, *Aux origines de l'Ordre de Malte, de la fondation de l'Hopital de Jerusalem à sa transformation en Ordre Militaire*, covers the history of the Order under Gerard, Raymond du Puy, and Gilbert d'Assailly. However, this work does not consider the serving brothers independently, and only includes a paragraph about them under the heading "Classes of the Order".<sup>44</sup> They are described as brothers of office and follow in the list, under brother knights, brother sergeants at arms and brother chaplains.

According to Beltjen, the serving brothers were those brothers who, as the junior or inferior religious of the Hospital, administered the civil side of the organisation. By civil he appears to mean those brethren who were not involved in any military actions. This is, indeed, the position given to serving brothers in the Statutes of 1306. Although these fall outside the scope of this thesis, it does seem likely that this was the way the serving brothers had been classified in Acre during the previous century because, the tradition of the Order was to confirm behavioural patterns after they had become established.

Luis Garcia-Guijarro Ramos in "Exemption in the Temple, the Hospital and the Teutonic Order: shortcomings of the institutional approach" discusses the relationship between papal protection and exemption with regard to the military orders.<sup>45</sup> He maintains that there was a document called a *maior libertas* which was used to give papal exemptions which is not in evidence with the Hospital. However its papal bulls obviously conveyed the same

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<sup>44</sup> Beltjen, *Origines de L'Ordre de Malte*, p. 514.

meaning and privilege in giving freedom from episcopal control. It seems the serving brothers of St John were taken under papal protection, in *Pie postulatio voluntatis* (1113) and in the following foundational bulls, without possessing a *maior libertas* as a single document.

Two related questions need to be investigated. The first concerns the Hospitallers' connection to St Mary of the Latins and how this did or did not affect their standing. De Jong has been helpful in comprehending the situation and roles of *oblato* and *conversi* in Benedictine monasteries of the late eleventh century.<sup>46</sup> His work has assisted in clarifying the proposition that according to the Benedictine Rule and contemporary practice at that time, it is feasible that the original Hospitallers were Benedictine *conversi* monks.

The second question concerns whether the Hospitallers came to be under, and influenced by, the canons regular of the Holy Sepulchre and their Augustinian Rule. As far as the regular canons are concerned, Dondi has claimed in *The liturgy of the Canons Regular of the Holy Sepulchre of Jerusalem: a study and a catalogue of manuscript sources*,<sup>47</sup> and "Hospital liturgical manuscripts and early printed books", that the Hospitallers used the liturgy of the Holy Sepulchre in their Hospital worship and must therefore have been under the authority of the regular canons of the Cathedral.

According to Dondi's argument there are twenty nine manuscripts of liturgies of the Holy Sepulchre in existence which were used by the Hospitallers. They are preserved throughout Europe and the British Isles in various places and date from 1200-50 to 1553.<sup>48</sup> However, no manuscripts

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<sup>45</sup> Garcia Guizarro Ramos, "Exemption in the Temple", pp. 289-293.

<sup>46</sup> De Jong, *In Samuel's Image*, pp. 126-133 and 296-302.

<sup>47</sup> Dondi, *Canons Regular*, pp. 24, 28.

<sup>48</sup> Dondi, *Canons Regular*, pp. 15-16.

exist which were used by the Hospitallers in the Holy Land.<sup>49</sup> Moreover, this thesis is only concerned with the Hospitallers' liturgical practice between 1070 and 1291, and only seven of the preserved manuscripts are from that period.<sup>50</sup> Of the seven, the one dated 1200-50 is a *Breviarium* (daily offices) while the rest are made up of four psalters, one of which is attributed to the Templars, and two calendars.

When the regular canons were appointed to the Holy Sepulchre in 1114, it is here argued that they changed the Hospitaller's liturgy to conform with that of the Holy Sepulchre, which was the Jerusalem cathedral. This was done because the canonical principle of diocesan uniformity, formulated at the Council of Gerona in 517, stipulated that new monasteries should follow the liturgy of the local cathedral.<sup>51</sup>

However, the authority of the Council of Gerona in Catalonia to dictate to the rest of the Western Church is questionable. It was just a local council, not an ecumenical one.<sup>52</sup> It is only at Ecumenical Councils that the worship of the Church is regulated. Also, following that Council, it became the custom that any new Benedictine monasteries followed the common Cluniac liturgical tradition rather than that of the local diocesan cathedral.<sup>53</sup> In fact the Hospitaller traditions were closely allied with those of St Mary of the Latins, which in turn had been influenced by Cluny. Added to this, it should be pointed out that the Hospitallers had been in existence for nearly 60 years before the establishment of the regular canons and were not a new institution.

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<sup>49</sup> Dondi, *Canons Regular*, p. 42.

<sup>50</sup> Dondi, *Canons Regular*, "Hospitaller Liturgical Manuscripts", p. 230, A.6, p. 234, A.16, p. 244, A.74, p. 245, A.77, and A.79, p. 246, A.79, p. 250, (h).

<sup>51</sup> Dondi, *Canons Regular*, p. 39.

<sup>52</sup> *NC Encyclopedia*, vol. 14, p.

<sup>53</sup> Dondi, *Canons Regular*, p. 42.

Furthermore, Dondi claims that the Hospitallers were canons of the Cathedral because, in the opening of Raymond du Puy's Rule, the gathering in the chapter was described as being *clerici*. It is claimed that the term clergy meant that the Hospitallers were all clergy and not brothers or monks. However the Rule mentioned brothers alongside clergy.<sup>54</sup> Also, during the time the Rule was composed, secular clergy (priests or presbyters) were permitted to serve in the Hospital and then later to become brothers within the Order.<sup>55</sup> It is important to add that in the founding papal bulls, the popes described the members of the Order as brothers and not clergy.

Dondi claims, furthermore, that because the Hospitaller Statutes of 1239 and the *Usances* of 1294 permitted the use of nine lessons in the liturgy of the Hospital, this indicated a canonical principle of worship.<sup>56</sup> However, the Benedictine Rule also allowed variations within its services and on appropriate occasions readings could vary between one, four and thirteen, often as requests were made by benefactors.<sup>57</sup> In Benedictine monasteries after the eighth century extra offices, such as the Office of the Dead, developed, which contained three or nine lessons.<sup>58</sup>

For these reasons and others which will be mentioned below, it is clear that the regular canons of the Holy Sepulchre had little or no influence on the Hospitallers' rule and liturgy. Moreover, no canons were mentioned in any founding Papal bulls, as would be expected, if they had any control over the Hospitallers. In fact, the opposite is the case since Paschal II in 1113 explicitly

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<sup>54</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

<sup>55</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 130, 226.

<sup>56</sup> Dondi, *Canons Regular*, p. 42; Delaville le Roulx, *Cartulaire*, vol. 2, nos 2213, 4259.

<sup>57</sup> McCann, *St Benedict*, pp. 48-59.

<sup>58</sup> Hunt, *St Hugh*, p. 99.

stated that the Order was under his authority and was not to come under any other outside control bishops or otherwise.

However, this is not to deny the possibility that liturgical influence may have influenced the Hospitallers later. Dondi's evidence suggests that the first recorded use of the liturgy of the Holy Sepulchre by the Hospital was between 1200-50 and this may possibly have been that the Hospital adopted the liturgy of the Holy Sepulchre when the Order became established in Acre.

When Forey published "The militarisation of the Hospital of St John" in 1984, it was followed by more articles on the Military Orders, and most of these have been germane. Among his subjects Forey includes the emergence of the orders, recruitment, women in the orders, literacy and learning, ransoming of captives, novitiate and instruction and the Order of St Thomas of Acre.

For present purposes his two most useful works are "The militarisation of the Hospital of St John" and "Constitutional conflict and change in the Hospital of St John during the 12<sup>th</sup> and 13<sup>th</sup> Centuries". Each of these addresses the relationship between the serving brothers and the military brothers. They deal with a sensitive area of this relationship and one which was to have far reaching effects on the future of the Order.

The question of how the Hospitallers began serving those who needed charity and then became associated with warfare lies behind the subject of the growth of knightly power within the Order of St John. This change within the Order provoked a rebuke from Pope Alexander III and opposition from a section of the Hospitallers, revealing not only concern about the financial

aspects of the Order but also the psychological and theological challenges faced by the serving brothers.<sup>59</sup> The religious reasoning used to justify this evolution, and so to satisfy the consciences of those who may have objected to the development, needs to be examined. The subject of killing and warfare is an important consideration as far as the Order of St John is concerned, especially when thinking about the difficulties posed to the serving brothers of the Order by the emergence of knights.

In “Holy War and holy men: Erdmann and the lives of the saints”, France deals with the development of the concept of war in the Western Church from the Carolingian period to the speech of Urban II in 1095. He concludes that the Western Church eventually adjusted itself to the various reasons for war. It was accepted that war sometimes produced meritorious circumstances and even a moral purpose for serving divine ends. France believes that by 1000 the idea of holy war “was popular, ill-defined and spontaneous, but it was one which clearly enjoyed clerical support”,<sup>60</sup> even though conflicting attitudes still existed. His opinion is that the clergy accepted war as inevitable, though undesirable, but that it could be used to fulfil divine purposes and that Urban II built on that fact.

In “Christianity and the morality of warfare during the first century of crusading”, Cowdrey sets out to define and explain the concept of Holy War as derived from Augustine’s suggestion of a Just War.<sup>61</sup> In “Crusades, clerics and violence: reflections on a canonical theme”, Brundage considers how from early times clergy were forbidden to wage war or bear arms and yet

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<sup>59</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 434; William of Tyre, *Chronicon*, 20. 5. 33-39 (vol. 63A, p. 918).

<sup>60</sup> France, “Holy War and holy Men”, p. 207.

<sup>61</sup> Cowdrey, “Morality of warfare”, pp. 175-192.



some ignored this admonition.<sup>62</sup> He moves on to the concept of armed pilgrimages and to that of those who settled in the Holy Land being in a different position to Crusaders.

Riley-Smith examines the subject, "Crusading as an act of love", and begins by commenting on the idea of loving God and loving one's neighbour.<sup>63</sup> He considers the preaching of a loving Christ as a basis for Crusading as well as the possibility of Crusading being akin to loyalty to secular rulers. However he adds that the concept of love being related to violence is difficult to reconcile and illustrates this in the concern shown by Pope Alexander III that violence should be well controlled.

He points out that early preaching of Crusade was one\_sided and ignored the teaching of loving one's enemies. His discussion moves through the various attitudes to the use of violence to the idea that the use of force in the church was not entirely forbidden. This argument was that it was permissible if it was carried out in the belief that it could be used to discipline recalcitrants and heretics. However the preaching and teaching of crusade was changed, by those in favour of violence, who extended the idea from correction of heretics within the Church to include all those outside as well.

Influential Crusade preachers spoke at a level which suited their congregations, based mainly on hatred of those who opposed Christian laws and a wide-spread feeling of antagonism towards the infidel. He concludes that the various types of preaching love were essential to Crusading and fitted into the teaching of some Crusade preachers. They advocated the religious use of violence as an act of concern for helping friends and

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<sup>62</sup> Brundage, "Crusades, clerics and violence", pp. 147-156.

correcting the wrongs of others. This entire attitude appears to have suited the spirituality of the eleventh century, which sought to do some acts of charity by means of violence. Both concepts grew out of the same root of loving or helping one's neighbour.

In *The Just War in the Middle Ages*, Russell was the first to survey comprehensively the justifications of warfare elaborated by Roman lawyers, canon lawyers and theologians in the universities of the twelfth and thirteenth centuries,<sup>64</sup> dealing with St Augustine, the medieval Romanists' analysis of war, Gratian's *Decretum* or *Concordia Discordantium Canonum*, the decretalists, medieval theology and Thomas Aquinas. Russell believed that when Pope Urban II at the Council of Troia in 1093 promoted the Truce of God, and at the Council of Clermont in 1095 exhorted the Christians to fight a holy war against the infidel, he was legitimising war and positioning himself alongside secular powers.<sup>65</sup>

Turning to medicine, Miller's seminal article of 1978, "The Knights of St John and the hospitals of the Latin West", was a forerunner for many other studies.<sup>66</sup> He compared the Hospital to hostels and hospitals both in the West and East which existed prior to its appearance in Jerusalem and also to those which were contemporary with it and concluded that the West had no hospitals as medical centres such as existed in the East. He believed that Western hostels catered only for the rest and recuperation of pilgrims and the

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<sup>63</sup> Riley-Smith, "Crusading as an act of love", pp. 177-192.

<sup>64</sup> Russell, *Just War*, p. 55.

<sup>65</sup> Peter of Salins, *Lectura*, to C. 23 q. I c 5, v. *non est delictum*, Bibliotheque Nationale, fol. 172rb ; Russell, *Just War*, p. 195.

<sup>66</sup> Miller, "Knights of St John", pp. 709-733.

poor and placed the Jerusalem Hospital within the spread of philanthropic Christianity in the twelfth century.<sup>67</sup> This is done without presenting any argument he assumed that the Hospitallers were part of the growth of regular Augustinian canons. However, that is to pass lightly over the Benedictine relationship which existed between St Mary of the Latins and its hospice, especially since the monastery was established to provide hospitality to visitors to Jerusalem.

Miller also thought that the Hospitallers greatly influenced hospitals in Europe through the Rule of Raymond du Puy and the Statutes of Roger des Moulins, and that the Jerusalem Hospital was influenced in its medical practice by Byzantine hospitals rather than those of the West or Islam. Although he discussed the work of the Hospital, like previous authors he did not approach the history of the Hospitallers from the perspective of the serving brothers and did not accord an important place to them.

In 1994 Luttrell published an extensive article, "The Hospitallers' medical tradition: 1291-1530".<sup>68</sup> This work lies outside the chronological limits of this thesis; however, he does give a brief outline of the Order up to 1291 and the fall of Acre. Although he has written at length on the Hospitallers, Luttrell has not attempted to examine the history of the serving brothers and their task of managing hospitals as large as those in Jerusalem and Acre.

In "The earliest Hospitallers", Luttrell discusses the difficulty of understanding some of the titles and terms used by the Order. He refers to other hospitals which were controlled by the Order of St John in the Holy Land

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<sup>67</sup> Note: See Chapter 5 in this thesis.

<sup>68</sup> Luttrell, "Hospitallers' medical tradition", pp. 57-64.

and he also briefly discusses the establishment of the Hospitallers in Jerusalem. He mentions those who founded the monastery and its hospice as well as giving some thoughts on the background of those who worked in it; however, this is the limit of his consideration of the serving brothers.<sup>69</sup>

In *Mending bodies saving souls*, Risse devotes a large section to the Jerusalem Hospital, concentrating on the primary medical evidence available and the illnesses which the Hospitallers may have encountered.<sup>70</sup> This is a different approach to the Hospital and provides background material for comprehending the work of the serving brothers. His work helped to promote interest among scholars in the medicine of the age and included evidence helpful in elucidating the medical service of the Hospital. He concludes that the Jerusalem Hospital treated many different types of illnesses on the grounds that the “unknown pilgrim” assured his readers that the Hospital treated every kind of sickness except leprosy.

Despite a broad discussion of medicine prior to the establishment of the Hospital in Jerusalem, including the importance of dietary treatments, Risse does not analyse comprehensively the work of the serving brothers in organising the functions of such a large concern, although, admittedly, it is not his prime purpose to do so. Nevertheless, his work has helped to clarify something of the responsibilities and difficulties faced by the serving brothers in meeting the nursing needs of their patients.

Among others who have written on the Order of St John and its caritative work in the Holy Land, Susan Edgington has worked on the medical

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<sup>69</sup> Luttrell, “Earliest Hospitallers”, pp. 37-54.  
<sup>70</sup> Risse, *Mending Bodies*, pp. 134-165.

knowledge of the early Crusaders, the Hospital of St John in Jerusalem, and the medical care given there.<sup>71</sup> This has helped to lay a foundation for comparing the standards of Crusader medicine with the medical ideas existing in the East contemporary with the Hospital. She concludes that because the first Crusaders' approach to medicine was practical rather than theoretical, this may have been the reason why they learned so readily from the medical practices of the East.<sup>72</sup> Edgington also uses Kedar's document of the unknown pilgrim and the Old French Statutes of Roger des Moulins to describe some of the practices and theories of medicine used in the Jerusalem Hospital. However, again, apart from mentioning some of the work of the serving brothers, she does not delve into their overall situation within the Order.

Malcolm Barber's "The charitable and medical activities of the Hospitallers and Templars", addresses the topic of this thesis more closely than any other.<sup>73</sup> He writes sympathetically and covers the general history of the Order with regard to its caritative work including some aspects of its charitable work in Europe. However, four aspects of Barber's essay require comment. The first is that he has not investigated the history of the serving brothers within the overall history of the Order. Secondly, he has accepted that the Hospitallers were closely connected to the regular canons and the Holy Sepulchre, and he does not analyse the connection of the Hostel to its mother-house. Thirdly, although he outlines extensively the nursing care of the Jerusalem Hospital, he makes little reference to the medical aspects of the hospital and the doctors who worked there alongside and under the

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<sup>71</sup> Edgington, "Hospital of St John" and "Medical care in the Hospital".

organisational arrangements of the serving brothers. Finally, he passes over the disagreement which arose between the serving brothers and the knights because of the financial debt into which the Order fell due to the failed invasion of Egypt.

Other scholars who have done work relative to the serving brothers of St John are P. D. Mitchell, C. Toll, M. Amouroux, and I. Sterns. Mitchell's research concentrates on medical and scientific evidence found through archaeology, injuries and their treatment, doctors, hospitals, wounds, dietary medication, legal aspects of medicine and the way medical knowledge was transmitted between East and West. However it has not been his aim to consider the background work of the serving brothers of the Hospital and the forces which altered their history and position within the Order and their caritative work.<sup>74</sup>

In a significant article, "The archaeological approach to the study of disease in the Crusader states as employed at Le Petit Gerin", Mitchell shows how modern methods of medical archaeological research have opened up new possibilities for understanding sickness and disease in the Crusader states. This assists in understanding problems faced by the serving brothers in the Jerusalem Hospital and the doctors who worked to treat pilgrims and poor local people. He explains how new settlers in Palestine faced changes to their diets which tended to affect their health and how they also suffered from "new diseases endemic to the area".<sup>75</sup> Palaeopathology means that human

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<sup>72</sup> Edgington, "Medical knowledge", p. 326.

<sup>73</sup> Barber, "Hospitallers and Templars", pp. 148-168.

<sup>74</sup> Mitchell, *Medicine in the Crusades*, p. 4.

<sup>75</sup> Mitchell, "Le Petit Gerin", p. 44.

skeleton “remains can be studied for the wide range of diseases we now know exist and we are not limited to those diseases which had been identified by the medieval period”.<sup>76</sup> It also means that medical knowledge of the Crusader states is able to be extended from an individual to a wider level in the population.

At Le Petit Gerin (Tel Jezreel, Israel), “infants and children in the medieval period typically experienced acute infections, malnutrition and parasitic infestation as occurs in the Third World today”.<sup>77</sup> One skull of an infant also had evidence of meningitis. Mitchell also documents diseases connected to teeth and points to the possibility of studying the “geographical relationship”<sup>78</sup> between sugar cane and dental problems.

This form of research is able to provide information which is unavailable from other resources and will give “an assessment of ill health in a community from a modern perspective”.<sup>79</sup> In “Parasitic intestinal helminth ova from the latrines of the 13<sup>th</sup> century crusader Hospital of St John in Acre, Israel”, Mitchell and E. Stern showed that “These toilets were in a large room with toilet seats arranged in parallel rows; the excrement was flushed through by rainwater collected on nearby roofs”.<sup>80</sup> After examining the soil and comparing it to control samples and suitably preparing it, parasitic intestinal helminth ova was identified including whipworm, roundworm and fish tapeworm. These investigations help to identify some of the problems which would have been faced by doctors in the Hospital of St John in Acre.

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<sup>76</sup> Mitchell, “Le Petit Gerin”, p. 44.

<sup>77</sup> Mitchell, “Le Petit Gerin”, p. 46.

<sup>78</sup> Mitchell, “Le Petit Gerin”, p. 48.

<sup>79</sup> Mitchell, “Le Petit Gerin”, p. 50.

<sup>80</sup> Mitchell and Stern, “Parasitic intestinal helminth ova”, p. 208.

It is also possible to accept tentatively the finding in Acre as being similar with that which would have been found in Jerusalem, since the Hospitallers would have used there the same methods and medical practise. This is despite the fact that the Hospital in Acre was established there for a longer time than in Jerusalem.

A number of authors have examined the growth of hospitals in the Middle East and the relationships between Western, Greek and Muslim medicine. Knowledge gained from these works helps to assess influences on the Hospital in Jerusalem.

In "Arabic medicine and hospitals" Toll argues that Muslim medicine and hospitals were the probable models for the military orders in Palestine in caring for the sick. He traces the history of Muslim medicine from the Greeks, discussing the development of male and female wards, drugs used, operations performed, books and examinations for doctors, and the treatment of mental patients. However, he is uncertain how far knowledge of Arabic medicine was assimilated by the Franks.<sup>81</sup>

Monique Amouroux comments on the way in which Frankish hospitals and social work inspired the Byzantine Church to renew an emphasis on caring for the sick and needy. She discusses newly established Frankish houses or hostels, as well as the various Greek monastery hostels which existed in the Holy Land during the eleventh century and which were handed over to the Franks. Greek monasteries and their hospitals, such as St Catherine of Mt Sinai, St Theodosius of St Sabas, St Theodosius, between Jerusalem and Bethlehem and also in Jerusalem, St Jonah at Jaffa, and other

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<sup>81</sup> Toll, "Arabic Medicine and Hospitals", p. 41.



hospitals at Ascalon and Gibelet, may have been used as models in various ways for the Hospital of St John.<sup>82</sup> Amouroux gives a brief outline of the Hospital in Jerusalem and suggests that it influenced European hospitals.<sup>83</sup> Little attention is given, however, to the responsibility of running a hospital which cared for a thousand patients and the difficulties of this work.

Sterns deals with the care given to sick brothers in the orders in the Holy Land. He uses the various rules and statutes of the Hospitallers, Templars and Teutonic knights in an effort to understand treatments given to sick brothers in an infirmary.<sup>84</sup> An outline of treatments administered is then used to claim that they followed the general medical knowledge and customary usage in the West. This provides some insights into the organisation and administration needed in the practical running of an infirmary, although those who did the actual work are not his primary consideration.

Nigel Allen traces the history of hospitals in the Near East and shows that a thread of continuity can be traced from classical antiquity through the Christian period into the world of Islam. This continuity was accompanied by continuing change and altering circumstances which transformed hospices or asylums for the poor into medical hospitals. Allen believes that the essential ingredients for this development were that the strength of both Greek and Islamic cultures provided the soil in which acceptance of medical knowledge

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<sup>82</sup> Amouroux, "Colonisation and the creation of hospitals", p. 33.

<sup>83</sup> Amouroux, "Colonisation and the creation of hospitals", p. 36.

<sup>84</sup> Sterns, "Care of the sick brothers".

and hospitals could grow. These were the reasons for the continuing development and use of hospitals which Islam inherited from the Greeks and which it continued up to the Crusader period.<sup>85</sup>

In recent years many more papers have been written on various topics pertaining to the Order of St John and many of these been connected in one way or another to medical practices used in the Hospital and their sources. "The diffusion of Greco-Roman medicine into the Middle East and the Caucasus" by Savage-Smith and "Medical practice and manuscripts in Byzantium" by Bennett illustrates this development.<sup>86</sup> These are useful for background information although they give suggestions only as to the standards of medical knowledge and practice in the Jerusalem Hospital.

Works which have been used in order to understand some of the common practices which were in vogue in the Jerusalem Hospital at that time, such as the use of urine in diagnosis, include Shahine, *The Arab contribution to medicine*; Ullmann, *Islamic medicine*; Graziani, *Arab medicine in the eleventh century as represented in the works of Ibn Jazlah*; and Rashed, ed., *Encyclopedia of the history of Arabic science, Volume 3*.<sup>87</sup>

Faith Wallis has examined aspects of the use of urine testing in "Signs and senses: diagnosis and prognosis in early medieval pulse and urine tests". This article approaches the topic from the point of view of a teaching compendium made for use in the abbey of Monte Cassino around 1000. It shows that at that period Western physicians "lived in a religious and legal

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<sup>85</sup> Allen, "Hospice to hospital", p. 462.

<sup>86</sup> Savage-Smith, "Exchange of medical and surgical ideas"; Bennett, "Medical practice and manuscripts".

<sup>87</sup> Shahine, *Arab contribution*; Ullmann, *Islamic medicine*; Graziani, *Arabic medicine*; Rashed, *Arabic science*.

culture” and “doctors did not learn pulse and urine diagnosis from theory, for they did not need theory to practice”.<sup>88</sup>

Edgington has suggested that Western doctors were not as theoretical as the Islamic or Greek doctors; however, a number of scholars have a qualified view of this concept. In “Practice versus theory: tenth-century case histories from the Islamic Middle East”, Alvarez-Millan has analysed the case-book of the Muslim doctor known to the West as Rhazes. She concludes that the theory and advice given in theoretical medical books was not actually put into practice and adds that “it appears that the learned treatises served other purposes than determining medical practice”.<sup>89</sup>

In “The Practice of surgery in Islamic lands: myth and reality”. Savage-Smith agrees with Alvarez-Millan, basing her opinion on the study of four Islamic doctors; Rhazes, Haly Abbas, Albucasis and Avicenna (here using their European names). She compares theories given in treatises with the actual practice of Islamic doctors, concluding that there is a lack of evidence in practice that “complex or invasive surgical procedures’ were carried out. Also there were statements by some of the doctors to the effect that such techniques were unknown at the time or should be avoided”.<sup>90</sup>

The Hospital in Jerusalem was open to both Western and Eastern methods of handling and treating the sick. However the actual detailed practice of medicine in the Jerusalem Hospital and whether influences on it originated from the West or the Middle East sources is difficult to establish.

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<sup>88</sup> Wallis, “Signs and senses”, p. 278.

<sup>89</sup> Alvarez-Millan, “Practice versus theory”, pp. 293, 305-6.

<sup>90</sup> Savage-Smith, “Surgery in Islamic lands”, p. 308.

The Statutes of the Order reveal that the Hospitallers employed doctors in their Hospital work,<sup>91</sup> which suggests they would have been chosen from locals. The evidence for medical treatment suggests that the Hospital followed the generally accepted contemporary medical practices available in the East.

The legal texts known as *Assises de la cour des bourgeois* provide valuable evidence for the standards required of doctors practising in the Kingdom of Jerusalem. Although they were compiled in Acre between 1240-1244, their content suggests that they were in use at an earlier date during the twelfth century. Both Conrad and Mitchell have discussed them, Conrad giving detail comments on the actual texts and Mitchell placing them within a definite historical context.<sup>92</sup>

A number of publications and papers on general topics connected to the subject of the Order of St John and the serving brothers may be mentioned. Helen Nicholson has written extensively on the subject of the Hospitallers including their history, comparison with other military orders, and the treatment of the Hospitallers in novels and romance. In *Templars, Hospitallers and Teutonic Knights, images of the Military Orders* she discusses some of the charitable work of the Hospitallers in Italy. This includes discussion of the only saints of the Order and their caritative service. She considers that the emphasis on caring in Italy may suggest that Italians were more interested in the caritative work of the Hospitallers than in the exploits of the knights.<sup>93</sup>

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<sup>91</sup> See Chapter 9.

<sup>92</sup> Conrad, "Usama ibn Munqidh and other witnesses", pp. xviii-li; Mitchell, *Medicine in the Crusades*, pp. 15, 222-223.

<sup>93</sup> Nicholson, *Templars, Hospitallers and Teutonic Knights*, p. 120.

Burgtorf has been the only historian to examine in depth the history of the Order from the outlook of the serving brothers. His work centres on “the interpretation of early headquarters’ structures, strategies for adapting to new challenges and regulations concerning interaction and internal control mechanisms”.<sup>94</sup> He draws from of the various statutes those officials and brothers who either held or were given positions within the Order, emphasizing that Hospitaller management was a complex affair which both had and needed to have many junior positions in order to function smoothly. From this it follows that the serving brothers who filled some of these positions were an essential component of the Order.

Archaeology has played an important part in understanding the size and importance of Hospitaller buildings in Jerusalem and Acre as well as of churches and settlement in Crusader Palestine. Particularly important are Pringle, “Churches and settlement in Crusader Palestine”; Kennedy, *Crusader castles*, and Goldman, *Akko in the time of the Crusades: the convent of the Order of St John* and idem “The hospice of the Knights of St John in Akko”.<sup>95</sup>

Pringle mentions the various Greek monasteries which existed in the Holy Land. Although some of these had hostels, none appear to have been taken over by the Hospitallers. However, Amouroux does mention some which may have influenced the work of the Hospitallers.<sup>96</sup> Kennedy is useful for the date of the first Hospitaller military commitment, believing that the first

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<sup>94</sup> Burgtorf, “Subordinate Headquarters Officials”, p. 218.

<sup>95</sup> Pringle, “Churches and settlement”; Kennedy, *Crusader castles*; Goldman, *Convent of St John* and “Hospice of the knights”.

<sup>96</sup> Amouroux, “Creation of hospitals”, p. 33.

castle taken over by the Hospitallers was Calansue which was occupied in 1128, eight years prior to Bethgibelin.<sup>97</sup>

Goldman exposes the extent and impressiveness of the Hospitaller site in Acre. His first article in *Archaeology* introduced the excavations which preceded the more extensive work of 1994 and referred only briefly to the *Domus infirmorum* shown on a drawing in 1686 by D'Orcières.<sup>98</sup> However, in his later work Goldman refers to the Puteoli map of 1321 and believes that an oblong building named as *Domus Infirmorum* on the map “was very likely this Infirmary”.<sup>99</sup> As well as identifying the *Infirmorum*, Goldman believes that the building named by Puteoli as the *Hospitale*, which is the largest remaining building in the Hospitaller complex, “comprised not only the seat of the Order and the residence of the Grand Master, but also the great hostel where Crusaders and pilgrims, who had arrived in great numbers almost daily, found their first accommodation. In the *Domus Infirmorum* nearby, the sick and the invalid received treatment and, if necessary, a bed”.<sup>100</sup>

Phillips’s “Archbishop Henry of Reims and the militarization of the Hospitallers”,<sup>101</sup> concerns a letter from the Master Jobert to the Archbishop of Reims, requesting some property in the Archbishop’s diocese. Phillips points out that Jobert does not mention military brothers, only spiritual and pastoral activities and the Order’s prayers for the Archbishop. The letter is dated later than the near bankruptcy of the Order due to its military activities and the warning it received from the pope to concentrate on its caritative works. Since

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<sup>97</sup> Kennedy, *Crusader castles*, p. 58.

<sup>98</sup> Goldman, “Hospice of the knights”, pp. 188-189.

<sup>99</sup> Goldman, *Convent of St John*, p. 22.

<sup>100</sup> Goldman, *Convent of St John*, pp. 6-7.

<sup>101</sup> Phillips, “Henry of Reims”.

Jobert wrote to someone who was part of a network of individuals who had supported the Order, the Master may have written without mentioning the military activities because this may have caused concern in Europe.

In “The sergeants of the Military Order of Santiago” Martinez traces the idea of *sergent*, which at first meant the lowest of servants, to its meaning in the thirteenth to fifteenth centuries, of soldier on horseback. In the thirteenth century in the Order of Santiago a *sergent* was a soldier on horseback who served with the knights though of a different social bracket to them. The word *sergent* could be applied to vassals or commoners in Spanish and could also mean a squire or servant. It seems that in Spanish practice *sergents* came from many different social origins and could also be associated with the idea of a servant squire.

The title *sergent* was also used by the Hospitallers.<sup>102</sup> The term military sergeant or brother was first used in Alphonso’s Statutes of 1206 which makes it possible that there was a similarity between the two orders according to Martinez. However there are insufficient references to *sergents* in the statutes of the Order of Santiago to fully explain their role and this makes it difficult to be definite of any meaning of the term. It is not possible to equate *sergent* in both orders to exactly the same position, even though they were similar in being horse soldiers. More will be said about sergeants at arms in the Order of St John later.

A group of articles that refer to the caritative work of the Hospitallers outside Palestine offer little information. In “Provision of charity and hospital

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<sup>102</sup> Martinez, C. de A., “Sergents of the Military Order of Santiago”, in H. Nicholson, ed., *The Military Orders. Volume 2: welfare and warfare* (Aldershot, 1998), pp. 225-31.

care on Latin Cyprus”, Coureas makes a passing reference to the fact that the Order of St John had a presence on Cyprus dating to no later than 1203. However, the record of work done on the island by the Order only dates from 1297, when Pope Boniface VIII encouraged the clergy to support the Hospitallers. Among his reasons given for doing this was an allusion to a new Hospital for the sick and the poor recently built at Limassol.<sup>103</sup>

Williams and Zervos’ article “Frankish Corinth: 1995”, in discussing an interesting hospital site at Corinth mention that the Hospital of St Sampson at Corinth was placed under the control of the Hospitallers by Pope Clement V in 1309, and surmises that alterations may have been made by the Hospitallers to this hospital to cater “for the poor and sick who were not housed within the hospice itself”.<sup>104</sup>

In “The Hospitallers in twelfth-century Constantinople”, Luttrell refers to a letter of Pope Alexander III of 1163 which shows that the Order of St John had a *domus or prioratus* in Constantinople. He then suggests that the Hospitallers may have had a *domus* and church somewhere in Constantinople at an earlier date, since Western travellers generally passed through Constantinople on the way to Syria. Luttrell also suggests the Hospitallers may have taken over properties such as those belonging to the Amalfitans in Constantinople around the 1060s. The suggestion is that the Constantinople hospice was part of the route taken by Hospitallers and pilgrims to Syria. However, after 1182 Westerners preferred to travel to the

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<sup>103</sup> Coureas, “Hospital care on Latin Cyprus”, p. 42.

<sup>104</sup> Williams and Zervos, “Frankish Corinth”, p. 38.



Holy Land by sea as “political conditions had in any case become unfavourable to Latin communities”.<sup>105</sup>

Examination of the secondary sources has shown that much of the circumstantial evidence is piecemeal. Nevertheless a great many authors and sources have assisted in placing the serving brothers of St John and their caritative service to pilgrims and poor into bolder relief as compared to the military brethren of the Order.

Few scholars have started from the point of view of the serving brothers and their caritative work for the Order of St John. Some have looked at the Order from a general point of view and have concentrated mainly on the work of the knights while some have been concerned only marginally with the subject studied here. However, there has been almost a total neglect of the history of those brothers who spent their lives concentrating on caritative work within the Order. This has also meant that no scholar has given time to try and understand the various reactions of these brothers to the changes taking place around them, and the psychological and theological challenges they faced.

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<sup>105</sup> Luttrell, “Hospitallers in Constantinople”, pp. 227-28, 232.

## Chapter 2

### Hospitaller Origins c.1170-1099

This chapter examines and reassesses previous opinions of Hospitaller origins and offers new insights into their early connection with St Mary of the Latins. This has not been attempted previously, neither has the way in which the monastery and its hostel arranged their separation and organization. Emphasis is also given to the way in which the original purpose of caritative ministry was enshrined in the Miracula myth which made no mention of knights. Most of all the importance of the close connection between the hostel and Monte Cassino has been made clearer. It is pointed out that as a Benedictine monastery the Hospitaller monks were well prepared by their Rule and behavioural pattern to give humble service to the sick and poor.

The opinion of such scholars as Riley-Smith,<sup>1</sup> that the Hospitallers were lay brothers is rejected, and argument has been used to show instead that they were professed brethren, and therefore fully accepted Benedictine monks. Because of this, it may be claimed that Gerard, the first organizer of the hostel, was appointed by the abbot as an infirmarian, cellarer or guest master of the monastery organization. All of these points made significant contributions to the understanding of the origins of the Order of St John, and have not been examined previously at depth.

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<sup>1</sup> Riley-Smith, *Knights*, p. 38.

The Hospitallers or, as they became known later, the Order of St John of Jerusalem, played an important part in the history of the Holy Land during the twelfth and thirteenth centuries.<sup>2</sup> Although their later fame was centred on their military brothers or knights and their contribution to the defence of the Crusader States, the development of the knights would not have been possible without the early and continuing contribution of the serving brothers. The order was created to care for pilgrims who needed shelter and rest when they came to Jerusalem to visit the holy places.

This thesis examines the establishment, roles, progress and the caritative ministry which the serving brothers exercised for pilgrims, the sick and the poor. Although the serving brothers continued in existence and developed their humane ministry, alongside the military brothers, their service and contribution has been largely overlooked.

During the first period of the Order, from its initial beginning to the capture of Jerusalem by the First Crusade, the reasons lying behind the Order's establishment as a hostel, or hospice, for pilgrims in Jerusalem need to be considered. Who initiated the idea, exactly what was this idea, and who was to administer their plans?

The original hostel was within the actual building of St Mary of the Latins and under the authority of its abbot. Since that monastery followed the example

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<sup>2</sup> The words *hospitaller* and *hospitalliers* were used as early as 1100 but the title Order of St John of Jerusalem was first used after the papal bulls of 1113-1154 took effect. Citing, Beltjens, *Origines del'Ordre de Malte*, pp. 156 and 369; Delaville le Roulx, *Cartulaire*, vol. 1, *Hospitalliers* in no. 2, *Hospitaller* in no. 17; Riley-Smith, *Knights*, p. 41.

of Monte Cassino and the Benedictine Rule, the theological reasons which lay behind the endeavour will help to explain the idealism which inspired the early monks who first worked in the hostel, within the context of contemporary monasticism and various innovations taking place at the time.<sup>3</sup>

There are three important issues. How did the monastery regard its hostel? How was the latter organized? And, who actually served the visiting pilgrims? How could a Benedictine monastery justify working, not only for the care of its own sick brethren, but also accept responsibility for hospitality to visitors, pilgrims and the sick to the degree that occurred in Jerusalem? There must have been some kind of arrangement which allowed St Mary of the Latins to continue to function as a monastery and not become dominated by its hostel. Finally, who were the men who served the needy? Were they monks, lay-brothers, *conversi*, or perhaps paid lay servants who worked under the authority of the abbot, cellarer and infirmarian of the monastery?

For many years the fundamental reason for the existence of St Mary of the Latins was to provide accommodation for pilgrims to Jerusalem, Amalfitans at first and later many others. As such, the first Benedictine monks in the monastery were obliged to include hospitality and care in the Hospital as part of their responsibility. The monastery had to be prepared for an ever increasing number of pilgrims and depended to a large degree upon the work of the serving brothers or those brothers who organized that ministry.

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<sup>3</sup> Holtzmann, "Papst-,Kaiser-Und Normannenurkunden", Paschal II's bull, 19 June 1112, p. 51, ll. 13-16, explains that St Mary of the Latins was to follow the traditions of Monte Cassino.

William of Tyre has given the clearest description of the beginning of the Hospital and his presentation is the earliest recorded account of its foundation. He wrote that merchants of Amalfi built a monastery in Jerusalem near the Holy Sepulchre which became known as S Maria Latina or St Mary of the Latins.<sup>4</sup> At that time the Egyptians controlled Palestine. The Amalfitans knew the Egyptian Caliph through their trading connections, and gained permission to build a place in Jerusalem, where pilgrims from Amalfi could stay during their visits to the Holy City.<sup>5</sup> This must have taken place in the years before 1070 because Jerusalem was lost to the Turk Atsiz in 1071.<sup>6</sup>

When the building was completed, the Amalfitans arranged for the monastery to be staffed by an abbot and monks. The complex was large enough to contain a house for the monks, a church dedicated to St Mary, and rooms suitable for entertaining guests from their city.<sup>7</sup> A little time after its establishment the Amalfitans built a second convent for women pilgrims visiting Jerusalem. This included a church dedicated to St Mary Magdalene and was built close by St Mary of the Latins.<sup>8</sup>

Pilgrims were visiting Jerusalem from many nations, both nobles and the lower classes, and because of their numbers the monastery began to offer hospitality to other than Amalfitans. Pilgrims often arrived exhausted and poverty stricken due to their unfortunate experiences while travelling to the East through

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<sup>4</sup> William of Tyre, *Chronicon*, 1. 10. 22-6 (vol. 63, p. 123).

<sup>5</sup> William of Tyre, *Chronicon*, 18. 5. 1-4 (vol. 63A, p. 815).

<sup>6</sup> Riley-Smith, *Knights*, p. 37.

<sup>7</sup> William of Tyre, *Chronicon*, 18. 5. 9-21 (vol. 63A, p. 815).

<sup>8</sup> William of Tyre, *Chronicon*, 18, 5. 22-32 (vol. 63A, pp. 815-816).

hostile lands.<sup>9</sup> When the brethren of St Mary of the Latins found their initial accommodation insufficient for the growing number of pilgrims a separate hospital was constructed in an area a little to the west of the mother house. In this way they were able to give shelter to pilgrims, whether sick or well, and to provide food for them from what was left over from St Mary of the Latins and St Mary Magdalene.<sup>10</sup>

Within the new and separate hospital the brethren included an altar, or chapel, in honour of St John the Almoner (619-620), who had been patriarch of Alexandria and was renowned for founding hospitals in that city. According to William of Tyre during the years prior to the occupation of Jerusalem by the Crusaders, the monastery and its hospital depended on the support of Amalfi. Each year its inhabitants made collections for the work in Jerusalem and sent their offerings to the Abbot of the Hospital in Jerusalem.<sup>11</sup>

William obviously knew about the stories of the early years of the Hospitallers from his youth in Jerusalem. He had developed a respect for St Mary of the Latins and the monks who had shown dedication in their work of serving the pilgrims. He described them as “holy men” who had taken pity upon suffering visitors, and noted that they had been organized by an upright man by the name of Gerard who had led them for many years.<sup>12</sup> William emphasized that Gerard had served satisfactorily under the abbot, in other words, that he knew his place within the discipline of ecclesiastical authority.

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<sup>9</sup> William of Tyre, *Chronicon*, 18. 5. 33-42 (vol. 63A, p. 816).

<sup>10</sup> William of Tyre, *Chronicon*, 18. 5. 47-56 (vol. 63A, p. 816).

<sup>11</sup> William of Tyre, *Chronicon*, 18. 5. 63-71 (vol. 63A, p. 817).

<sup>12</sup> William of Tyre, *Chronicon*, 18, 5, 47-56 (vol. 63A, p. 816) and 18, 5, 79-83 (63A, p. 817).

William became critical of the Hospitallers later in the twelfth century and accused them of defying the Patriarch and breaching church order to suit themselves. He also accused them of disrespectful treatment of bishops in whose dioceses the Order possessed properties.<sup>13</sup> However he did not feel this way about the Hospital in its early years. He also commended the sister in charge of the women's hostel called Agnes, and described her as being a noble woman.<sup>14</sup> His admiration for Gerard suggests that he regarded him as a worthy leader.

As well as William of Tyre's account of the foundation of the Hospitallers there exist some legends, which have been called the *Miracula*, and which came to be recounted in part by anonymous historians or by an unknown chronicler. These legends emphasized the importance of the place and work of the Hospital and tried to establish its foundation during the reign of the Seleucid king Antiochus IV Epiphanes (175-163 B.C.E).

The *Miracula* began with a story of how the original hostel was established on the site of King David's tomb and Calvary. They told how Antiochus and Melchiazar decided to build there a house for the poor and needy. Judas Maccabeus then supported the house financially, and before Antiochus died he created a place in the house for a *coenobium*, or monastic dwelling, which was to exalt the cause of the poor. The following miracles then explained how the prophecy was fulfilled. Zachariah, the father of John the Baptist,<sup>15</sup> was told told

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<sup>13</sup> William of Tyre, *Chronicon*, 18, 3, 1-56 (vol. 63A, pp. 812-813).

<sup>14</sup> William of Tyre, *Chronicon*, 18, 5, 78-80 (vol. 63A, p.817).

<sup>15</sup> Sinclair, *Riwle*, p. xv. The Anglo-Norman *Riwle* has been dated by Sinclair between 1154-1189, p. vii.

to administer the house before the next guardian, Julianus, took over until the Son of God appeared there with his disciples.

According to the *Miracula* Jesus often met in the house of the Hospital with his disciples, and the legends reported some of his supposed conversations. A warning is then described in a story of Ananias and Sapphira, who deceived St Peter over their financial donation to the early church. Deacons protected the house until Jesus returned to reveal himself to his disciples and Thomas following his Crucifixion and Resurrection. There followed two exhortations, the first regarding the Fall of Adam and our Redemption by Christ, the second the universal desire to attain heaven.<sup>16</sup> The last section of the legends began with a reference to Raymond du Puy as Master of the religious community, about whom the Son of God would speak on Judgement Day. Then it expanded into the subject of the Last Judgement. There followed a brief introduction to the *Riwle*, which mentioned Raymond's intention and the way in which he consulted the worthy brethren and learned church authorities. Lastly, the unknown author gave some of his reasons for attempting such a translation, presumably from the Latin.<sup>17</sup>

Riley-Smith regards the *Miracula* as purely legend, as have historians since William of St Stephano wrote his account of the Order of St John around 1290-1302.<sup>18</sup> However, one must appreciate the use and purpose of the *Miracula* as legends within their original setting. Scholars such as Carruthers interpret

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<sup>16</sup> Sinclair, *Riwle*, p. xv.

<sup>17</sup> Sinclair, *Riwle*, pp. xiv-xv.

<sup>18</sup> Guillaume de Saint-Estève, *Exordium Hospitalariorum*, pp. 422-427.



legends allegorically and believe they were used to inspire readers. Quoting Southern, she says that twelfth century writers looked to the past, “only for the quite practical purpose of equipping themselves to look forward”.<sup>19</sup> In this regard the Hospitaller miracle stories are similar to other miracle stories typical of the Middle Ages. Bull gives the *Gesta Francorum* as an example which, like many other crusader narratives, contains material of a miraculous or marvelous nature.<sup>20</sup> Miracle stories were given historical settings to make them appear authentic.<sup>21</sup>

The question of whether the *Miracula* of the Hospitallers were interpreted as history or legend at the time of writing was not important to readers or listeners in the Middle Ages. The real value of the stories in the *Miracula* was to inspire in the Hospitallers a belief in their divine foundation and the importance of their caritative service to God and pilgrims carried out by the serving brothers. Each of these wonder-stories was based upon scripture and was meant to strengthen religious devotion regarding the purpose of the Hospital, its sacredness, age, motivational theology and protection by God.

The emphasis in the *Miracula* was entirely on the hostel and its sacred duty to care for the pilgrims and poor. There was no mention of the knights or military brethren, even though Raymond du Puy was given a prominent role towards the end. It is possible, therefore, that some parts of the legends were written earlier than others and before the advent of the military brethren. On the

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<sup>19</sup> Carruthers, *Book of memory*, pp. 335-336, n. 11; Southern, *Medieval humanism*, p. 126.

<sup>20</sup> Bull, “Miracle stories”, p. 26.

<sup>21</sup> Bull, “Miracle stories”, p. 27.

other hand, they may have been composed by a supporter of the serving brothers who wished to emphasize the importance of their place in the order and to so give them encouragement.

Sinclair believes that the *Miracula* were in existence by the second half of the twelfth century. Because of this he proposes that they may have been composed as an attempt to answer Pope Alexander III's rebuke of the Order for spending too much money on the knights to the detriment of the caritative work of the serving brothers.<sup>22</sup> However, no matter how the *Miracula* are considered they emphasized the religious background of the serving brothers and their caritative ministry.

The nature of the work of the serving brothers in caring for pilgrims and the poor intensified during the years prior to the capture of Jerusalem by the first Crusade. It became necessary to separate the Hospital from the main monastery and a special hospice was built for men a short distance away from St Mary of the Latins and in close proximity to an early Byzantine Church dedicated to St John the Baptist.<sup>23</sup>

The Hospital began as an essential part of a Benedictine monastery. In the Benedictine rule compassion for sick brothers, travelers and pilgrims, was an integral part, as well as regard for the weakness of children and the aged. As such, it was carried over into the ministry of the Hospital. Previous religious rules such as those of Basil, Augustine, and Cassian did not show such interest and

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<sup>22</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 391 (1168-1170).

<sup>23</sup> Luttrell, "Earliest Hospitallers", p. 38.

concern for, as well as a willingness to give practical assistance to, suffering fellow Christians.<sup>24</sup>

Within the framework of monastic life, it was expected that a house would care for any brothers who were sick or too weak to follow the common observances. In chapter 31 of the Benedictine Rule, responsibility for care of the sick, *infirmi*, children, *infantes*, guests, *hospites*, and the poor, *pauperi*, was assigned to a cellarer, *cellarius*, or steward.<sup>25</sup> He was the monk in charge of the provisions of the house and of housekeeping. Chapter 36 stated that:

Above and before all things care is to be taken of the sick, so that just as, in truth, Christ himself, they will be cared for; for he said, “I was sick and you visited me”, and “What you did to one of these least ones, you did to me”.<sup>26</sup>

In order to follow this directive special accommodation was provided for sick brethren. Chapter 36 of the Rule stipulated that sick brothers were to be assigned a special or separate room. An attendant monk, who was God-fearing, diligent and careful, was to be appointed to be in charge of this sick room or Infirmary. The abbot was responsible for the cellarer and the attendants who worked in the sick room and was to see that the sick were not neglected.<sup>27</sup> This love of the brethren was carried over into a ministry for other Christians in distress and was to become part of the wider philosophy of the Order of St John.

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<sup>24</sup> McCann, *St Benedict*, p. 259.

<sup>25</sup> McCann, *St Benedict*, ch. 31, pp. 80-3.

<sup>26</sup> McCann, *St Benedict*, ch. 36, pp. 90-1. *Matthew*, 25. 36, 40.

<sup>27</sup> McCann, *St Benedict*, ch. 36, pp. 90-1, pp. 260-1.

The room, *cella*, for sick monks was organized and run by a monk who served under the cellarer and who became known as the infirmarian. In Benedictine monasteries the infirmarian could also be called an almoner, *elemosynarius*, or an attendant, *servitor*, and this position was filled by one of the brothers. If necessary an infirmarian was given assistants, *servitores*. He was required to be God-fearing, which, interpreted, meant that he was expected to be conscientious, prompt, attentive and considerate.<sup>28</sup> Many large monasteries provided a separate building with its own chapel, cloister, kitchen, refectory and dormitory for the infirmary.

In keeping with the generally positive attitude to hospitality in Benedict's Rule, visitors were to be given a fitting welcome suitable for their various social levels. The Rule delineated three divisions of guests. There were those who were of the household of faith, *domestici fidei*, and who were given a special welcome as clergy. Secondly there were pilgrims, *peregrini*, who were described as searching for God. These were to receive assistance in order to facilitate their belonging to God in a special way. Monasteries were to offer pilgrims hospitality in an effort to be a substitute to them for their homeland. Thirdly, Benedict believed that hospitality should be extended to the poor, *pauperes*, because in them Christ was more truly welcomed.<sup>29</sup>

All guests staying in a Benedictine monastery were to be treated like Christ since he had said "I was a guest and you took me in", *Hospes fui, et*

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<sup>28</sup> McCann, *St Benedict*, ch. 36, pp. 90-1; also pp. 260-1.

<sup>29</sup> McCann, *St Benedict*, pp. 332-3.

*suscepistis me.*<sup>30</sup> Special honour was offered to clergy and pilgrims and when any guest was announced the superior or one of the appointed brethren would meet him. After prayer in the oratory all united in a kiss of peace and the host sat with the guest while the divine law, a reading from Holy Scripture or from a Catholic author, was read. Following the reading the guest was to be treated with all possible kindness, *humanitas*, which was interpreted by the monks to mean care and assistance.<sup>31</sup>

At some stage following the abbot and brethren were to wash the feet of the guest. This ceremony, maundy (*mandatum* or command), was not usually carried out immediately upon the guest's arrival but at a fixed time set aside for it each day. It was mostly performed in the chapter room before or after a meal, or else in the evening after Compline.<sup>32</sup> When all the various ceremonies were completed, and if the guest or guests were healthy, they were organized to perform some tasks in the running and work of the house. They were expected to assist in some appropriate way.<sup>33</sup>

Although Benedict stipulated that each monastery was to have a guest room, *cella hospitem*, which was mostly not a single room but a large apartment building, the Rule did not specify where this addition was to be situated. However, custom did not permit it to be alongside the cloister, dormitory, or refectory of the brothers. The Rule stipulated that the guest-house was to be

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<sup>30</sup> McCann, *St Benedict*, p. 330. *Matthew*, 25.35.

<sup>31</sup> McCann, *St Benedict*, pp. 334-6.

<sup>32</sup> McCann, *St Benedict*, ch. 53, pp. 120-1; also p. 337.

<sup>33</sup> McCann, *St Benedict*, p. 338.

assigned to a brother and two monks were to be allotted to the guests' kitchen for two years.<sup>34</sup>

After visitors had arrived at a monastery and had been greeted by the porter and then by a *prior* (a superior), or guest master, or a group of monks, it was the duty of the prior to decide if they should be admitted into the hostel for visiting monks or into the sections designated for poor pilgrims and the sick. Just as the Infirmarian was required to be compassionate and responsible, so also was the guest master expected to be a monk driven by the fear of God. He was the only monk permitted to have any dealings with the guests of the monastery since all monks were normally forbidden to talk to guests.<sup>35</sup>

Associated with the care of sick brethren the Benedictines extended hospitality to strangers and pilgrims, some of whom would have been ill, incapacitated or feeble. Although there was a general acceptance of all comers, on occasions it was necessary to restrict or curtail this service.<sup>36</sup> The Rule did not specifically mention women being offered hospitality. However, in some monasteries they built hospices outside their enclosures especially for women and young children.

Habitual criminals and evil characters were usually refused entry, as were heretics and those who were deemed to be enemies of the Catholic Church, presumably evil doers, the excommunicated or aggressive non-believers. It seems that extreme measures were taken at times to protect monasteries and in

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<sup>34</sup> McCann, *St Benedict*, ch. 53, pp. 120-1.

<sup>35</sup> McCann, *St Benedict*, ch. 53, pp. 120-1 (guest master) pp. 118-23 (porter and guest master); ch. 66, pp. 152-153 (porter); also pp. 333, 340-1.

<sup>36</sup> McCann, *St Benedict*, ch. 53, pp. 118-23.

some monasteries two brothers were appointed to sleep in the guest-house. This was to guard the door from forced entry and to stop visitors who may be tempted to steal bedding or other articles from the hospice.<sup>37</sup>

There was a similarity between some influential monasteries of Europe and St Mary of the Latins in that they were prepared to service pilgrims and the poor. One example was St Gall whose abbot Gozbert in 830 wanted to refurbish the monastery and commissioned the plan of St Gall as “an instrument of policy to inform and regulate monastic planning in the Frankish empire”.<sup>38</sup>

The plan of St Gall was intended as an archetype for a monastery and included a building for visiting monks, a house for distinguished guests and a special entrance into the main building for all visitors. There was a separate infirmary, which had a chapel, a kitchen and a bathroom, as well as a cloister for the sick. Alongside the facilities for the sick there were buildings for physicians and for bloodletting. There were two dormitories, one for those suffering from acute illness and a second for those with minor ailments, the aged, and the infirm cared for by the monastery. There was an apartment for the master of the infirmary and the infirmary consisted of several rooms in order to be prepared for all exigencies,<sup>39</sup> including patients vomiting, having meals, or requiring to take care of their natural needs.

Carruthers believes that the plan was meant not simply as a map, but also a “meditation machine”, which could be used inspirationally as an ideal layout for

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<sup>37</sup> McCann, *St Benedict*, p. 331.

<sup>38</sup> Price, *St Gall in brief*, p. 1.

<sup>39</sup> Horn and Born, *St Gall*, vol. 1, p. 314.

the life of monks. She believes that in this way it was a “monastic mnemonic” device, to be used in the spiritual lives of the monks, to remind them of their separation from the world as well as their priorities and the vagaries of human experience.<sup>40</sup> If both the practical and mnemonic uses are accepted, then the Plan of St Gall may have been basic to the design and inspirational use of many monasteries in the West.

Corbie was one monastery which was similar in layout to the plan of St Gall. It had one residence for wealthy travellers, which was managed by a guest master. A second was for poor visitors, which included pilgrims and the sick, as well as the poor of the neighbourhood. This second building was termed the alms-house or almonry.<sup>41</sup> Also at Corbie the infirmary had its own oratory or chapel so that the sick could attend Mass. If they were too weak to be taken into the oratory the service was read to those in the sick dormitory.<sup>42</sup> Together with other monasteries of the time, St Mary of the Latins would have observed such arrangements in the way it received, housed, and cared for visitors.

The influential monastery of Cluny entertained many guests and its guest-rooms were made up of two buildings.<sup>43</sup> During the eleventh century Cluny became a leader in reforming Benedictine monasteries and its influence was powerful in Rome and Italy.<sup>44</sup> This influence was to reach to Monte Cassino and St Mary of the Latins. The connection between Cluny and Monte Cassino began

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<sup>40</sup> Carruthers, *Book of memory*, p. 229.

<sup>41</sup> Price, *St Gall in Brief*, pp. 11-12.

<sup>42</sup> Hildemarius, *Expositio*, vol. 1, pp. 406, 418, 422; vol. 2, p. 211

<sup>43</sup> McCann, *St Benedict*, p. 339.

<sup>44</sup> Hunt, *St Hugh*, p. 139.



late in the tenth century when Odo (878-942) the second abbot of Cluny visited Italy several times and Alberic,<sup>45</sup> ruler of Rome invited him to be director of Roman monasteries to reform them, including Monte Cassino.<sup>46</sup> Odilo, the fifth abbot of Cluny, visited Italy nine times and kept in contact with a number of Italian monasteries including those of Rome.<sup>47</sup>

During the eleventh century many popes and bishops had been monks at Cluny, including the bishop of Salerno. Hugh, abbot of Cluny 1024-1109, had close ties with church leaders and attended the Lateran Council of 1050 under Frederick of Lorraine, who was abbot of Monte Cassino.<sup>48</sup> According to L'Huillier's list of Cluny's dependent priories in Italy, even after Hugh's death Cluny and Monte Cassino continued to have a special connection.<sup>49</sup> So close was the link between Cluny and Monte Cassino that when the later Pope Victor III was abbot of Monte Cassino (1068-80), a confraternity was set up between the two monasteries.<sup>50</sup>

At the time of the foundation of St Mary of the Latins, Cluny's community consisted of sixty four literate monks and at least twenty seven illiterate *conversi* monks. The eleventh century was one of large communities with increasing numbers and a tendency for monasteries to accept all applicants, even the excommunicated. Many wanting to join a monastery did so to find security in old

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<sup>45</sup> Antonelli, "L'opera di Odone di Cluny in Italia", pp.26-7; Rosenwein, *Cluny in the tenth century*, pp. 49-50.

<sup>46</sup> Rosenwein, *Cluny in the tenth century*, p. 50; Balzani, "Desructio monasterii Farfensis", pp. 39-40.

<sup>47</sup> Hunt, *St Hugh*, pp. 21-4.

<sup>48</sup> Hunt, *St Hugh*, p. 142.

<sup>49</sup> L' Huillier, " I priorati cluniacensi, in Italia", p. 25.

<sup>50</sup> Auctore Petro, no. 51, p. 741.

age and a place to be buried, as well as to seek salvation. This willingness to accept all applicants became a problem later in the century in the relationship between bishops and monasteries.<sup>51</sup>

The formation of a confraternity between Cluny and Monte Cassino brought a close relationship between the two monasteries with regard to their mutual traditions and practices. A confraternity meant that monks from Monte Cassino could visit Cluny to learn its *ordo* and *horarium*. Monks returned to Monte Cassino and conveyed what they had learnt, and consequently Cluny maintained its influence as a reforming monastery. It is possible that the liturgical traditions of Cluny would have been established in St Mary of the Latins by its founding monks trained in the ways of Monte Cassino and Cluny.<sup>52</sup>

Cluny was innovative in a number of ways. Hugh attempted to lighten the number of lessons read by revising the services of obligations and vigils. Benedict had stipulated that twelve lessons and a Gospel portion be read at Matins on a Sunday and Hugh changed the number to nine, and on other occasions to five or three.<sup>53</sup> In actual fact the Benedictine Rule varied between one, four and thirteen readings in the Divine Offices on appropriate occasions, often in response to requests from benefactors.<sup>54</sup>

A change to nine lessons from twelve was recorded in the Hospitaller *Usances* of 1239 and the Statutes of 1294, which illustrated the flexibility of the

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<sup>51</sup> Hunt, *St Hugh*, pp. 82, 85.

<sup>52</sup> Hunt, *St Hugh*, p. 84.

<sup>53</sup> Hunt, *St Hugh*, "The Horarium", pp. 99-104.

<sup>54</sup> McCann, *St Benedict*, pp. 48-59.

liturgy within the daily hours of the Hospital.<sup>55</sup> Dondi refers to these changes to nine lessons as being an introduction of a canonical liturgy.<sup>56</sup> However this is hard to accept since Hugh of Cluny had introduced the possibility of nine lessons into Benedictine traditions over a hundred years previously.

Because of the connection between Monte Cassino and St Mary of the Latins, Beltjens has suggested that “Maurus”, actually Pantaleone di Mauro, an Amalfitan merchant, was responsible for asking abbot Didier of Monte Cassino to supply some Benedictine monks to staff the Jerusalem monastery. His reasons for this are that Maurus donated to Monte Cassino a decorated brass door from Constantinople for its church. As a result Didier invited Maurus to the consecration of the church by Pope Alexander II in the 1070s and Maurus took vows and ended his life in Monte Cassino.<sup>57</sup>

The spirit of the Benedictine Rule suited the work of caring for pilgrims and the sick who visited Jerusalem. Monks were conscientious servants of God and of pilgrims. Hence it is important to understand the principles followed by the Benedictine monks of St Mary of the Latins, which made them suitable to be serving brothers.

The Rule of St Benedict expected that an abbot would assume full responsibility for the hospice within his monastery and this was the situation as outlined by William of Tyre in his description of the early years of the hospice of St. Mary of the Latins. Benedict also taught that an abbot was to give special

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<sup>55</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, § 124 and vol. 3, no. 4259, § 6.

<sup>56</sup> Dondi, *Canons Regular*, p. 42. The relationship between the Hospital and the Canons Regular is discussed at length in Chapter 3.

<sup>57</sup> Beltjens, *Origines de L'Ordre de Malte*, pp. 58-9, 64-5.

care to the sick, the poor and the pilgrims at all times. Service to the pilgrims at that early stage was organized solely by the monastery under the abbot.

Monks were expected to be humble, obedient and willing to do any work set by the abbot. They were to be content with the meanest and worst of everything and ready to perform any duty given to them as well as to regard themselves as “bad and unworthy workmen”.<sup>58</sup> They were required to serve each other and to serve for a year as servers within the kitchen, a menial task from which no one was excused. The weak were expected to be given care and assistance and all were expected to help in work according to the size of the community.<sup>59</sup>

The Benedictine Rule emphasized that there was to be no distinction between any of the brethren and the abbot was exhorted to keep to this concept as all were one in Christ.<sup>60</sup> This was despite the fact that there were those who may have been unable to sign their profession on paper or who could not meditate or read. Benedict described them as those who were of harder hearts and ruder minds. To them the abbot was to teach the Lord’s commandments in words, as well as being an example by his life.<sup>61</sup> Nevertheless, even though illiterate they were still monks.

Work was an important part of a monk’s life and Benedict insisted that the brothers had to be occupied during certain hours in manual labour. No doubt those monks who were unable to spend time in sacred reading needed to be

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<sup>58</sup> McCann, *St Benedict*, ch. 7, Sixth degree of humility, pp. 44-5.

<sup>59</sup> McCann, *St Benedict*, ch. 35, pp. 86-9.

<sup>60</sup> McCann, *St Benedict*, pp. ch. 2, pp. 18-19.

<sup>61</sup> McCann, *St Benedict*, ch. 2, pp. 18-19; ch. 58, pp. 132-33.

further occupied in work since “idleness is the enemy of the soul”.<sup>62</sup> Despite the limitations of some monks there is no mention in the Rule of any differences before God, between the brothers and all attended the Divine Offices.<sup>63</sup>

Monks were also expected to be practical and daily labour was part of their calling. Sometimes this meant, though not at Cluny, that they could be occupied with physical work for up to five or six hours a day. One example of such practical work was to be in charge of the garden tools and to be responsible for their upkeep and administration.<sup>64</sup> Monks were also expected to assist in reaping and harvesting and were expected to live by the labour of their hands. This may not have been possible in a city like Jerusalem, unless there were some monks who may have spent time on the *casales* later possessed by the Hospitallers.

As well as being humble, dedicated, practical and helpful to each other, monks were expected to be attentive to sick brethren as well as compassionate towards the weak and caring of children.<sup>65</sup> Monasteries had to be prepared for visitors and to have beds ready to receive them.<sup>66</sup> Also within a monastery, craftsmen monks continued their trade in order to contribute their skills; for example the Hospitaller shoemaker in Jerusalem.<sup>67</sup> Even abbots were to show hospitality by having their meals with visitors.<sup>68</sup> Such ideals of life in a monastery show that monks were well suited to care for each other and visiting pilgrims and

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<sup>62</sup> McCann, *St Benedict*, ch. 48, pp. 110-111.

<sup>63</sup> McCann, *St Benedict*, ch. 2, pp. 18-19; ch. 58, pp. 132-3.

<sup>64</sup> McCann, *St Benedict*, ch. 32, pp. 84-5.

<sup>65</sup> McCann, *St Benedict*, ch. 37, pp. 92-3.

<sup>66</sup> McCann, *St Benedict*, ch. 53, pp. 122-3.

<sup>67</sup> McCann, *St Benedict*, ch. 57, pp. 128-9. Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>68</sup> McCann, *St Benedict*, ch. 56, pp. 126-7.

the poor. Followed and put into practice by the monks of St Mary of the Latins, such ideals must have enabled them to fulfil their roles as hospitallers or at least to organize a hospice to accommodate pilgrims and the poor.

As imitators of the lives of their spiritual fathers and the apostles monks were expected to work obediently at tasks assigned to them.<sup>69</sup> Being obedient and dutifully accepting a lowly position from the abbot as well as acting considerately towards those in need, was essential training for serving brothers.

The Abbot of St Mary of the Latins was directly responsible for the organisation and running of the hostel during the years prior to 1099. This means that the relationship between the Hospital and the monastery must have been set up in the traditional manner of the Benedictines. When the hospital building was separated from the main buildings of the monastery<sup>70</sup> it was an indication that the Abbot had realized that the objectives of both were at variance. Nevertheless, he remained in charge of the new building until 1113 and by then the hostel had been the abbot's responsibility for over forty years.

Since a monastery worked on the principle of monks helping each other, and there was a certain amount of sharing and rotation of responsibilities among the brothers in the early years, it could be assumed that up to 1113 all the monks of St Mary of the Latins were serving brothers. That is not to say that all the servile work would have been done by monks, since servants were usually employed to assist. However, organizing the work within the monastery would have been carried out by the leading monks and would have included the work of

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<sup>69</sup>McCann, *St Benedict*, ch. 48, pp. 110-13.<sup>70</sup>William of Tyre, *Chronicon*, 18. 5. 47-53 (vol. 63A, p. 816).

catering for pilgrims and poor. At that early stage all the monks would have been termed “serving brothers” and ministered in various ways the overall aim of the monastery.

This early relationship between St Mary of the Latins and its hospice could not be expected to continue after a separate building was established. The increased number of pilgrims and poor would have been too much for the early organizational arrangements to remain the same. The new situation would have required a larger and separate staff within the new hospice. Since the hospice still belonged to its mother-house, the abbot of St Mary of the Latins would have remained in control and appointed its staff with the assistance of the cellarer and a guest master. The new arrangement of distinguishing the hospice from the monastery would have been in line with that of leading monasteries such as St Gall, Cluny, and Corbie.<sup>71</sup>

The need to increase the work force to handle the added burdens would also have changed the situation of serving brothers. As the responsibilities in the new hostel became more specialized the monks who remained in the monastery would have become isolated from those who spent most of their time in the hostel. Whether the entire body of monks continued to live in the old building, and the brothers connected with the hostel worked from there, is not known though some organizing positions would have remained the same. This would have been necessary since the abbot, cellarer and guest master continued to control the hostel as part of the monastery. This whole situation would have

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<sup>71</sup> Price, *St Gall in Brief*, p.1; Hunt, *St Hugh*, “The Horarium”, pp. 99-104; Price, *St Gall in Brief*, pp.11-12.

begun a larger break between the mother-house and its hostel. The context was different from that of most European monasteries, which had hostels separate from their mother-houses.

The building of a new hostel confirms that the number of pilgrims was increasing and the staff of the hostel must therefore have increased to cope with them.<sup>72</sup> The times were dangerous for pilgrims and they depended on the hostel for respite care and time to recover from their ordeal before visiting the holy places. Pilgrims who had recovered after convalescence were also encouraged to assist in some way and may have stayed on afterwards as *conversi*.<sup>73</sup>

Saewulf, an English pilgrim who visited the Holy Land between July 1102 and September 1103,<sup>74</sup> reported the dangers lying in wait for the unwary pilgrim when journeying from Jaffa to Jerusalem. He described how the Saracens attacked weary individuals and how small parties of unprotected pilgrims left the dead unburied beside the road to be torn by wild beasts. Even the rich and strong were in danger and heat and thirst killed more than the Saracens. Many died because they drank too much.<sup>75</sup>

The early years, when the hospice was part of the actual building of St Mary of the Latins, were important for the development of a unique form of serving brothers. There is no specific evidence of what took place at that time; however, because the Benedictine Rule was standard, we may trace the development of the new form with confidence.

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<sup>72</sup> William of Tyre, *Chronicon*, 18. 5. 51-52 (vol. 63A, p. 816).

<sup>73</sup> McCann, *St Benedict*, p. 338.

<sup>74</sup> Huygens, *Peregrinationes tres*, p. 59.

<sup>75</sup> Saewulf, pp. 63-4, ll. 149-169.



The monk who had been the cellarer would have continued to be over the monk in charge of the infirmary for sick brothers. The infirmary most likely remained within the monastery proper because the infirmary was separate from the hostel for visitors. The cellarer also continued to be in charge of the monk and his two or more associated brethren who served in the hospice. This arrangement would have kept the hospice within the organization of St Mary of the Latins and under the abbot who had been responsible for appointing its staff.

As regards to the staffing of the hospice, scholars have varied in their opinions. Riley-Smith and Luttrell have suggested that St Mary of the Latins may have used lay-brothers in the hostel. Riley-Smith thinks that as the administrator of the hostel Gerard may have been a lay-brother of St Mary of the Latins.<sup>76</sup> Hiestand thinks that at first they may have been a lay community like the Templars. King simply stated that the hostel staff were appointed by the Abbot of St Mary of the Latins. No one has attempted to relate the staff of the hostel to its mother-house and they have not substantiated their opinions.

By the beginning of the eleventh century monasteries had increased in size and many monks now devoted themselves entirely to study while others took holy orders. Lay-brothers became widely used and accepted in the West and it became necessary to define their roles and functions. Lay-brothers came to be understood as: "religious brother[s] under vows, dedicated to a life of toil and occupying an auxiliary position in his community".<sup>77</sup>

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<sup>76</sup> Riley-Smith, *Knights*, p. 38.

<sup>77</sup> Greenia, "Laybrother vocation", p. 39.

One result of the changes taking place was that some servants became included within a monastery's family of brothers.<sup>78</sup> The first example of the use of lay-brothers was in Italy by St Romuald at Camaldoli around 1012, followed soon after by Peter Damian at Fonte Avellana. In their appointment, lay-brothers bound themselves to their abbot and Peter Damian expected them to follow the vows of obedience, stability and perseverance together with obligations to poverty, fasting, abstinence, prayer and chastity.<sup>79</sup>

Abbot William of Hirsau introduced lay-brothers into Germany between 1071 and 1079 and wrote some directives for his *fratres barbati* and *fratres exteriores*.<sup>80</sup> In Heymone's biography of William of Hirsau he recorded that lay-brothers took vows of poverty, obedience, stability (meaning enclosure) and conversion, or dedication to a religious profession.<sup>81</sup> These *fratres exteriores* became monastic servants who were assigned menial tasks and were given the administration of the kitchen. Pope Urban II wrote to Abbot William in 1091 approving the use of lay-brothers, *fratres exteriores*, under vow and added that he had seen this practice in use at Hirsau.<sup>82</sup> However they were not considered to be fully professed brothers.

When Bruno the founder of the Carthusians retired into solitude in 1084 he included two lay-brothers among his companions. They were called Andrew and Warren but this is the only record of any names belonging to eleventh-century

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<sup>78</sup> McCann, *St Benedict*, p. 365.

<sup>79</sup> Greenia, "Laybrother vocation", pp. 40-1.

<sup>80</sup> Greenia, "Laybrother vocation", p. 42.

<sup>81</sup> Heymone, *Sanctus Wilhelmus*, pp. 914-15.

<sup>82</sup> Gregory VII, *Vetera Monumenta*, p. 1407.

lay-brothers.<sup>83</sup> Lay-brothers were also introduced by John Gualbert (1039-1051) at the Benedictine monastery of Vallombrosa in Italy. It was here that the *fratres laici*, *fratres illiterati*, or *fratres barbati* were first called *conversi*, a slight variation on its earlier meaning and use.

Lay servants appear to have increased in number in the eleventh-century and the use of the term lay-brother became confused with *conversus*. At various times and places lay-brothers were known as *conversi*, *laici barbati* and *idiotae*. At first the term *conversi* was used to describe monks who joined an order late in life, as compared to those who joined as children and were called *oblato* or *nutriti*.<sup>84</sup>

There is no record, however of the Hospitallers being called lay-brothers, *fratres laici* or *laici barbati*, or *conversi*, in the papal bulls or correspondence which established their credentials later. This suggests that the formation of the Hospitallers did not follow the contemporary trend of Benedictine monasteries but rather, that St Mary of the Latins considered its hostel or hospice to be an extension of itself, not needing a separate group of brethren termed lay-brothers. The ministry to the pilgrims and poor in Jerusalem was a unique situation. There is no record of any separation of the Benedictine monks of St Mary of the Latins into two groups, of professed brothers and lay-brothers during the formative years, and no brothers are known to have taken special vows or to have been designated as servants of the other monks.<sup>85</sup> When Pope Paschal II referred to

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<sup>83</sup> Guigone, *Vita S. Hugonis*, p. 769.

<sup>84</sup> Greenia, "Laybrother Vocation", pp. 40-1.

<sup>85</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 30, 70; Holtzmann, "Papst-, Kaiser- Und Normannenerkunden".

the Hospitallers in *Pie postulatio voluntatis* (1113), he described them as *fratres ibidem professi* or professed brothers of the hostel. There is no mention of any distinctions within the Order.<sup>86</sup>

Luttrell has also suggested that the early Hospitallers may have been *conversi* who were similar to those employed in European monasteries at that time.<sup>87</sup> It was thought during the early Middle Ages that monks who joined a monastery as adults were of a lower order and class and were to be considered as the “worker bees” of a community. This placed them in a position outside the generally aristocratic and literate choir monks.<sup>88</sup> In an endeavour to help explain the origin of the Hospitallers, Luttrell has quoted the phrase *vitam religiosam fere instituerant*, taken from the *Anonymi Chronicon Amalphitanum*,<sup>89</sup> which may be translated, “they had instituted a semi (quasi) religious life”.

This record from an anonymous source dated prior to 1099 could be interpreted to mean that the monastery of St Mary of the Latins controlled its hostel as a semi religious organization which was made up of monks from St Mary of the Latins assisted by *conversi*. It seems possible that some grateful pilgrims remained to become older monks or *conversi* although it would be wrong to claim they were simple “worker bees” as there was no distinction made between professed brothers.

Cluny in the eleventh century used *conversus* to describe an older lay

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<sup>86</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>87</sup> Luttrell, *Earliest Hospitallers*, p. 29.

<sup>88</sup> De Jong, *Samuel's Image*, p. 129.

<sup>89</sup> Luttrell, “Earliest Hospitallers”, p. 38. Quoting, R. Hiestand, *Die Anfänge der Johanniter*, p. 34, n. 17.

monk who was frequently illiterate but was used as an assistant in the context of the liturgy. In only a few charters are the *conversi* at Cluny referred to as having any responsibilities relating to the domain itself. According to the charters, the estates or deaneries of Cluny were farmed by serfs, not monks or lay-brothers. It seems from this evidence that the *conversi* at Cluny were not considered to have a position like lay-brothers and that lay-brothers were not introduced alongside *conversi* in the monastery.<sup>90</sup>

Hunt has described the *conversus* at Cluny as a full monk though not trained as a *cantor*. Because of their illiteracy at times they were referred to as *illiterati* or *idiotae* which were interchangeable terms. They were used in liturgical functions as well as for more practical functions. At a later stage, Peter the Venerable (1092-1156) replaced the servants of the monastery with *conversi*. In their life in the monastery, the *conversi* at Cluny were different to the later Cistercian *conversi* or lay-brothers, and that type of lay brethren appears to have been rejected at Cluny because of the need of a dowry.<sup>91</sup>

If these practices were handed on to Monte Cassino, they most likely were also followed at St Mary of the Latins. Because of the reputation and influence of Cluny, its emphasis and interpretation of the Benedictine Rule was likely to have been passed on to Monte Cassino. It is reasonable also to assume that the Benedictines who established St Mary of the Latins were well versed in their traditions and Rule, which was followed at Monte Cassino, except for perhaps

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<sup>90</sup> Davis, "Conversus of Cluny", pp. 102-05.

<sup>91</sup> Hunt, *St Hugh*, pp. 90-1.

the lack of emphasis on work, and may have used *conversi* as assistant monks in the same way as Cluny.

The Hospitallers began their work in Jerusalem during a time in the eleventh century when monasticism began to favour *conversi* over *nutriti* or *oblati*.<sup>92</sup> There were a number of reasons which contributed to this development. In early monasticism the number of *conversi* remained low because authors such as Cassian, the Venerable Bede and Leo the Great emphasized the purity and virtues of youth, since children had not tasted the sin of the world. In the second half of the twelfth century *conversi* became the mainstream way of thinking in Orders. This was due to improved literacy standards and because the status of converts to monastic life was much improved. Parents no longer found it necessary to pay *viaticum*, an entrance fee, to educate their children in a monastery since Latin was becoming available to growing numbers in European cities.<sup>93</sup> It meant that children could make their way in the world without having to join a monastery.

If the Benedictine Rule and the traditions of Cluny and Monte Cassino were followed by St Mary of the Latins, then it is probable that the make-up of the Hospitallers, who worked in the separated hostel prior to 1099, was that of serving brothers of St Mary of the Latins. Since pilgrims assisted in a monastery, when they recovered health, some of these may have continued as *conversi*, and professed brothers of the of St Mary of the Latins, assisted in their work by

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<sup>92</sup> De Jong, *Samuel's Image*, p. 296.

<sup>93</sup> De Jong, *Samuel's Image*, p. 297.

paid lay servants. As the early hostel and later Hospital were under the authority of the Abbot certain assumptions may be made.

Originally, before it became a separate building,<sup>94</sup> the monastery cellarer would have been in charge of the infirmary and hostel within the monastery, as part of his work. As the abbot was responsible for the building of the new and separate Hostel it seems logical that he would have appointed to it the “Master of the Hospice for pilgrims and paupers” (a title used at St Gall),<sup>95</sup> or an equivalent monk. The newly appointed monk would have acted under the cellarer and would have regarded the Abbot as his master. He would have been assisted by some of the brothers, as was the custom in kitchen work, and also by suitably chosen servants.<sup>96</sup> The later Rule of Raymond du Puy recorded that servants were used within the Hospital.

By this line of reasoning, Gerard was actually the cellarer of the monastery since that position had the duty of being a father to the whole community, taking care of the sick, children, guests and the poor.<sup>97</sup> Alternatively, Gerard may have had a combined position which incorporated an Infirmarian and a monk in charge of visitors called a Guest Master.

When William of Tyre described the character of Gerard, who was accredited with being the founder of the Hospitallers, he described him as being man, *vir*, who was trustworthy and faithful.<sup>98</sup> In his later description of the character of Gilbert d’Assailly, who was Master between 1162 and 1170, he

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<sup>94</sup> McCann, *St Benedict*, ch. 53, pp. 120-21.

<sup>95</sup> Horn and Born, *St Gall*, v. 1, p. 317.

<sup>96</sup> McCann, *St Benedict*, ch. 35, pp. 86-7.

<sup>97</sup> McCann, *St Benedict*, p. 261.

described him also as being a man, *vir*, of high spirits.<sup>99</sup> Since at that stage Gilbert was a professed brother, it seems that when describing the character of monks William referred to them as men and not necessarily by their religious profession. Therefore it would be wrong to consider Gerard as a lay person or as a lay-brother simply because he was not called a brother or monk by William. It is more likely that he was a professed monk.

As the Hospital grew in size and reputation it would have come to consider itself as almost completely independent from its mother monastery, although still ultimately under its abbot. One final piece of circumstantial evidence, which suggests that the Hospital was established by, organized by, and part of St Mary of the Latins, is in Pascal II's *Pie postulationis* of 1112.<sup>100</sup> The Pope wrote to the Abbot of St Mary of the Latins giving it freedom from the Patriarch and taking it under his protection. In his opening remarks the Pope thanked the monastery for the hospitality it had shown to visiting pilgrims and made no mention of the Hospital as a separate entity at that stage. Paschal assumed the hostel to be a part of St Mary of the Latins, fully organized and administered according to the Benedictine Rule.

The Hospitallers stand in direct contradistinction to other reforming Benedictine monasteries during the eleventh century, whose objective was to regain the intensity of Benedictine monastic life and separation from the outside world. By comparison, the Hospitallers moved away from a belief in isolation to

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<sup>98</sup> William of Tyre, *Chronicon*, 18. 5. 81 (vol. 63A, p. 817).

<sup>99</sup> William of Tyre, *Chronicon*, 22. 5. 21 (vol. 63A, p. 917).

<sup>100</sup> Holtzmann, "Papst-, Kaiser-Und".



the concept of public service. Their contribution to the overall concept of Christian charity was unique.

Consideration of the forces of change which brought about the establishment of the Hospital in Jerusalem has helped to explain the history of the Hospital and the centrality of the serving brothers in the years leading up to 1099. The Amalfitans provided the motivational initiatives and the concepts of caring propounded by the Rule of Benedict provided the Hospitallers with their basic cultural outlook. As Benedictines the Hospitallers were able to organize their hostel situation in the same way that the Cluniac revival had encouraged, and the reason for their existence of caritative service was emphasized by the Miracula myth to the detriment of the knights.

The Hospitallers had extended their ministry to serve the poor, travelers and the sick in the same way in which they cared for their own brothers and guests. Following the Benedictine Rule, and obeying its teaching and traditions in serving sick monks and pilgrims, the hostel work of St Mary of the Latins was carried out by a core of Benedictine serving brothers, some of whom may have been *conversi*, or professed monks, assisted by a chosen group of paid monastery servants.

## Chapter 3

### The Early Frankish Period 1099-1113

It has been necessary to emphasize the importance of the early type of caring offered by the Hospitallers in order to set a clear contrast to show what changes later developed. The type of hostel needed to be studied so as to reveal the extent of its later achievement as a medical hospital. Because the early place of the monastery in a secular society and the difficulties which surrounded it within the Kingdom of Jerusalem have not been appreciated previously it was helpful to explain the politics of the kingdom. This allowed the circumstances of the separation of the Hostel from the monastery to be further understood. Regarding this point, the Papal bulls in connection with the independence of St Mary of the Latins and its hostel have not been considered by scholars.

Issue has been joined with the scholarly consensus represented by Dondi and Luttrell and proposes that the Hospitallers were Benedictines rather than Augustinians.<sup>1</sup> It has also been shown that there was no consortium formed between the Hospitallers, Templars and the Holy Sepulchre. The unique position of the Hostel has been brought out by the fact that it was the first time Paschal II gave his freedom to a hostel as compared with a monastery. This has also been emphasized how the Hostel lacked any similarity with the Cistercians due to the disparity in the dates of their foundations.

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<sup>1</sup> Dondi, *Canons regular*, p. 39; Luttrell, *Earliest Hospitallers*, p. 39.

The early years of the twelfth century in the kingdom of Jerusalem produced mixed fortunes for the serving brothers of the Hospital. As the number of pilgrims visiting the Holy City increased they faced the problem of providing accommodation and catering for the weak and sick after the trials of their journey. There may also have been a build up of tension between St Mary of the Latins and the Hospital as it gained support and became important in its own way. These problems were set amidst a conflict in the religious life of the kingdom caused by disagreement between Baldwin and Daimbert and thus the relationship between Church and State. The position of the Hospital and its connection with the Patriarch and the Holy Sepulchre needed clarifying and Pope Paschal II intervened, introducing a growing resentment by the Patriarch of the privileges given to the Hospital.

Paschal's bull *Pie postulatio voluntatis* was written to encourage the Hospital in its work of caring for pilgrims, the poor and orphans.<sup>2</sup> However it went much further than this and began a process which led to the Hospital becoming an important element in the history of the kingdom of Jerusalem. It was also to provide the impetus which was eventually to create the international Order of St John of Jerusalem.

At first the character of the Hospital of St John in Jerusalem was that of a hostel for pilgrims visiting the Holy City. Later in the twelfth century it added to its original purpose the aspect of caring for the sick as a medical institution. It is not possible to know exactly when this addition took place and therefore it is

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<sup>2</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

important to try to comprehend the type of early ministry given by the serving brothers to pilgrims between 1099 and 1113. Numerous letters dated to before and including 1113 use the word *hospitalia*. The words, *xenodochium* and *ptochea* are used only once in this correspondence. Each of these words is used in a context referring to the “house of God in Jerusalem”.<sup>3</sup>

Timothy Miller has drawn attention to the use of such words and claims that before 800 Latin writings used the Greek word *xenodochia* to describe houses of public charity. After that date *hospitalia* became interchangeable with *xenodochia* and both referred to traveller’s inns.<sup>4</sup> The word *ptochea* was also Greek and meant a house for the poor. Assuming that Paschal II used these words in the same way, before 1113 he generally regarded the Hospital in Jerusalem as a hospice or hostel rather than a medical institution.

The experience of medieval travel produced many hardships and pilgrims were likely to encounter new diseases. In the West, inns or hostels were sometimes expected to provide care and convalescence for the sick. In time some of these became primarily for the sick while others remained hostels for pilgrims as well as places of casual care for the ill. However, the words *hospitale* and *xenodochium* continued to be applied to both types of houses causing confusion. After the seventh century the Greeks began to use a special word *nosokomeion*, to describe medical hospitals for the sick.<sup>5</sup>

European houses owned by the Hospitallers were mentioned in *Pie*

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<sup>3</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>4</sup> Miller, “Knights of St John”, pp. 710-711.

<sup>5</sup> Miller, “Knights of St John”, p. 710..

*postulatio voluntatis* and each of these was described as being like the “Mother house in Jerusalem”.<sup>6</sup> They were described as *xenodochia*, traveller’s inns, and *ptochea*, houses for the poor and were in the towns of St Gilles, Asti, Pisa, Otranto, Bari, Taranto and Messina. They provided rest and shelter for travelers, some of whom may have been weak, exhausted, or ill.<sup>7</sup>

Luttrell has claimed that the houses mentioned in Paschal’s bull do not appear to have been mentioned in other Hospital records, his inference being that Paschal was misinformed and included them by mistake.<sup>8</sup> However, he has also pointed out that some had been visited by Paschal himself, which makes it hard to accept that these houses were wrongly attributed to the Hospital. It is possible that they may not have remained long in the hands of the Hospital but, since they were situated in areas which were well known to the Pope’s officials, it seems unlikely the Papacy would have made such an obvious mistake.

Of the first thirty papal and other letters contained in the *Cartulaire*, dated to between 1099 and 1113, at least ten of them make clear mention of the service given by the Hospital to poor. Phrases such as “the poor of Christ”, “to sustain the poor” and “the house of the poor” illustrate the thoughts in the minds of the various donors.<sup>9</sup> Paschal described the work of Gerard in *Pie postulatio voluntatis* as a devoted toil in the care of the pilgrims and the poor.<sup>10</sup>

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<sup>6</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>7</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>8</sup> Luttrell, “Earliest Hospitallers”, p. 46.

<sup>9</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 6, 12, 17.

<sup>10</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

In describing the inmates of the Jerusalem Hospital the Pope used the adjective *degentus*.<sup>11</sup> This was a word used to describe the lowest type of poor person. A phrase such as *ad pauperes recreandos* indicated a recuperating care for weak pilgrims<sup>12</sup>. Other phrases used to describe the Hospital were “the home of the poor”, and after 1113, “the home of pilgrims”.<sup>13</sup> These words and phrases draw a picture of a Hospital which was a refuge for poor pilgrims, many of whom were ill and sorely tried by their journey to the East.

Michael Mollat has shown that the word *pauper* was at first the only word used to denote poverty. This did not mean that an individual had always been poverty stricken, as that individual may have experienced a crisis in his life which had resulted in his low estate.<sup>14</sup> Application of Mollat’s definition of *pauper* means that Paschal was encouraging the Hospitallers to care for those pilgrims who were in a desperate state or ill. Despite their circumstances, when they arrived in the Holy City, they may have been wealthy and well prepared when they left home.

Poor pilgrims arriving in Jerusalem would have found themselves in a situation over which they had no control. Because they lacked sufficient money they were unable to find safe accommodation except at the hostel. As well, their depressed state within the social strata of the city placed them in a situation of great risk. If they were suffering from malnutrition or wounds they would have been easy targets for violent people. William of Tyre described how pilgrims had

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<sup>11</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 24.

<sup>12</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 7.

<sup>13</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 17, 155.

<sup>14</sup> Mollat, *The Poor*, p. 5.

exhausted their travelling money by the time they reached Jerusalem and how even when they were inside the city they were harassed and needy in the extreme.<sup>15</sup>

As the Hospital's service for pilgrims in Jerusalem expanded and became more important, tension and a change of relationship developed between it and St Mary of the Latins. This was to be expected due to the increase in the organizing requirements of the Hospital and its growing importance in the Kingdom. The tension between the mother-house and its Hospital no doubt developed because the Abbot was still in control of the Hospital but it was gradually slipping away from his overall authority.

The early years of occupation by the Crusaders were characterized by conflict between church and state and the Pope was unlikely to have agreed to any changes until the atmosphere improved. Paschal revealed his concern for the position in Jerusalem in a letter of 4 December 1107, addressed to all the Latins in the city.<sup>16</sup> He expressed his disappointment regarding disorders in the Jerusalem church because he hoped that it would set an example of Christian faith and Latin purity (presumably behaviour). He then set out the series of events which had taken place in Jerusalem between 1099 and 1105, beginning with Baldwin's conspiracy against Daimbert.

The Pope outlined the problems concerning Patriarch Ebremar and how the appointment of Patriarch Gibelin had been good for peace in Jerusalem because King Baldwin had found that he could work well with the new Patriarch.

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<sup>15</sup> William of Tyre, *Chronicon*, 18. 5. 33-42 (vol. 63A, p. 816).

<sup>16</sup> Paschal II, "Ecclesiae vestrae scandalis", PL, vol. 163, pp. 230-2.

Gibelin was a Patriarch who accepted the Pope's policies without question and in whom the Pope had full confidence. He confirmed his election and gave him full legatine powers as the first patriarch whose rule was not disputed. Gibelin worked amicably with Baldwin, as was shown when the king wanted the Church of the Holy Nativity in Bethlehem to become a cathedral. Baldwin made his request to the Pope and Paschal delegated the matter to Gibelin. The Patriarch followed the Pope's directive, even though the request had originated with Baldwin.<sup>17</sup>

When Gibelin died in Lent 1112, the archdeacon Arnulf was elected to take his place and on the day of his election he released the Hospital of St John from its obligation to pay the tithe due to the Patriarch.<sup>18</sup> In *Apostolice sedis auctoritate*, Paschal II freed St Mary of the Latins from the Patriarch's authority in the same year.<sup>19</sup> In the next year the Hospital received the first of the papal bulls which ultimately freed it from episcopal authority. Also in line with the Pope's policies Arnulf forced the canons of the Holy Sepulchre to accept the Augustinian Rule in 1114, which had been a dying wish of Gibelin.<sup>20</sup>

After the capture of Jerusalem in July 1099,<sup>21</sup> Arnulf of Chocques had been chosen as Patriarch of Jerusalem by the senior clergy of the First Crusade. However he was not a bishop and was elected without reference to the Pope. Complaints were also made regarding his birth and moral standing and as a

<sup>17</sup> William of Tyre, *Chronicon*, 11. 12. 1-9 (vol. 63, pp. 512-15).

<sup>18</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos, 25, 29.

<sup>19</sup> Paschal II, 19 June 1112, "Apostolice sedis auctoritate," in Holtzmann, ed., "Papst-, Kaiser- und Normannenerkanden", pp. 51-3.

<sup>20</sup> De Rozière, *Cartulaire du Saint Sepulchre*, no. 25 (pp. 44-7).

<sup>21</sup> Hamilton, *Latin Church*, pp. 14-16.



result he was deposed by Archbishop Daimbert of Pisa, who then became Patriarch in December 1099. When Gibelin died Arnulf became Patriarch a second time, claiming he had been elected by the King, clergy and people. However, his standing in Jerusalem had not improved and he was deposed in 1115, only to be reinstated in 1116 after an appeal to the Pope.<sup>22</sup>

William of Tyre claimed that it was common knowledge that Arnulf was “wicked and unchaste”, and had introduced the regular canons to disguise his past reputation. William was displeased with the appointment of the regular canons because the secular canons had been established by the first leaders after careful deliberation.<sup>23</sup>

The changes initiated by Paschal meant that the Pope gained a tighter rein over the Latin Church in Jerusalem and a better relationship was established between the spiritual and the temporal powers.<sup>24</sup> Also, because regular canons worked in conjunction with bishops and were under their authority, the Holy Sepulchre, as a cathedral, was more under the control of the Patriarch, and ultimately the Pope.<sup>25</sup> These influences improved the religious and political atmospheres in the Holy City and produced a situation which was more conducive to change and the future independence of the Hospitallers.

When Gerard saw that circumstances were favourable, he thought it was the appropriate time to appeal to Paschal II for his protection. However, since the Hospital was still attached to St Mary of the Latins it may be assumed that

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<sup>22</sup> Hamilton, *Latin Church*, pp. 53, 61-63.

<sup>23</sup> William of Tyre, *Chronicon*, 11. 15. 1-15 (vol. 63A, p. 519).

<sup>24</sup> Rowe, “Paschal II and the relation of the spiritual and temporal”, p. 490.

<sup>25</sup> Lawrence, *Monasticism*, p. 141.

Gerard had the agreement of his abbot before taking the step of writing to the Pope. In his place Gerard was subject to strict discipline as in Benedictine monasteries the absolute sovereignty of the abbot was obeyed.<sup>26</sup> As a postulant Gerard had undergone a severe trial period, during which the cardinal virtue of obedience was impressed upon him. As well as giving subservience to the abbot, each postulant promised to remain in the house he joined for the rest of his life.

Although monks did break away from their monasteries on occasions, as at Cluny and Citeaux, the situation in Jerusalem was very different. It would have been difficult for a monk or brother within St Mary of the Latins to break away from the monastery and establish a Hospital because the Hospital was virtually alongside the mother-house and just as close to the Patriarch's house, which was beside the Holy Sepulchre.<sup>27</sup> These circumstances suggest that it would have been difficult for Gerard to separate his hospital from the monastery without the acquiescence of the Abbot and the Chapter. Gerard and the abbot must have recognized mutually the need to separate.

Perhaps, because the Hospital was growing in size and reputation the Abbot desired to relinquish his authority. This would have been unusual but he may have wanted to relieve St Mary of the Latins of the responsibility of running a large Hospital so that the monastery could concentrate on being a Benedictine monastery. St Mary of the Latins prospered during the twelfth century, although not as much as the Hospital, and its abbot became second among those of the city. The monastery was extended at that time so the abbot may have had

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<sup>26</sup> McCann, *St Benedict*, ch. 5, pp. 32-3.

<sup>27</sup> Benvenisti, *Crusaders*, p. 58.

enough on his hands and wanted to be relieved of the responsibility for his Hospital.<sup>28</sup>

Another reason for Gerard to appeal to the papacy for protection was the situation of the Hospital within the politics of the Church in Jerusalem. According to Canon Law, a bishop had the right and duty to supervise all religious houses within his diocese, except where a monastery came under the protection of the Pope.<sup>29</sup> Under normal circumstances a bishop was to oversee the election and confirmation of abbots or priors, consecrate monastic churches, ordain monastic priests, and make periodic visitations to the monasteries in his diocese.<sup>30</sup>

Canon law also specified the various duties of abbots to their monks, the obligation of enclosure for monks, the necessity of a zealous observation of the Benedictine Rule, the avoidance of secular business, and obedience to the local bishop. When a bishop visited a monastery he was to be given procuration, or the maintenance of his entourage of clerks and servants.

Since the Patriarch of Jerusalem was living close by the Hospital and St Mary of the Latins, his influence would have been stronger than in some areas of Europe. In Europe many monasteries were isolated, and at some distance from their metropolitan bishop. At that time it would not have been politic for the Hospital to seek a separation from the monastery and its independence without the agreement and goodwill of the Patriarch. The opportunity came to separate from the monastery after St Mary of the Latins had been given certain privileges, and independence from the Patriarch, in 1112.

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<sup>28</sup> Hamilton, *Monastic reform*, p. 112.

<sup>29</sup> Lawrence, *Monasticism*, p. 65.

Once the monastery was in a position to determine its own future under the Pope, it had the power to dispense with the Hospital if it so chose. However, Luttrell has suggested that the canons regular of the Holy Sepulchre would have sought to control the Hospital.<sup>31</sup> He believes that because the canons controlled the cathedral chapter and had great influence over the cathedral confines and surroundings they later held the Hospital and Templars as a type of consortium or group under their control.

Luttrell's argument is based on some letters in Delaville's *Cartulaire* that link the Hospital and the Holy Sepulchre. Four letters before 1113 offer gifts to the Hospital and the Holy Sepulchre.<sup>32</sup> However, the combination of the two most famous places in Jerusalem is not hard to understand. It would have been difficult for pilgrims to separate the two institutions in their minds after returning to their homes. The Hospital was described in one donation as "the house of visitors in Jerusalem near the Sepulchre of the Lord".<sup>33</sup> Pilgrims had been offered hospitality, or even recuperation or healing in the Hospital, in order to allow them to visit the Holy Sepulchre, which was separated from the Hospital by a narrow lane.<sup>34</sup> Since the two places were so close topographically, it would have been easy to confuse their relationship.

A strong argument against any early official connection between the Hospital and the canons lies in the history of the canons themselves. At the time

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<sup>30</sup> Lawrence, *Monasticism*, pp. 118-120.

<sup>31</sup> Luttrell, *Earliest Hospitallers*, p. 39.

<sup>32</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 3, 11, 26.

<sup>33</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 34.

<sup>34</sup> Benvenisti, *Crusaders*, p. 58.

of the conquest, the Greek canons of the Holy Sepulchre and the Greek Patriarch were living in Cyprus.<sup>35</sup> Arnulf expelled all Eastern Christians from the Holy Sepulchre in 1099 and confined the use of the cathedral entirely to Latins. At the same time Godfrey endowed a chapter of secular or unreformed canons to serve the Cathedral.<sup>36</sup> Presumably these clerics were chosen from among the crusading clergy who had been part of the army. At that time it would have been difficult for the newly appointed canons to have greatly influenced the Hospital since it was still part of the monastery of St Mary of the Latins.

It is reasonable to assume that the canons appointed in 1099 worked under the *Institutio canonicorum* of St Chrodegang, which was given imperial sanction and approval at the Synod of Aachen in 816.<sup>37</sup> Canons at that time were permitted to own property and live a private life as a cleric, frequently with their wives. However, when Arnulf reformed the canons in Jerusalem in 1114 to become regular canons the new clergy followed the ideal of a disciplined way of life and lived together in a community.<sup>38</sup>

Canons regular sought a reformation of the canonical way of life, promoting the idea of renouncing all property and aiming to live by what had become known as the Rule of St Augustine. In order to do this they needed to live together in a community. Although they sought to follow the Rule of

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<sup>35</sup> William of Tyre, *Chronicon*, 9, 15, 13-17 (vol. 63, p. 440) and 10, 4, 9-32 (vol. 63, pp. 456-457).

<sup>36</sup> Fulcher of Chartres, *Historia Hierosolymitana*, Lib. I, cap. 30, 2, 3 (p. 308); Albert of Aachen, *Historia Hierosolymitana*, vol. 4, bk. 8, p. 490.

<sup>37</sup> Semmler, *Corpus*, vol. 1, pp. 451-468, 471-481.

<sup>38</sup> Lawless, *Augustine*, pp. 74-109.

St Augustine, various groups of canons compiled their own customs based upon the Rule of Aachen and the Rule of Benedict.

Another aspect of the work of canons regular was as assistants to local bishops in conducting the ministry of cathedrals.<sup>39</sup> When in 1114 the reformed canons of the Holy Sepulchre became established in Jerusalem they lived next to the Patriarch and would have been closely allied to him.<sup>40</sup>

It is not clear whether the secular canons were disbanded and replaced or simply forced to change their way of life. William of Tyre suggested in his comments that all was not well during the change so perhaps the secular canons found it hard to give up their way of life and resented the introduction of the Rule of St Augustine.

Dondi has argued that after the appointment of the regular canons in 1114 the Hospital took on a canonical organization which is evident in the Rule of Raymond du Puy.<sup>41</sup> The Rule addressed the Hospitallers as *clerici* and it is claimed that this indicated they were canons and not brothers or monks. However, the use of the word *clerici* indicated quite the opposite because it was used in a general way to denote any type of cleric. The Rule used the term to denote deacons, sub-deacons and acolytes who assisted the priest (*presbyter*) in Mass.<sup>42</sup> By that time the Hospital had been permitted to use priests by the bull of Innocent II, *Christiane fidei religio* of 7 February 1137.<sup>43</sup> However, the bulk of the

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<sup>39</sup> Lawrence, *Monasticism*, p. 140.

<sup>40</sup> William of Tyre, *Chronicon*, 9. 9. 4 -10 (vol. 63, p. 431). DeRoziere, *Cartulaire du Saint Sepulchre*, nos. 36, 37 (pp. 71-3); no. 42 (pp. 79-80); no. 25 (pp. 44-7). Clapham, "Latin monastic buildings", p. 18.

<sup>41</sup> Dondi, *Canons regular*, p. 39.

<sup>42</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, § 3.

<sup>43</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 122.

Hospitallers, both in the Rule and Paschal's *Pie postulatio voluntatis* of 1113, were termed *fratres* or brothers, indicating they were monks and not regular canons.<sup>44</sup>

Dondi believes that the ecclesiastical organization of Latin Jerusalem has been clarified by her research into the reform of the Chapter of the Holy Sepulchre by the canons regular and the liturgical practices of the institutions which originated within it and that this includes the Hospitallers.<sup>45</sup> Liturgical manuscripts of the Holy Sepulchre, such as missals and breviaries, which were produced in Jerusalem, Acre and Cyprus and date from the twelfth to the fourteenth centuries have been used in her work.<sup>46</sup> However, no liturgical manuscripts from the early Hospitallers communities in Jerusalem and Acre appear to be extant so it is a matter of opinion as to what was used prior to the later dates.<sup>47</sup>

As a second argument for the Hospitallers having been canons Dondi refers to "feasts with an office of nine lessons", instead of twelve, which are found in the 1239 *Usances* and the 1294 Statutes of the Order.<sup>48</sup> It is argued that this is evidence that the Hospital had become canonical since the Augustinians used nine lessons in their liturgies. This overlooks the fact that the Benedictine Rule prescribe that twelve lessons and a Gospel portion be read at Matins on a Sunday and that on various other occasions the number of readings in the Divine Offices could vary between one, four and thirteen, often as requested by

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<sup>44</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>45</sup> Dondi, *Canons regular*, p. 39.

<sup>46</sup> Dondi, *Canons regular*, p. 24.

<sup>47</sup> Dondi, *Canons regular*, p. 42.

benefactors.<sup>49</sup> The changes made by the Hospitallers in 1239 and 1294 could have been made just as easily according to Benedictine practice. Hugh of Cluny had changed the number to nine lessons in the liturgy to lighten the load on readers two hundred years previously.<sup>50</sup>

Finally, against the influence or control over the Hospital by the regular canons is the fact that the Rule of St Augustine was not as influential as the Benedictine Rule in the formation of Raymond du Puy's Rule, as will be argued in chapter five.

According to the Cluniac reform, Benedictine monasteries founded or reformed by Cluny would conform to the office of their mother-house.<sup>51</sup> Because of the close ties between the Hospital and St Mary of the Latins, which was founded on the traditions of Monte Cassino and which in turn had been reformed by Hugh of Cluny, the Hospitallers would have been more likely to follow Benedictine traditions rather than canonical ones.<sup>52</sup>

Even though the situation in Jerusalem had improved, the ultimate freedom of the Hospital also depended on papal policies in Europe. *Pie postulatio voluntatis* was to establish a new order and set the Hospital on a new road to the future. This initial freedom given by Paschal to the Hospital was not the first time the papacy had moved in that direction.

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<sup>48</sup> Dondi, *Canons regular*, p. 42.

<sup>49</sup> McCann, *St Benedict*, 48-59.

<sup>50</sup> Hunt, *St Hugh*, "The Horarium", pp. 99-104.

<sup>51</sup> Dondi, *Canons regular*, p. 42, n. 20.

<sup>52</sup> See Chapter 1, pages 19-22.



Placing monasteries directly under the protection of the Pope was first mooted by Duke William of Aquitaine in 909.<sup>53</sup> He went to Rome in order to vest the proprietorship of Cluny in the apostles Peter and Paul, meaning under the protection of the Pope. Even so, the Pope was himself included on the list of names of those who were forbidden “to invade the possessions of these servants of God”.<sup>54</sup>

Prior to the independence from bishops given to Cluny by the Pope, other benefactors had donated their monastic foundations to St Peter in a spiritual sense. However it was not until the bond developed between Rome and Cluny that the idea became fully accepted. Previously the Pope would have had little power in practice to protect monasteries dedicated to him.

Whereas before 1113 the Pope had given protection to monasteries and churches it was a move in another direction to offer his authority to a hospital. When Paschal took the Hospital in Jerusalem under the protection of St Peter and St Paul, it involved these saints giving security against evil spiritual forces as well as the Pope denying the Patriarch any control over it.

According to *Pie postulatio voluntatis* Gerard had requested Paschal, presumably by letter, to place the Hospital under the protection of the papacy and the question arises as to why he did this at the particular time he did? The bull freeing St Mary of the Latins was dated 19 June 1112 and that for the Hospital 15 February 1113. The closeness in date and similarity of the outline of each is important. Both commenced with a brief description of the institution and

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<sup>53</sup> Evans, *Cluny*, pp. 4-6.

<sup>54</sup> Hunt, *St Hugh*, p. 20.

an acceptance of its request for papal protection. The main purport of both bulls was the freedom to elect an abbot and master, freedom from outside interference, confirmation of tithes, possessions and future donations, control of all possessions, punishment for all who disobeyed the Pope's decrees, and a demand for lay outsiders to leave the institutions unmolested.

It may be that, since Paschal's bulls were alike in intent, the requests and letters from both the Abbot and Gerard may have also been similar. This points to Gerard being dependent upon the abbot's assistance in writing his letter. Then, following a discreet time lapse, after the letter from the monastery arrived in Rome, Gerard's letter would have been delivered. The similarities of both requests may have also affected the Pope in his decision to treat the Hospital as a monastery rather than simply a hospital.

Although the freedoms granted to St Mary of the Latins and the Hospital were of great benefit to both institutions the long-term result produced bitter opposition. For example, St Mary of the Latins was given permission to bury pilgrims within its confines. This went against the right of priests to bury parishioners in their own parishes and to receive the due fees. Bishops were entitled to share the tithes and fees of the parish clergy.<sup>55</sup> When similar permission was extended to other churches and monasteries in Palestine these exemptions lessened the income of the various bishops. This was especially so when the privileges were enlarged to include daughter houses, or properties belonging to the mother-houses.

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<sup>55</sup>Hamilton, *Latin Church*, pp. 88, 92.

The permission for St Mary of the Latins to bury certain pilgrims within its cloister, or on its various properties, meant that if wealthy pilgrims were to be buried in a certain cemetery they would bequeath gifts of land or money to the monastery. Later in the century, William of Tyre blamed the papacy, as he saw the situation, as a denial of bishop's rights to receive their rightful dues. Bishops expected to receive their tithes from diocesan property and their secular parishes and they were denied income from monastic properties which were under the protection of the Pope.<sup>56</sup>

*Pie postulatio voluntatis* was dated 15 February 1113 and addressed Gerard as the founder and provost of the Hospital. The Pope then accepted the task of protecting the Hospital and confirmed gifts given to the Hospital by local bishops and the faithful. He also allowed the Hospital to keep the tithes collected on the produce of its properties despite opposition from the bishops. As well, the Hospital was permitted to accept tribute and taxation and when a new provost or supervisor was to be elected, it was to be without any outside influences. The power of the provost in Jerusalem was enhanced when the Pope subjected to him the European possessions of the Hospital.<sup>57</sup>

The strong wording of the bull regarding the independence of the Hospital gave the serving brothers freedom from the dominance of the Patriarch as well as the canons regular. No one was to disturb the *Xenodochium* or harass it with vexatious annoyances and all ecclesiastical and secular authorities were to obey these injunctions under threat of being deprived of their dignity, power and honour,

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<sup>56</sup> William of Tyre, *Chronicon*, 18. 3. 56-62 (vol. 63A, p. 813).

<sup>57</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30, ll. 31-34.

as well as of being excommunicated and punished by God at the last judgement.<sup>58</sup>

As the Hospital had become well known and its influence spread, properties were donated to it in Spain, Italy and Southern France. Godfrey de Bouillon gave the *casale* of Hessilia and two bake houses in Jerusalem to it before his death on 18 July 1100. Added support was given by Baldwin I when, following the battle of Ramla in 1101, he reserved one tenth of the spoils of war for the Hospital.<sup>59</sup> Then in 1110 Baldwin ratified all gifts given to the Hospital in the kingdom.<sup>60</sup> In 1112 Baldwin went further and confirmed all the possessions of the Hospital.<sup>61</sup> Moreover, *casalia* or properties were given to the Hospital so that it would become independent and self sufficient in food and income. In Syria there were villages and areas of land in which the peasants retained their ownership but paid tithes to an absentee lord. In many cases donors of such gifts to the Hospital looked for a better standing before God and forgiveness for sins.<sup>62</sup>

Paschal's bull also mentioned that properties in Syria had been given to the Hospital. In both of these areas Paschal decreed that any future donations were to be held by Gerard and his successors.

An important aspect of Paschal's bull was the way in which he accepted the Hospital as an entity in itself. The Pope described it as a *Xenodochium* for

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<sup>58</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30, §§ 2, 4, 8, 10.

<sup>59</sup> Albert of Aachen, *Historia Hierosolymitana*, vol. 4, bk. 8, p. 553.

<sup>60</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 20.

<sup>61</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 28.

<sup>62</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 27 ( A gift for our sins).

the support of the needs of pilgrims and the poor, *ad sustentandas peregrinorum et pauperum necessitates*. No mention was made of St Mary of the Latins.<sup>63</sup>

It is clear that the growing wealth, acquisition of property and general popularity of the Hospital meant that it could no longer be considered as existing only in Jerusalem. Not only was the parent house in Jerusalem gaining in prestige but the European possessions, as well as the Syrian ones, needed to be united under the same leadership.<sup>64</sup> In one way this situation was unusual in that the various houses and properties were scattered in the West and East. To make this organization workable, it would have helped to recall previous experience and the Pope's connections with Cluny, may have offered a prior pattern.

This need for control and general oversight was similar to the experience of Cluny, which reached its peak of influence in the Western Church at the end of the eleventh century during the life of Abbot Hugh (1049-1109). Some monasteries which had been founded by Cluniac monks were given superiors chosen from Cluny. Others became associated with Cluny as satellites.

Hugh spent much energy visiting new monasteries and advising old ones on Cluny's behalf, believing that a monastery was a family living under one abbot and father and that Cluniac monks were in theory members of Cluny itself, no matter where they lived.<sup>65</sup> In a similar way the Hospitallers were to consider themselves as brothers in one family, living under one master even as their Rule explained them to be.

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<sup>63</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30, ll. 1-9.

<sup>64</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>65</sup> Diener, "Itinerar, pp. 355-422; Hunt, *St Hugh*, pp. 31, 52.

It is not possible to compare the Cistercians with the Hospitallers during this period 1099-1113 in the same way. Their “Charter of Charity” was composed between 1116 and 1124, precluding the real possibility of any connection of ideas between the two bodies during the time before *Pie postulatio voluntatis*.<sup>66</sup>

When Paschal gave his permission in 1113 for the Hospital to retain its tithes on its land and goods, he was following a policy developed since 1102.<sup>67</sup> During his papacy he granted at least seventeen privileges regarding tithes including those to the Hospital and to Cluny, amongst others, which had their privileges confirmed.<sup>68</sup> The wording used in the various bulls varied and only four of them decreed that tithes were to be used for direct charitable purposes, rather than for the general running of monasteries.<sup>69</sup>

The first of Paschal’s privileges was for the monks of the monastery of San Salvatore Maggiore at Pavia.<sup>70</sup> Most of the following freedoms were for Benedictine monasteries, but four were for houses of regular canons. Cluny was one of the four monasteries given permission to use its tithes for charitable purposes. By comparison the Hospital in Jerusalem stood alone as the only independent hospital given this privilege.

Paschal gave no reason in *Pie postulatio voluntatis* for giving the Hospital freedom from paying church tithes. However, in his 1112 bull to St Mary of the Latins he connected his reason for granting its privilege to a letter from Gregory I

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<sup>66</sup> Newman, *Charity*, p. 15, “Charter of Charity” (Callistus II, 23 December, 1119); Waddell, *Early Citeaux*, p. 283.

<sup>67</sup> Constable, *Tithes*, p. 228.

<sup>68</sup> Constable, *Tithes*, p. 228.

<sup>69</sup> Constable, *Tithes*, p. 228.

<sup>70</sup> Constable, *Tithes*, p. 228.

to Augustine of Canterbury. Gregory had given advice to the new Archbishop from his interpretation of a verse in St Luke 11:41, "*Quod superest date eleemosynam et cetera omnia munda sunt vobis*".<sup>71</sup> Gregory had interpreted it to mean that any surplus (goods or finance) produced by a monastery should be used for a pious and religious cause.<sup>72</sup> In another place Paschal justified his opinion by saying that any payment of tithes by clerics to other clerics was a new type of tax. He quoted an example from the Old Testament where the Levitical priests did not pay tithes to each other under the law of Moses.<sup>73</sup>

Although Paschal gave a theological reason for taking monasteries under papal protection, and even a Hospital for the first time, he was also known for his personal piety which was extended to include a genuine concern for monks as charity workers. This side of his character gave him the incentive to assist St Mary of the Latins and its Hospital, and to give more consideration to monasteries than any previous Pope.

The agricultural tithe was valuable in Syria where there were two harvests a year. A landlord was expected to pay a tenth of the value of his share of the crops to the church. This rule did not usually apply to his peasants who were not expected to pay a tithe on their share of the harvest because they were usually not Franks.<sup>74</sup> When the Hospitallers became landlords, in theory they would have had to pay a tithe to the secular church on their share of crops and produce from

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<sup>71</sup> Luke, 11. 41.

<sup>72</sup> Lowenfeld, *Epistolae*, no. 152 (p. 75).

<sup>73</sup> Constable, *Tithes*, p. 229.

<sup>74</sup> Hamilton, *Latin church*, pp. 145-6.

all their properties. Sometimes, as a variation, tithes in kind were replaced by money payments, both in Syria and the Western Church.

As the number of Hospital properties in Syria increased, the Patriarch was denied his original due because the Hospital claimed that its properties were exempt. In addition to Paschal, some bishops in the Holy Land, such as the Bishop of Acre, freed the Hospitallers from the payment of tithes on Hospital lands in their dioceses. In some situations they were granted exemption in exchange for military duties in those areas .

At first most properties continued to pay tithes to a bishop but by the middle of the twelfth century the military orders began to acquire extensive fiefs and the bishops' tithes became threatened.<sup>75</sup>

In 1113 Paschal allowed the Hospital to accept gifts, or tributes and taxation, which meant that it could control its own finances.<sup>76</sup> Up to then any gifts directed to the Hospital would have first passed through the hands of the Abbot of St Mary of the Latins. This concession was in line with the Pope's permission, given in 1112, for St Mary of the Latins to handle its own finances without interference from the Patriarch. *Pie postulatio voluntatis* allowed the Hospital to receive its share of any gift, which in the future may have been given to share equally between the Hospital and the Holy Sepulchre.

The most important concession given by Paschal in *Pie postulatio voluntatis* was the authority of the Hospitallers to choose their own *provisor*

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<sup>75</sup> Hamilton, *Latin church*, p. 148.

<sup>76</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.



(manager or provider) and *prepositus* (provost or head).<sup>77</sup> This was to take place without any outside pressure from either ecclesiastical or secular authorities. These freedoms meant that the provost and brethren acquired unfettered control over the Hospital and its properties.

The occupation of Jerusalem by the Crusaders initiated a new era for the Hospital because pilgrims then found it easier to visit the holy places. During the years between 1100 and 1113 the Hospital continued to act as the hospice for St Mary of the Latins and to offer shelter and recuperation for poor and exhausted pilgrims visiting the Holy Sepulchre. As it became wealthier and more important, with the support of leaders of church and state and of grateful pilgrims, its work became too large for it to remain under the abbot of St Marys. However, due to the unstable relationship between Baldwin and Daimbert during the early years the circumstances at that time were not conducive to change. Despite the years of comparative peace when Gibelin was Patriarch (1108-1112) trouble again erupted for the first two years of the reign of Arnulf. However by that stage Pope Paschal II appeared satisfied with the relationship between church and state and granted St Mary of the Latins his protection in 1112, and the Hospital its freedom the following year.

In *Pie postulation voluntatis* Paschal explained that his reason for granting freedom to the Hospital was because of its admirable caritative ministry. The Pope praised the brothers for their “work of devoted toil”, in the care of poor pilgrims, under the leadership of Gerard their Provost and made no mention of any connection with the Holy Sepulchre, or the canons regular. The

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<sup>77</sup> Delaville le Roulx, *Cartulaire*, vol, 1, no. 30.

independence of the Hospitallers from the Patriarch meant that they were in a position to expand without his supervision and to move into new fields of service, such as the introduction of doctors and eastern medicine. In these ways the Hostel of St Mary of the Latins was proved to have been separated from its mother house, accepted under the authority of the Pope, not in any way connected or under the authority of the Holy Sepulchre and based firmly in the Benedictine cultural traditions.

## Chapter 4

### The Expanding Order 1113-1154

The years prior to 1154 were the most productive and rewarding to the serving brothers of the Order of St John. The Order had the full support of the Popes who encouraged the caritative work being done and increased its privileges against the wishes of the bishops. In many ways the extra assistance given to the Order was in defiance of the traditional authority of the bishops and may be seen as appeals to the Pope for concessions against prevailing church order. The Popes gave property rights, support for alms collecting, the allowance of having priests, laity were able to serve in the Hospital and there was to be no interference from outside the Order in the election of its Master.

As a result of the hospitality and care of the serving brothers the Hospital in Jerusalem grew in wealth, support and importance during the four decades following *Pie postulatio voluntatis*. During this period it received four important papal bulls which allowed it to take its place as a recognized religious order within the Church. The papacy accepted it alongside other monasteries and orders which had been granted its protection and a certain amount of independence.

Each of the bulls, either in spirit or in letter, paid tribute to the humanitarian work done by the serving brothers, for pilgrims and the poor. However, towards the end of this third phase in the Hospital's history, difficulties arose in its relationship with the Patriarch of Jerusalem and bishops. These problems were partly due to the increased wealth of the order and the ecclesiastical freedoms

given to the Order by the Papacy as well as the inclusion of military brethren. In fact none of the bulls made reference to the existence of knights which raises the question as to the willingness of the Popes to mention them or perhaps their ignorance of their existence.

Innocent II was responsible for three of the bulls which helped to give the Hospital its new position. In 1135 he issued *Ad hoc nos, disponente Domino*, followed in 1137 by what became the first *Christiane fidei religio*, and between 1139 and 1143 the Hospital received the bull *Quam amabilis Deo*. Pope Anastasius IV gave what became the fourth bull in 1154 when he sent Raymond du Puy the second, *Christiane fidei religio*.<sup>1</sup>

In his first bull, *Ad hoc nos, disponente Domino*, Innocent II kept very close in word and meaning to Paschal II's original bull. His bull was almost identical except for two new concepts. In his greeting to Raymond du Puy the Pope acknowledged that the Hospital had been granted Paschal's original bull. He then said that through the Lord he was going to add to it. He wrote that he ought to do this because he had been asked to assist the Hospital, as it was a worthy place given by the Lord. Raymond was then addressed as a, "worthy son in the Lord ", who should have his request received, because of his diligent pursuit of sacred hospitality.<sup>2</sup> This work of hospitality was carried out in Jerusalem near the church of St John the Baptist. Innocent acknowledged that the Hospital had previously been given the protection of the apostolic see, by his

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<sup>1</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 113, 122, 130, 226.

<sup>2</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 113.



worthy predecessors, of blessed memory, Paschal II, Calixtus II and Honorius II. Delaville le Roulx has not included the last two bulls in his *Cartulaire*.<sup>3</sup>

The Pope then repeated the assurance that anything which had been acquired by the Hospital for the sustaining of pilgrims and the necessities of the poor should be retained by it in peace and in whole forever. This ruling was to apply to the Jerusalem congregation and to any parish congregation or city chapel which the Hospital had gained through the diligence of Gerard of blessed memory. It also included anything given by faithful men, no matter who, and anything given by God's grace in the future. The Hospital was to possess for its use whatever may have been lawfully granted to it by the bishops of Jerusalem, either to Raymond or to his successors and to the brethren who were occupied in caring for the pilgrims. The Pope added that any donations or tribute of a religious nature, or any tax gathered by the Hospital, could be retained.

Innocent confirmed that any houses for the poor given to the Hospital previously were to be retained.<sup>4</sup> He included the names of St Gilles, Asti, Pisa, Bari, Otranto, Taranto and Messina. Any additions or properties, either beyond, or on this side of the sea, in Asia or Europe, or those acquired by God's grace in the future, were again confirmed to Raymond and his successors. The Pope also reiterated that any income from tithes was to be retained by the Hospital and that no bishop could contradict this or punish the Hospital for not paying them.

At this point in his bull, Innocent added two new rules. He stipulated that it

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<sup>3</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 30, 113.

<sup>4</sup> This negates Luttrell's assertion that these houses had not been given. Luttrell, "Earliest Hospitallers", p. 46. Thesis Chapter 3, p. 73, n. 6.

was not lawful for any bishop to pronounce an interdict or an excommunication sentence on the Hospitallers. Secondly, if there was a general interdict existing over a city, or extended to another place, the order was permitted to celebrate the divine offices. However, if this was to take place, it was not to admit laity and was to have the doors locked and ring no bells.

On the one hand, since these clauses were additions to Paschal's original bull, it is possible that Innocent had been asked by Raymond to include them in this bull. If this was the case, then it may have been that the Order was suffering in these several ways from either the Patriarch of Jerusalem or other bishops in the Holy Land or in Europe. Or alternatively, the Pope may have included these fresh protections for the Hospital in anticipation of such actions.

Innocent continued by repeating the statement that, at Raymond's death, no replacement for him was to be selected by intrigue or violence. The one chosen by the professed brethren, according to God's will alone, was to be elected.

It was also decreed that no one was to attack the Hospital, to disturb it, to carry off its possessions or to detain, reduce, desecrate, trouble or torment it. All of its possessions were to be preserved undiminished for the sole use and enjoyment of those for whom maintenance and support had been given.

*Ad hoc nos, disponente Domino*<sup>5</sup> concluded with a typical anathema on anyone in the future, either ecclesiastic or secular, who knew of this ordinance but yielded to the temptation of ignoring it. If, at the second or third warning he

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<sup>5</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 133.

did not make satisfactory and suitable amends, he was to be deprived of his position, power and benefice (*honor*). He was to know that he stood accused before of God, for the iniquity he had committed. He was to be kept from the sacred body and blood of our God and Redeemer, our Lord Jesus Christ, and would undergo the severest punishment at the last judgement.

For all those who dealt justly with the Hospital, the Pope offered the rest and peace of our Lord Jesus Christ. He added that he hoped that here (on earth) they would receive the reward of good conduct and before the universal judge enjoy the blessing of everlasting peace.

Innocent's second bull to the Hospitallers and Raymond du Puy, the first *Christiane fidei religio*,<sup>6</sup> followed within two years of *Ad hoc nos, disponente Domino* and the closeness of the two bulls suggests that the Pope had in some way heard about problems faced by the Order. This conclusion is supported by the fact he repeated previously granted concessions and then added new freedoms. If his bull had been simply a routine letter, he would not have found it necessary to introduce these new measures.

Half of *Christiane fidei religio* set out the Pope's knowledge of the Hospital in Jerusalem. It outlined the devotion of the serving brothers and rehearsed the encouragement and protection, given to them by the Papacy. Following initial greetings, he wrote that the Christian Faith taught how for our sake our Lord and Saviour, although rich, became poor. Because of this it was fitting for his followers to imitate his beatitude, when he said: "*Blessed are the poor since*

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<sup>6</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 122.

*theirs is the kingdom of heaven*".<sup>7</sup> The Pope added that this statement had an associated counter promise that heaven was for the poor. He went on to add that the same Father of orphans and of the poor exhorted us in the Gospel, to give hospitality and kindness when he said that: "*What you did for one of the least, you did for me*"<sup>8</sup>

In praising the serving brothers the Pope approved greatly the excellent humanitarian work carried out by them, in hot weather and in rain, and which was done freely and without payment. In his governing and official capacity, and with his fatherly solicitude, Innocent announced this to all near and far. He accepted with his authority, the devotion of the house of the Hospital in the holy city of Jerusalem, with all its persons and possessions, and took it under the protection of St Peter. This privileged communication was sent to the Hospital from his apostolic throne.

Innocent ratified all previous statutes and communiques given to the Hospital. Any laws or decrees previously given, or any granted in the future by pontifical concessions, were accepted. In fact, the Pope assured the Hospital that if it had any problems in the future it had his support by God's grace. If any question of the Hospital's independence should arise, which might concern Church Law, or if anything was brought against the faithful, or indeed if there was any trouble at all, he would help so that it could continue its work unimpaired.

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<sup>7</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 122. "Beati , inquit pauperes, quoniam vestrum est regnum celorum". St Matthew 5:3.

<sup>8</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 122. "Quod uni ex minimis meis fecistis, michi fecistis". St Matthew 25:10.



The second half of *Christiane fidei religio* moved onto new ground by giving the Hospital permission to occupy abandoned properties, in order to possess them and make farms. Churches and cemeteries could be built on these places for the use of those living there. On cultivated land owned by the Hospitallers, from which they collected income, they were permitted to have chapels and cemeteries for the use of brothers. According to Riley-Smith this was the third of five bulls which contain the basic privileges of the Order of St John.<sup>9</sup>

Innocent declared that the Papacy offered the protection of St Peter to the brothers and to collectors of alms working for them, so that their work could be carried out in peace. He also referred to property that had been dedicated to the Order but which an important Church might control. If that Church should seek to curtail the burial of the dead on the Order's property, it would not be able to deny the burial of a brother. This was to apply even if the brother had been named and anathematized.

If churches in villages on land given to the Order, which were due to be visited by brothers to collect their assessments, had been placed under a religious ordinance by a local bishop or church and closed to worship, the brothers were permitted to use them once a year, provided that they excluded any excommunicants from divine celebration.

In the second last paragraph, Innocent reiterated the previous freedom given to the Hospital regarding collection of tithes. As his reason for doing so, the Pope stated that food produced on Hospitaller land was exclusively owed to the

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<sup>9</sup> Riley-Smith, *Knights*, note 1, p. 46.

poor and pilgrims. This being the case, such food was not to be forced to pay taxes.

Innocent's third bull for the Hospitallers was different to the previous two. It was in the form of a letter to venerable brothers, archbishops, bishops, abbots and other ecclesiastical prelates. It was an appeal from the Pope to encourage church leaders to promote alms for the Hospital, in their various areas of responsibility and because of this it appears to have circulated more widely than in the Holy Land alone. The Pope marvelled at the love for God and the respect for men which existed in the Jerusalem Hospital and admired the good-natured and beneficial treatment offered to the pilgrims and paupers there.<sup>10</sup>

He wrote of how visitors to Jerusalem experienced trials by land and sea but were driven on by pious devotion to reach the holy city and visit the Sepulchre of the Lord. At the Hospital the needy and the poor were restored to health and the responsibilities involved in this work, produced a dangerous fatigue in the brothers. Part of their duties was to carry their patients to "the sacred place where the consecrated bodily presence of our Lord Jesus Christ was found". This reference was to the Hospital where the sick received the body of Christ in the sacrament. The healing work was done joyfully and when patients arrived in the house of the brothers they received personal treatment. The brothers dedicated themselves to their tasks and diligently followed them through to completion.

The Pope explained that the work of the Hospital was expensive to carry

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<sup>10</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 130.

out and exhorted prelates to help. He quoted from St Paul to the effect that those who had an abundance of this world's goods ought to supply the needs of others.<sup>11</sup> He decreed that donors to the Hospital were to be absolved of one seventh of any authorized penance. This concept was little known prior to 1100, though it introduced the development of the system of indulgences.<sup>12</sup> Later in that century Urban preached the gaining of the remission of sins, by participating in an armed pilgrimage, and so gave meaning to the idea of an unqualified indulgence of sins.<sup>13</sup>

The Pope found it necessary to again declare that on no account were Hospitallers to be prohibited from church burials. For a second time also, Innocent permitted them to open their churches during interdicts in order to celebrate the divine office and to collect alms. There was also a new decree that clerics could serve the order for two or three years and that no one was to hinder them or prejudice their benefices.

Innocent ended by explaining that he had made a strong plea of this kind at a previous synod at Pisa (1135),<sup>14</sup> and also at the Second Lateran Council in 1139. He explained that he was repeating his entreaty for aid to the brothers by means of this loving effort, which was owed to them. By encouraging the giving of alms to those who served God, he believed that church leaders would be able to assist and foster those for whom they must care.

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<sup>11</sup> 2 Corinthians, 8. 14-15.

<sup>12</sup> Cowdrey, *Cluniacs and the Gregorian reform*, pp. 126,129.

<sup>13</sup> Cowdrey, *Cluniacs and the Gregorian reform*, p. 186.

<sup>14</sup> Hefele, *Councils*, vol. 5, p. 425. Innocent held synods at Reims 1131, Piacenza 1132 and Pisa 1135.

The fifth bull, which completed the rise of the Hospitallers and made them into an order of the Church was Anastasius IV's as *Christiane fidei religio*. The Pope confirmed the privileges given previously by Innocent II, Celestine III, Lucius II, and Eugenius III, and gave further concessions to the Hospital.<sup>15</sup>

As well as confirming the use of clergy, who had been licensed by a bishop for a limited time within the order, the Pope now allowed the Hospitallers to have their own full-time clergy and priests, even if a bishop disagreed with their appointment. The Hospital's clergy were to be under the authority of its Chapter and the Pope. No one else was to have authority over them, although bishops were still to ordain them. Bishops were also to carry out their usual ecclesiastical functions for the Hospitallers. A hostile bishop could be replaced by another one if necessary.

Anastasius further conceded that laity could serve the order. Although the Pope did not designate any particular positions, it meant that medical doctors were able to take on a more important role. As well, it also allowed the Hospital to employ laity in various nursing or menial positions needed in general and administration work. Laity had been working within Benedictine monasteries prior to this but the Pope now gave permission for them to be recognized as part of the ministrations, without making a profession or being lay-brothers. The Pope did not consider such lay employees to be lay-brothers.

He also forbade the brothers to leave the Order to return to secular life, or to join another monastery, without the consent of the Master and Chapter. The Benedictine Rule had insisted that a monk promise absolute obedience to his

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<sup>15</sup>Delaville le Roulx, *Cartulaire*, vol. 1, no. 226.

abbot, making it difficult to leave; however, if a monk did leave the Benedictines and later wished to return, he was given three chances to re-establish himself. In the case of monks' excommunications, abbots were exhorted to be compassionate for his rehabilitation.<sup>16</sup>

At the end, Anastasius requoted the original warning against interference in the election of new masters for the Hospital. They should be elected by the brothers according to the will of God. The Pope confirmed all previous *honores* (benefices) and possessions at that time owned by the Hospital, whether over the sea in Asia (i.e. the Holy Land) or in Europe. Future gifts acquired or transferred to the Hospital and devoted to its endeavours, were also confirmed.

Apart from these five bulls which eventually recognised the Hospital as an order of the Church, the Hospitallers received at least ten others written by all Popes between Paschal and Anastasius, except Gelasius II (1118-1119) and Honorius II (1124-30). Although there are no bulls extant for the Hospitallers from Lucius II, he is mentioned as having given one by Anastasius in the second *Christiane fidei religio*. The intermediate bulls were written either to confirm previous concessions or to encourage the Order in some other way.

Among the other bulls, one from Celestine II dated to 9 December 1143 handed over to Raymond du Puy jurisdiction of the Teutonic hospital in Jerusalem, which has been dated from the 1140's.<sup>17</sup> Evidently the Pope had received a report complaining of dissensions and division within that hostel. He

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<sup>16</sup> McCann, *St Benedict*, ch. 5 Obedience, p. 33; chs 29, 58 Leaving, pp. 79, 129; ch. 44 Excommunication, p. 105; ch. 58 Stability, p. 133 .

<sup>17</sup> Benvenisti, *Crusaders*, pp. 63-4.

complained that there ought to be agreement in that hospital and so put it and its possessions under Raymond as prior of the Hospital and his successors.<sup>18</sup> This illustrated the confidence which the Pope had in the Hospitallers, and his support for Raymond.

William of Tyre claimed that on many occasions the Patriarch and other prelates of the church had demanded their rights from the Hospital and may have done so as a result of attending the Third Lateran Council from 1178-1180.<sup>19</sup> Opinions antagonistic to the Hospitallers may have been circulating in the West because of the way they were acquiring property. He claimed that he had heard, from those who knew, how the Hospitallers had gained such influence with Papal support. He also claimed to have written an account of the decrees of the Council at the suggestion of the other clergy present, and included a list of those present.<sup>20</sup>

Contrary to what William wrote, there is, however, little evidence for conflict between the Order and the Patriarchs until the Patriarchates of William (1130-1145) and Fulcher (1146-1157). During the Patriarchates of Arnulf (1112-1118) and Warmund (1118-1128), the Popes had wished to keep the kingdom united and there is no evidence of any discord between the Hospital and the Church.<sup>21</sup> Arnulf had relieved the Hospital from paying tithes and as a controversial figure, he later lived quietly under a threat of deposition.<sup>22</sup> He took

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<sup>18</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 154.

<sup>19</sup> Edbury and Rowe, *William of Tyre*, pp. 23, 29.

<sup>20</sup> William of Tyre, *Chronicon*, 21. 25. 73-79 (vol. 63A, p. 283).

<sup>21</sup> Hiestand, *Papsturkunden*, pp. 112-116: Paschal II, 19 June 1112, 'Apostolice sedis auctoritate'.

<sup>22</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 25.

no steps to change the position of the Church in Jerusalem and did not seek change which might cause trouble. His opponents had complained to the Pope and accused him of promoting his own family and keeping mistresses. The most serious charge against him was that he had performed a bigamous marriage for the King. He was deposed but was reinstated in 1116 after an appeal to the Pope and, after presiding over the annulment of Baldwin's marriage, lived only two further years.<sup>23</sup>

Warmund was more interested in military and social matters than in organizing his diocese. At first he worked well with Baldwin and the two organized what was termed a parliament of clergy and barons at Nablus in 1120. It promulgated twenty-five canons covering such topics as the payment of tithes, marriage regulations, sexual morality, lapsed clergy and false accusations in law.<sup>24</sup> These helped to organize society in the Holy Land and brought church and state closer together. He would have had ample opportunity to criticize the Hospital, if he had wished to do so, but there is no record that he did.

Warmund was not a careful organizer of his diocese and was criticized by an Augustinian canon for not following up his promise, to bless some bones thought to be those of Abraham, Isaac and Jacob. The canons at Hebron had sought to have the Patriarch visit their priory to carry out the blessing, but although he promised several times to fulfil his promise, he failed to visit them.<sup>25</sup>

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<sup>23</sup> Hamilton, *Latin Church*, pp. 61-4.

<sup>24</sup> William of Tyre, *Chronicon*, 12. 13. 1-35 (vol. 63, pp. 563-564); Kedar, "Canons of the Council of Nablus", *Speculum* 74 (1999), 310-335; Mayer, "Concordat of Nablus", *Journal of Ecclesiastical History*, 33 (1982), 531-543.

<sup>25</sup> Riant, "Sepulture", p. 418.

William of Tyre criticized him for not appointing an archbishop soon enough after the Crusaders had captured the city of Tyre. Three years elapsed before any action was taken and during this time William claimed that Tyre and its daughter churches were not administered properly. It appears that the only notable step taken by Warmund for his church during his time as Patriarch was to raise Nazareth to an Archbishopric, sometime between 1125 and 1128.<sup>26</sup>

Although the subject of tithes was discussed at the parliament at Nablus, Warmund does not appear to have been upset by the Hospital and other monasteries not having to pay them. The evidence available suggests that he did not concern himself about the privileges given to the Hospital by Paschal, nor did he come into conflict with Gerard or Raymond du Puy.

Following Warmund, Stephen of Chartres became Patriarch between 1128 and 1130 but fell out of favour with Baldwin when he demanded that Jaffa belonged to him by right, and that Jerusalem be handed over to the Holy Sepulchre after Ascalon had been captured.<sup>27</sup> This demand was related, in William of Tyre's understanding to the agreement between Godfrey and Daimbert, when the Patriarch had demanded the cities of Jerusalem and Jaffa and Godfrey in part acceded to the request.<sup>28</sup> Baldwin was angered by Stephen's claims and there was ill feeling between the two, for the rest of the Patriarch's short episcopacy. This was despite the fact that both men had set up a new diocese at Sebaste, which was revered as the burial-place of John the Baptist, as

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<sup>26</sup> William of Tyre, *Chronicon*, 17. 1. 42-43 (vol. 63A, p. 761).

<sup>27</sup> William of Tyre, *Chronicon*, 13. 25. 21-35 (vol. 63, pp. 619-620).

<sup>28</sup> Hamilton, *Latin Church*, p. 53. William of Tyre, *Chronicon*, 9. 16. 1-30 (vol. 63, pp. 441-442).



a suffragan see of Caesarea.<sup>29</sup> From Stephen, there is again no evidence of complaint about the Hospitallers.

During the Patriarchate of his successor, William (1130-1145), Innocent II sent three bulls to the Hospital. In each of these, *Ad hoc nos, disponente Domino* (1135), *Christiane fidei religio* (1135) and *Quam amabilis Deo* (1139-1143), the Pope dealt with church order and its connection to the Order of St John. No other Pope sent as many as three important bulls, so clearly in favour of the Hospitallers, within such a short time frame.

William was an enforcer of small and parochial rights possessed by the Church. He also had a reputation for being a conscientious organizer.<sup>30</sup> As a man of good moral and religious background,<sup>31</sup> it was understandable that he should try to make his diocese accept the various rights given in canon law to all bishops. As a previous prior of the Holy Sepulchre he would have observed closely the way the Hospitallers used, or abused, their freedoms and this may have given him cause to tighten, what he believed to be, proper church discipline.

William tried to exercise firm control over his Patriarchate but Innocent nevertheless favoured the Hospital, specifically addressing such issues as excommunications, interdicts, burials, neglected areas, alms, tithes, priests and the absolving of benefactors to the Hospital. Raymond du Puy was apparently

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<sup>29</sup> DeRozière, *Cartulaire du Saint Sepulchre*, pp. 81-3.

<sup>30</sup> Hamilton, *Latin Church*, pp. 69-70.

<sup>31</sup> William of Tyre, *Chronicon*, 13. 26. 84-89 (vol. 63, p. 622).

having difficulties with the Patriarch over these matters and appealed to the Pope for assistance in reaffirming the position of the Hospital.

When Fulcher became Patriarch, he followed in the same direction as William. He had been the Archbishop of Tyre prior to his election, had wide experience in administration, and was a defender of the rights of his Church.<sup>32</sup> Considering his background, it would have been easy for him to clash with the Hospital, on points of church law.

The great support given to the Hospitallers by the various Popes in the five establishing bulls was not appreciated or accepted graciously by the bishops. William of Tyre listed their complaints and the only privilege to which he did not object, was its freedom to select and appoint its own Master.

Although he generalized, without naming them, that other monasteries and hospitals had become wealthy following the example of the Hospitallers, he singled out Raymond du Puy and the Order of St John for special condemnation because their new wealth had caused them to “fall away from their allegiance to their pious mother-church”.<sup>33</sup>

The Archbishop saw, both in the Hospital and other institutions, an evil desire to obtain the last possessions of poor churches. He likened the situation to a biblical one in which a man was described as wanting the one favoured ewe lamb of his poor neighbour and William hoped that God would have mercy on such institutions, even though he described the man in the story as “a man of

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<sup>32</sup> William of Tyre, *Chronicon*, 14. 11. 22-35 (vol. 63A, p. 643).

<sup>33</sup> William of Tyre, *Chronicon*, 18. 5. 83-84 , 18. 6. 1-20 (vol. 63A, pp. 817-818).

blood”.<sup>34</sup> The mention of “blood” may be a veiled reference to the battles of the military brothers as the serving brothers of the Hospital were not engaged in military activities and the shedding of blood.

William further complained that the Hospitallers caused great trouble to the patriarch and other prelates over jurisdiction, as well as tithes. By jurisdiction he meant, that the Order received people indiscriminately to the holy sacrament, and included those who had been excommunicated by their bishop, or interdicted by name as punishment. The Hospital was also charged with giving *viaticum* (the last rites),<sup>35</sup> and extreme unction to these persons when sick, and also with burying them.<sup>36</sup>

As a typical and conscientious Archbishop of his age, William did not believe that monks should administer the rites of the Church. This was the function of priests. He saw a clear demarcation between laity and priests and thought that clergy were responsible for the keeping of the faith, morality, and church discipline and that priests alone were ordained to administer the services such as the last rites, and to hear confessions.<sup>37</sup>

Within the Church he accepted that the Papacy administered diocesan structures in the East and that bishops should protect the finances of the Church. He also expected bishops to be upright and well educated, giving a good example to their charges. However, he did not consider these standards to be

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<sup>34</sup> William of Tyre, *Chronicon*, 18. 6. 20 (vol. 63A, p. 818); *I Kings*, 21.19.

<sup>35</sup> *Viaticum*, had the meaning of provisions for a journey, in particular Holy Communion prior to death. Cross, *Christian church*, p. 1416.

<sup>36</sup> William of Tyre, *Chronicon*, 18. 3. 6-14 (vol. 63A, p. 812).

<sup>37</sup> Edbury and Rowe, *William of Tyre*, pp. 92, 105,

universal and did not have a high regard for his colleagues in the Holy Land. Within the state he believed that the Church should work with the secular powers in partnership to support its defence.<sup>38</sup>

William also reported that the bishops complained about the ringing of bells more loudly than usual when a church was under interdict. This, they said, was because the Hospitallers wanted to collect offerings and other revenues which were actually due to the mother churches. He also objected to the fact that the Hospital did not obtain licenses for its priests, from diocesan bishops. It failed to show respect for bishops when a priest was to be dismissed, by not informing the ordinary of its decision.<sup>39</sup>

The worst insult documented by William was the disrespect shown by the Hospitallers to the Patriarch of Jerusalem. He claimed that an antagonism grew up between Patriarch Fulcher and the Hospital when it rang its bells too loudly, while the Patriarch was preaching, with the result that the congregation in the Holy Sepulchre could not hear what he was saying.<sup>40</sup>

William also claimed that in “a spirit of audacious fury”, the Hospitallers had broken into the Holy Sepulchre and fired a shower of arrows, which the canons collected and hung in the cathedral. Although this report seems absurd, William assured his readers that he had actually seen the arrows in question, as had other visitors to Jerusalem.<sup>41</sup> If he did record these events faithfully, it must be another indirect reference to the military brothers, since they rather than the

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<sup>38</sup> Edbury and Rowe, *William of Tyre*, pp. 93, 107, 113.

<sup>39</sup> William of Tyre, *Chronicon*, 18. 3. 22-26 (vol. 63A, p. 812).

<sup>40</sup> William of Tyre, *Chronicon*, 18. 3. 49-56 (vol. 63A, p. 813).

<sup>41</sup> William of Tyre, *Chronicon*, 18. 3. 49-56 (vol. 63A, p. 813).

-serving brothers, would have organized and carried out such an action.

Although William was scathing in his criticism and condemnation of the Hospitallers, he admitted that he did not hold such opinions of all of them. He admitted that in many respects Raymond du Puy was a religious and god-fearing man and he did not accuse all the members of the Order of being arrogant.<sup>42</sup> If the good work of the serving brothers is taken into account, together with the high commendations of the Popes for their charitable work, it would appear that the ministrations of the Hospital were appreciated by most.

Because of the Hospitallers' arrogance towards the Patriarch and other prelates, the bishops demanded that their rights, as they saw them, should be respected. As the controversy developed, both parties appealed to the Papal Court in Rome. Fulcher went to Rome accompanied by Archbishop Peter of Tyre and his suffragans, Bishop Frederick of Acre, Bishop Amalrich of Sidon, Archbishop Baldwin of Caesarea, Bishop Constantine of Lydda, Bishop Renier of Sebaste and Bishop Herbert of Tiberias.<sup>43</sup>

The question arises as to whether the angry bishops actually knew the content of the five papal bulls given to the Hospitallers. If they did know them in detail, then their visit to Rome was to appeal to the Pope, to redress the wrongs done to their positions. However, since other monasteries, mentioned above in chapter two, were given similar privileges, there must have been something else about the Hospital upsetting the prelates. Monasteries elsewhere in Europe and

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<sup>42</sup> William of Tyre, *Chronicon*, 1. 10. 22-6, 14. 22. 46-50, 18. 3. 62-6, 18. 5. 47-56 (vols 63, p.123; 63A, pp. 661, 813, 816). This contradicts his other comment given about Raymond. Thesis p. 109, n. 29.

<sup>43</sup> William of Tyre, *Chronicon*, 18. 6. 20-35 (vol. 63A, p. 818).

the Holy Land were also freed from paying tithes, or at least had them reduced. St Mary of Josaphat was given freedom from tithes by Paschal II and the canons of the *Templum Domini* were granted the greater part of the tithe of Nablus by the Holy Sepulchre. In Europe and in the Holy Land Paschal II and Innocent II had freely given many freedoms to monasteries so they could use their tithes to help the poor. In all dioceses in the Holy Land, there were some properties owned by religious communities which either paid no tithe or only part if it.<sup>44</sup>

William in fact hinted at the reason which caused the ill-feeling between the Patriarch and the Hospital. The Cathedral of the Holy Sepulchre was rebuilt in Romanesque style during the 1140s and was consecrated on 15 July 1149. Around the same time, the Hospital was extended and improved in order to cater for the increased numbers of pilgrims. According to William, Fulcher accused the Hospital of deliberately erecting a more expensive, higher and impressive building than his own cathedral.<sup>45</sup>

This complaint, together with other objections regarding the Hospital, no doubt helped to make the Patriarch appeal to Pope Hadrian to bring the Order to heel. However, Fulcher was not well received by Hadrian, because the Pope had more pressing problems on his hands, and Fulcher returned to Jerusalem without satisfaction.

Fulcher and the bishops acted on what they considered to be faults of the Order according to canon law. Canon two of the First Lateran Council of 1123 prohibited anyone excommunicated by a bishop from receiving communion from

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<sup>44</sup> Constable, *Tithes*, pp. 228-238; Hamiltom, *Latin church*, pp. 147-8,

<sup>45</sup> William of Tyre, *Chronicon*, 18. 3. 27-37 (vol. 63A, pp. 812-813).

another bishop, abbot or clergy. Canon sixteen demanded that monks be subject to their bishops with all humility. Monks were to give due obedience and devoted submission to their bishops in all things, as if to masters and shepherds of the Church.<sup>46</sup>

They were to abstain from visiting the sick and were not to anoint them or hear their confessions. Only priests were qualified to carry out those ministrations. Such regulations reflected clearly the objections of William of Tyre. The Popes had ignored such canons, or at least re-interpreted them in their own way.

The Second Lateran Council of 1139 raised two points of church discipline. Canon three declared again that communion ought not to be given to excommunicants. Canon twenty-four stated that no charge was to be asked for chrism, holy oil or burials.<sup>47</sup> These two canons also may have been behind William of Tyre's accusations against the Hospitallers.<sup>48</sup>

William's strongest complaint about the Hospitallers was their arrogance and lack of respect towards bishops, but he made no reference to the various freedoms which may have contributed to this. In point of fact he made no mention of any of the five bulls given by the popes and appeared to have no direct knowledge of the content of the bulls. He seems to have known nothing of the papal motives for the various privileges given to the Order. He wrote only

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<sup>46</sup> Tanner, *Councils*, First Lateran, pp. 190, 193 [Lateran I, canons 2, 16].

<sup>47</sup> Tanner, *Councils*, Second Lateran, pp. 197, 202 [Lateran II, canons 3, 24].

<sup>48</sup> William of Tyre, *Chronicon*, 18, 3, 10-15 (vol. 63A, p. 812).

that he had heard from those who knew that the papacy was to blame for these problems.<sup>49</sup>

Consideration of the papal bulls and the history of the period in which they were sent is revealing. Military brothers were not mentioned in any of the bulls, despite the fact that they became part of the Order during the period. Moreover, during the years 1112-1128 there was no discord between the Patriarchs and the Order, and trouble began only during the years 1128-1160 when the military brothers were emerging.

Although no direct complaints were directed against the military brothers, the incidents of the arrows and the bells annoying the Patriarch suggest that it was the military brothers who began to cause the problems. Such actions do not suit the behavioural patterns of the serving brothers, who were so commended by the Popes for their love of serving pilgrims and the poor.

Since military brothers were not mentioned in the papal bulls, the question arises as to whether the Popes knew anything of the new development within the Order, and had Raymond du Puy deliberately keep this from Rome, or at least played it down. If so, he may have done so in order to continue to have the papacy's support as well as that of those who only knew of the Order's charitable and innocent good works. It seems that such a development could not have been concealed from Rome, when so many were in a position to explain what was happening.

The years between 1113 and 1154 saw the consolidation and expansion of the Hospital in Jerusalem, giving it a popular identity and confidence under the

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<sup>49</sup>William of Tyre, *Chronicon*, 18. 3. 56-62 (vol. 63A, p. 813).



patronage and auspices of the papacy. In particular, five papal bulls assisted it to become a wealthy institution. Since it was no longer restricted by the Benedictine Rule, it was able to expand in its own particular way. Its reputation and acceptance grew because of the ministry of the serving brothers and their service to pilgrims and the poor. Its expansion was assured. The primary importance of the serving brothers in the papal correspondence reflected and recognized their position in the Order at that stage. This contrasts glaringly with the later dominance of the military brothers.<sup>50</sup>

Unfortunately, bitterness developed between Patriarchs William and Fulcher and other prelates and the Order over wealth, growth and apparent arrogance. They believed that it was ignoring flagrantly the canonical role of bishops and resented their lack of authority over it. Whether they had knowledge of the contents of the various papal bulls is unknown but, if they did, they resented the papacy's favouring of the Hospital, to the detriment of themselves. Against this, it is unlikely that they were ignorant of the freedoms given to the Hospital since other monasteries were also protected and given privileges by the papacy. Whichever way it was, by 1154 the Hospitallers enjoyed the full support of the papacy and were popular with the laity, who benefited from the ministry of the serving brothers.

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<sup>50</sup>Statutes of Alfonso of Portugal, Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193.

## Chapter 5

### The Rule of Raymond du Puy

This chapter sees the necessity to re-examine the Rule of Raymond du Puy so as to introduce a new type of monasticism, to appreciate the Benedictine Rule which was the unwritten curriculum of the Hospitallers, and to discover any influence from other early rules. This was done by dividing Raymond's Rule into sections of like matter and comparing these to any similarities which may have been in the Cassian, Augustinian or Benedictine Rules. Having done this it was found that Raymond's Rule was closer in statement and spirit to the Benedictine Rule, which finding is in contradiction to Riley-Smith's opinion that it was based on the Augustinian.<sup>1</sup>

The years 1120-1160 were important to the Hospitallers in gaining for themselves a firm identity and confidence in their vocation. They received recognition from the Papacy and won an accepted place within the Church. As such they needed to be seen as a separate organization to St Mary of the Latins, the Holy Sepulchre, and monasteries and hospitals. Because monks dedicated themselves to a regular life, they had to express their religious commitment in a written code or rule which stated clearly who they were, where they came from, and the reason for their existence.

They needed to explain their cultural background, the behavioural patterns of their monastery, the reasons for their appearing in the community, and their

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<sup>1</sup> Riley-Smith, *Knights*, p. 48.

special ministry to the poor, sick and pilgrims. Culturally they had to be seen as monks who lived by strict standards of morality, moved widely outside the Hospital in their social work, and were devoted to the caritative care of their “lords the sick”,<sup>2</sup> as they termed their patients. Only with a rule of this type could they achieve wide acceptance and continued support. The Rule of Raymond du Puy was the work of monks of an Order devoted to good works with a new interpretation of monasticism.

The composition of the Rule of Raymond du Puy cannot be dated accurately. Nor can its exact sources be determined. Since the Hospital was initially the responsibility of the Abbot of St Mary of the Latins, it would seem that the rule evolved within the Benedictine culture of the time. However, the main reason for the growth of the Hospital was its ministry to the poor and sick pilgrims visiting Jerusalem and this responsibility took it away from the basic ideology of the Benedictines, leading to the development of a rule which, although nurtured by and based on the Rule of Benedict, became directed towards the Hospital's own ministry.

The date of composition of the Rule of Raymond du Puy, must be estimated from relevant papal bulls. The bull *Quanto, per gratiam Dei*, of Lucius III, which was dated 4 November 1184 or 1185, mentioned the Rule.<sup>3</sup> It also referred to a previous a previous confirmation of the Rule by Pope Eugenius III dated to 1153.<sup>4</sup> It must, therefore, have been in existence before 1153. This

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<sup>2</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627, Statuts de Roger de Molins, 1182, § 10, “*dominis infirmis*”.

<sup>3</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 690.

<sup>4</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 217.

leads Riley-Smith to suggest that it was composed between the death of Gerard in 1120, and that of Eugenius in 1153.<sup>5</sup>

Raymond became Master after Gerard's death in 1120 and so his name appeared at the beginning of the Rule.<sup>6</sup> Following Delaville le Roulx, Riley-Smith suggests that Gerard followed a rudimentary rule which is no longer extant, and that some phrases from this were included in Raymond's Rule.<sup>7</sup> Because the Hospital was under the control of St Mary of the Latins up to 1113 at least, regulations for the Hospital used by Gerard would have originated in the mother-monastery.

A number of manuscripts of Raymond du Puy's Rule exist, of which Delaville le Roulx used two. He used the Old French version of the Rule found in the Vatican Library, and a Latin manuscript dated to 1253 which was a translation of the Old French.<sup>8</sup>

In order to compare the Hospitaller Rule to earlier rules which may have influenced its composition, its nineteen chapters have divided into four divisions. The first group comes under the heading 'Life within the Order'; the second 'The morality of the Rule'; the third 'Standards required when visiting outside the house'; and the fourth 'The charity of the Order'. It will be shown that the first two are based on the culture and practice of previous monasticism but that the second two move into fields of new activity and fresh idealism. The first group

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<sup>5</sup> Riley-Smith, *Knights*, p. 49.

<sup>6</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

<sup>7</sup> Riley-Smith, *Knights*, pp. 50-1; Delaville le Roulx, *Les Hospitalliers*, p. 32.

<sup>8</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, nn. 2 and 3 (p. 62). Also, "Private communication from Anthony Luttrell".

includes chapters 1, 2, 8, 13 and 15. The second includes chapters 9-12, 17 and 18. The third is chapters 4-7, while the fourth group is chapters 3, 14, 16 and 19.

The group “Life within the Order” deals with the basic monastic vows and covers the topics of provisions, clothing, property and loyalty. The caritative work of the Hospitallers may be seen as having been organized within the continuous culture of monasticism. Although there were differences, the essential ideas were common to the Hospitaller, Cassian, Augustinian and Benedictine Rules.

Monasticism developed in three stages, eremitical, or the isolationism of individual monks such as Paul of Thebes; semi-eremitical, when individual monks lived alongside each other in an open street with no common rule of life; and coenobitic, which was the beginning of monks living together in a building or monastery. This marked a big leap forward, when new elements were introduced into ascetic life. Obedience was added as a requirement to poverty, and chastity and labour and handicrafts were introduced. In the Eastern Church Basil of Caesarea suppressed anchorites, introduced monasteries, established them away from deserts, restricted austerities and encouraged learning.<sup>9</sup> As part of this change the Council of Chalcedon of 451 placed all monasteries under the authority of bishops.<sup>10</sup>

John Cassian was the real founder of Western monasticism when he introduced his ideas into Provence in 460, after earlier attempts had been made by Jerome and Martin of Tours around 360, at Ligugé then Tours,. He formulated many of his rules from the teaching and practice of the early Christian monks of

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<sup>9</sup> Wand, *The Early Church*, pp. 190-7.

<sup>10</sup> Wand, *The Early Church*, p. 198.

Palestine, Mesopotamia and Egypt. His two principal works, the Institutes and the Conferences, dealt with the cenobitic or common concepts of monasticism and the evils which opposed the life of the monks.<sup>11</sup> Cassian became a link between Eastern and Western monasticism.

It is possible that the Augustinian Rule may have influenced the Hospitaller Rule since there are fourteen extant manuscripts which have been dated to before 1100,<sup>12</sup> and a copy could have been available to the Hospital in the eleventh and early twelfth centuries. After extensive examination of the various manuscripts and critical scholarship, Lawless concludes that the Augustinian Rule was comprised of, "Regulations for a monastery", "The Rule", "Reprimand for quarrelling nuns" (Letter 211.1-4) and "Rule for nuns" (Letter 211.5-16).<sup>13</sup> It is generally accepted that it was written around 397,<sup>14</sup> even though the Augustinians did not attempt to become a formal organization until the fourth Lateran Council of 1215.<sup>15</sup>

There has been controversy over the actual form of the Augustinian Rule but Lawless's judgement is based on more recent research than those of Leyser and older scholars, who believed that Augustines' Rule was composed of only two parts: the *Regula Prima* and the *Regular Tertia*. Leyser thought that the third document, *Ordo Monasterii* or "Regulations for a Monastery" was not known widely enough to be accepted.<sup>16</sup>

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<sup>11</sup> Ramsey, *Cassian*, pp. 5-7.

<sup>12</sup> Lawless, *Augustine*, p. 130.

<sup>13</sup> Lawless, *Augustine*, p. 121.

<sup>14</sup> Lawless, *Augustine*, p. 149.

<sup>15</sup> Lawrence, *Monasticism*, p. 141.

<sup>16</sup> Leyser, *Hermits and the New Monasticism*, p. 91.

The seventh century saw the spread of the Benedictine monasteries in Western Europe and for use in these monasteries there were many manuscripts of Benedict's Rule. At first it was quite usual to expect new monasteries to follow both the earlier Columban and Benedictine Rules although in time the Celtic rule fell into desuetude. This had been more severe in practice and more closely aligned to Eastern lives and rules of the Egyptian monks Antony and Pachomius as well as Basil and Cassian.<sup>17</sup>

In 670 the synod of Autun made the Benedictine Rule obligatory in part of France and synods of 742 and 743 decreed emphatically that it become the standard for all men and women's cloisters. However it was not until an assembly at Aix-la-Chapelle in 816-818 that it was decided to unify Carolingian monastic practice. It "seemed to be an imperial attempt to set Benedict (of Aniane) over all the monasteries' in the realm".<sup>18</sup>

Chapter one of Raymond du Puy's Rule declared that the Hospitallers were to keep their promise of chastity, obedience, and no personal property, as God would require these three things of them at the Last Judgement.<sup>19</sup>

Cassian's aim was to exhort the monks to live a life of complete dedication to the laws of God. Although he failed to give details of life in a monastery, he inferred and expected that monks would keep the moral standards of poverty, chastity and obedience as part of his teaching.<sup>20</sup>

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<sup>17</sup> Deanesly, *Medieval Church*, p. 36.

<sup>18</sup> Cabaniss, *The Emperor's monk*, p. 17.

<sup>19</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 1.

<sup>20</sup> Ramsey, *Cassian, Institutes*, bk IV, chs IV, V, VII, IX, X (pp. 80-3). *Conferences*, bk. VII, ch. 1 (p. 247).

In the Rule of Augustine no one chapter mentioned all three of chastity, obedience and poverty. In the “Regulations for a monastery”, paragraph four, it stated that no monk was to claim anything as his own, not even his clothes.<sup>21</sup> Then in paragraph six of the same section a monk was told to obey with fidelity, to honour his father after God and to defer to anyone over him.<sup>22</sup> Later he was exhorted with great intensity not to associate with women, because of the possibility of sexual temptation.<sup>23</sup>

Like Cassian, Benedict did not combine vows of poverty, chastity and obedience in one chapter but these were found expressed throughout his Rule and taught without question in line with the earlier rules.<sup>24</sup> It would seem that the Hospitallers accepted and emphasised poverty, chastity and obedience as the foundational ideals of monasticism.

Chapter two of Raymond’s Rule said that a brother could expect bread, water and clothes from the Order as his right and due.<sup>25</sup> Cassian had not considered feeding individual monks or hermits and the Augustinian Rule did not actually stipulate anything about food given to monks, but it did insist on monks being nourished with good food. The superior was to administer the food given out according to the needs of individual monks.<sup>26</sup> The Rule of Benedict showed consideration for the food given to monks and suggested that two kinds of

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<sup>21</sup> Lawless, *Augustine*, Regulations, (§4, p. 75).

<sup>22</sup> Lawless, *Augustine*, Regulations, (§6, p. 77).

<sup>23</sup> Lawless, *Augustine*, Rule, ch. 4 (§§4-11, pp. 88-93).

<sup>24</sup> McCann, *St Benedict*, Obedience, ch. 5 (pp. 32-5), ch. 58 (pp. 128-133), ch. 7 (pp. 36-49), Poverty, ch. 33 (pp. 84-7), Chastity ch. 4 (pp. 30-1).

<sup>25</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 2.

<sup>26</sup> Lawless, *Augustine*, Rule, ch. 1 (§3, pp. 80-1), Regulations, ch. 3 (pp. 74-5).



cooked food be offered with vegetables and fruit, as well as bread and wine which was to be a private choice.<sup>27</sup>

In the second part of chapter eight, Raymond gave more directives regarding the meals of the brethren.<sup>28</sup> Hospitallers were to eat only twice a day, with no meat on Wednesday or Saturday or from Septuagesima until Easter. Special concessions were to be given to the sick and feeble. Cassian had referred to food only in connection with gluttony and its control,<sup>29</sup> and the Augustinian Rule merely to nourishment being necessary, and food being supplied to monks as required. There was a similarity between the Hospitaller and the Benedictine rules, however, in that both specified two meals a day.

Chapters two and eight of the Hospitaller Rule also mentioned clothing for the brethren. This was to be of modest appearance and they were forbidden at any time to wear brightly coloured cloth, or any animal fur or fustian. Also in this section the brothers were forbidden to sleep without a shirt of linen or wool, or some such similar garment.<sup>30</sup> Cassian had insisted that monks should wear the monkish garb throughout their life in the monastery,<sup>31</sup> and Augustine that the clothing of the brothers should not attract attention and that they should rather gain respect by the life they lived.<sup>32</sup> However, Benedict expected that an abbot would provide clothes for his monks suitable for the local climate or the activities of the monks. They were not to have expensive clothes and their tunics and

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<sup>27</sup> McCann, *St Benedict*, ch. 39 (pp. 94-7), ch. 40 (pp. 96-9).

<sup>28</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 8.

<sup>29</sup> Ramsey, *Cassian, Institutes*, bk. V (pp. 113-150), bk. VII (pp. 167-189), Conferences, bk. XXI, chs. 24 – 30 (pp. 738-43).

<sup>30</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, chs. 2, 8.

<sup>31</sup> Ramsey, *Cassian, Institutes*, bk. I, chs. I-XI (pp. 21-35).

<sup>32</sup> Lawless, *Augustine, Rule*, ch. 4 (§1, pp. 86-7).

cowls were to be cheap ones about which they were not to complain.<sup>33</sup> Again each order was similar in its requirements but chapter eight of Raymond's Rule could easily have been extrapolated from the Benedictine Rule. Chapter thirteen of the Hospitaller Rule demanded that no brother own property. If any brother died and left property to another brother the recipient was to be severely punished. In this case the money was to be tied around the offender's neck and he was to be led naked through the Hospital or the house where he lived. After this treatment he was to be beaten by another brother, and do penance for forty days, and fast on Wednesdays and Fridays on bread and water.<sup>34</sup>

The Institutes of Cassian forbade monks possessing money to remain in the monastery. He quoted the punishment handed out to Ananias and Saphira, as well as Judas,<sup>35</sup> as examples of covetousness, and believed that the only way to have victory over covetousness was to strip oneself of every possession, as the apostles did in the early Church.<sup>36</sup> Although the sin of covetousness was so condemned strongly by Cassian, nowhere did he suggest any physical punishment for owning any possessions.

The Rule of Augustine expected monks to share everything and went to great lengths to explain its teaching.<sup>37</sup> It also made no mention of any punishment for the guilty. The Benedictine Rule did not permit a monk to own anything. Benedict expected a disobedient monk to be punished, although the

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<sup>33</sup> McCann, *St Benedict*, ch. 55 (pp. 124-5).

<sup>34</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 13.

<sup>35</sup> *Acts of the Apostles*, 1.16-19, 5. 1-6.

<sup>36</sup> Ramsey, *Cassian, Institutes*, bk. VII, chs. I-XXXI (pp. 169-189).

<sup>37</sup> Lawless, *Augustine, Rule*, ch. 1 (§7, pp. 82-3), ch. 5 (§3, pp. 94-5).

punishment was not detailed in the Rule. Monks having possessions were frowned upon as an offence against the brothers. In this regard the Hospitaller's Rule was more severe than either the Augustinian or Benedictine although the Benedictine did include punishment for the offence.

The last of this first group of chapters in the Hospitaller Rule gathered together under the heading of 'Life within the Order', was the expectancy of loyalty to the monastery. Chapter fifteen of the Hospitaller's Rule decreed that the entire Rule was to be kept with the utmost strictness out of respect for Almighty God, the Blessed Mary, the Blessed St John (presumably John the Baptist), and the poor.<sup>38</sup> It referred to all the things "detailed above" and may have been an earlier ending to the Rule. Although this is possible, the present chapters 16 to 19 do suit the tenor of the preceding ones in that they deal with the sick and also discipline.

Cassian differed in thinking that the meaning of loyalty was best considered as faithfulness to the worship of God.<sup>39</sup> Augustine admonished his monks to keep his precepts in the spirit of love and to read his Rule once a week.<sup>40</sup> Benedict concluded his Rule by saying that it ought to be followed in order to come to a greater knowledge and virtue.<sup>41</sup>

Close comparison of the Rule of Raymond du Puy to the previous monastic rules reveals that some of the basic ideas of monasticism regarding what was expected of monks were included by Raymond du Puy. Although

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<sup>38</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 15.

<sup>39</sup> Ramsey, *Cassian, Conferences*, bk. I, ch. IV (§1, pp. 42-3).

<sup>40</sup> Lawless, *Augustine, Rule*, ch. 8 (§§1-2, pp.102-3).

<sup>41</sup> McCann, *St Benedict*, ch. 58 (pp. 128-9), ch. 73 (pp. 160-1).

Cassian was not concerned with providing food and clothing the vows of chastity, poverty and obedience, standards of dress, having no property and loyalty to the order were common to all the orders. However, the Benedictine Rule seems closest to the Hospitaller Rule in this respect.

The second group of chapters have been gathered together under the heading of 'The morality of the Rule', or the proper standards of behaviour expected of monks. This second group includes fornication, quarrels, silence, bad behaviour, punishment of monks, and also mutual correction. A behavioural pattern for the Hospitallers had to be articulated not only to exhibit a clear morality but also to give them a guide to their organization and a sense of worth and self esteem. These ideals had been handed down as part of the culture of monasticism and again corresponded to the other rules considered.

Cassian believed in strict self control and the Augustinians, Benedictines and Hospitallers took a firm attitude towards morality with the Hospitallers being more in spirit with the Benedictines.

The ninth chapter of Raymond's Rule condemned brothers who were guilty of fornication. It stated that it hoped this would never happen; however, if it did take place, the offender was to be punished privately, provided that the crime was not known publicly. If the fornication was known abroad in the community, the brother was to be flogged after Mass. This was to be "in the sight of all, by his Master, or a cleric, if he shall be a cleric who shall have sinned, but if he shall be a lay brother, by a cleric, or by him whom the cleric shall direct". The guilty party was then to be expelled from their company. If after a time God enlightened his

heart and he returned to “The House of the Poor”, confessed himself to be guilty and a transgressor against the law of God, and promised amendment, he should be received. Suitable penance should be imposed upon him and he should be isolated from the rest and observed by the brothers for a year. If he was satisfactory then afterwards “let the brothers do as seems good to them”.<sup>42</sup>

In both the *Institutes* and *Conferences* Cassian discussed at length the subject of fornication and its remedy, believing that chastity could not be achieved without the grace of God. Augustine devoted a whole chapter to containing illicit sexual behaviour and escaping from temptations which may arise between men and women.<sup>43</sup> It did not mention fornication or sexual misconduct, but has some similarities to the Hospitaller Rule.<sup>44</sup> Chapters twenty-three to thirty of the Benedictine Rule dealt with minor or major offences against the Rule. Fornication would have been a major offence. If a brother warned about his sin persisted, he was to be isolated or excommunicated. As a last resort any persistently disobedient brother was to be given corporal punishment and if this did not bring about true repentance he was to be excommunicated and expelled from the monastery.<sup>45</sup> The Hospitaller Rule was clearly more in the spirit of the Benedictine Rule.

Chapter ten of Raymond du Puy’s Rule declared that when a brother disputed with another brother and the Procurator of the House heard the noise, the offender should be given penance. He was to fast for seven days and be

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<sup>42</sup> Delaville le Roulx. *Cartulaire*, vol. 1, no. 70, ch. 9.

<sup>43</sup> Lawless, *Augustine*, Rule, ch. 4 (§§1-11, pp. 86-93).

<sup>44</sup> Ramsey, *Cassian, Institutes*, bk. VI (pp. 151-166), *Conferences*, bk. III, (pp. 117-139).

<sup>45</sup> McCann, *St Benedict*, chs. 23-30 (pp. 72-81).

allowed only bread and water on Wednesday and Friday. He was to eat on the ground without table or napkin. If one brother wounded another brother he was to fast for forty days. If a brother left the house or his Master without permission, but later returned, he was to eat for forty days on the ground. He was also to fast on Wednesdays and Fridays on bread and water. After this he was to remain in the place of a stranger for a period of time equal to his absence, unless the Chapter decreed otherwise.<sup>46</sup>

Cassian neither specified any correction or punishment for brothers striking each other nor mentioned any possibility of this taking place.<sup>47</sup> By comparison to the Hospitallers, the Augustinians simply exhorted brothers not to quarrel and to apologise if they did. If a brother was angry and not willing to ask for pardon he could be dismissed.<sup>48</sup> Benedict taught that brothers were not do any injury to each other and if necessary the guilty party could be excommunicated from oratory and table.<sup>49</sup> A brother who struck another was reprimanded in the presence of all his fellows.<sup>50</sup> The Hospitaller Rule was closer to the Benedictine than to the others as regards the use of physical punishment but, even so, Raymond du Puy's Rule was more severe than the others.

Chapter eleven in the Hospitaller Rule expected the brothers to be silent at meals, as the apostle said (*2 Thessalonians*, 3.12), and not to drink after compline, except pure water, or to speak to each other while in bed.<sup>51</sup> Cassian

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<sup>46</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 10.

<sup>47</sup> Ramsey, *Cassian, Conferences*, bk. XX (pp. 691-709).

<sup>48</sup> Lawless, *Augustine, Rule*, ch. 6 (§§1-2, pp. 98-9).

<sup>49</sup> McCann, *St Benedict*, ch. 44, pp. 104-7.

<sup>50</sup> McCann, *St Benedict*, ch. 70, pp. 156-7.

<sup>51</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 11.

was not concerned with monks living together and Augustine believed his monks should be silent during meals unless the superior had cause to speak. He also taught that monks were not to speak to each other during work or to engage in idle conversation.<sup>52</sup> He did not mention drinking after compline or being silent in bed. On the subject of silence in a monastery the Benedictine Rule stipulated that the monks were not to love much speaking and were not to use words which would provoke evil laughter. The Rule promoted the value of silence by quoting *Psalms*, 38.2-3, which described the writer as setting a guard over his mouth. Even on the subject of edifying discourse Benedict thought that the least said the better. Like the Hospitallers he stated that no monk should speak after compline and that monks were to remain in silence throughout the night.<sup>53</sup> In this regard the Hospitaller Rule is closer to the Benedictine Rule and not, as suggested by Riley-Smith, to the Augustinian.<sup>54</sup>

Chapter twelve of Raymond's Rule taught that if a brother did not conduct himself well he was to be admonished and corrected by his master, or by other brethren. If after two or three corrections he did not amend his ways, or obey "he was to be sent to us" (presumably the Jerusalem Chapter) on foot, with a written report on his sin. Offenders (obviously in the Holy Land) were to be given small allowances for travelling expenses incurred on the journey to Jerusalem. When the brother arrived he was to be corrected by those in authority. In the treatment of *sergeants*, or servants, no brother was to hit them for any fault, but rather the

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<sup>52</sup> Lawless, *Augustine*, Regulations, nos. 8, 9 (pp. 76-7).

<sup>53</sup> McCann, *St Benedict*, ch. 6 (pp. 34-7), ch. 7 (pp. 46-7), ch. 42 (pp. 100-1).

<sup>54</sup> Riley Smith, *Knights*, p. 48.

servant who had erred was to suffer at the hands of the Master and all the brothers, with the condition that justice was to be done.<sup>55</sup>

Cassian had eight books of his *Institutes* dealing with evil behaviour, though there was little mention of punishment.<sup>56</sup> Augustine ordered that the handling of bad behaviour be given to the Superior. He was to administer punishment if necessary and was not to overlook any necessary correction of a monk. In all matters of discipline the Superior was to conduct all things in a spirit of love and service.<sup>57</sup> Benedict stipulated that no monk was to strike another under threat of being taken to task by the other brothers.<sup>58</sup> The Hospitallers may have taken the idea of punishing bad behaviour partly from Augustine but the idea of involving of all the brothers in certain types of discipline came from the Benedictines.

Chapter seventeen of Raymond's Rule dealt with brethren correcting each other in the Hospital. If two brothers were together and one of them conducted himself in evil ways the second brother was not to tell anyone, not even the prior. This was to allow the guilty brother to amend his ways by asking two or three brothers to chastise him. At the end of the punishment if the evil brother had corrected his ways then the brothers should rejoice. If the evil brother did not repent, the innocent brother was to make a record of his guilt, hand it to the Master privately, and allow the Master to deal with the problem.<sup>59</sup> The earlier Old

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<sup>55</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 12.

<sup>56</sup> Ramsey, *Cassian, Institutes*, Eight Evils, bks V-XII (pp. 113-279).

<sup>57</sup> Lawless, *Augustine, Rule*, ch. 7 (§§1-4, pp. 100-3).

<sup>58</sup> McCann, *St Benedict*, ch. 70 (p. 156-7).

<sup>59</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 17.



French version included the Chapter, with the Master, in dealing with the problem which suggests that at that stage the Chapter, that is all the brothers, was seeking to exert more authority in the Order.

Cassian did not allow any brothers to correct others. His emphasis was rather that only the grace of God could transform a life.<sup>60</sup> Augustine did not mention any one monk correcting another except in connection with sexual misbehaviour.<sup>61</sup> Benedict taught that brothers ought to obey each other and especially that junior brothers must obey their seniors. Quarrelling was to be corrected by the abbot or a senior and if there was any obstinacy in this regard, punishment should be administered. This could include a beating and if the offender continued to be stubborn, he was to be expelled from the monastery.<sup>62</sup> The comparison suggests that the Hospitaller Rule had more in common here with the Augustinian than the Benedictine.

The topic of brothers accusing others was addressed in chapter eighteen of the Hospitaller Rule.<sup>63</sup> If one brother accused another brother, the accuser should be able to prove the accusation. If not, he showed that he was not a true brother. It continued by saying that if the accusation could not be proved, the accuser should suffer the same penalty as would have been given to the accused if guilty,<sup>64</sup> which was a common principle of medieval law. As mentioned above, the Augustinians were to accuse their confrères if they thought that any of

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<sup>60</sup> Ramsey, *Cassian, Conferences*, bk. XIII, ch. III (pp. 467-9).

<sup>61</sup> Lawless, *Augustine, Rule*, ch. 4 (§§8-9, pp. 90-3).

<sup>62</sup> McCann, *St Benedict*, ch. 71 (pp. 158-9).

<sup>63</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch.18.

<sup>64</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch.18.

their number was misbehaving with a woman. There should be two or three witnesses who could punish the recalcitrant monk. If the accused persisted he was to be charged and accused before all the others and if necessary be expelled.<sup>65</sup> Under the Benedictine Rule a monk was not to be accused and punished by any of the brothers because the abbot controlled all discipline. Chapter forty-six decreed that if a monk concealed a misdeed from the abbot and the community and was then reported by another, he was liable to be given a greater correction. If it was a secret sin and a culprit confessed to the abbot or a spiritual senior he was not to be publicly accused.<sup>66</sup> This chapter of the Hospitaller Rule had more in keeping with the Augustinians.

Consideration of the first two divisions of chapters of the Hospitaller Rule shows a general similarity to the earlier rules with a leaning towards the Benedictine Rule. However, the next two groups are different in essence and form from preceding rules. In these chapters the Hospitallers proclaimed their reason for being, both in their Hospital and in the community. They needed to create a good reputation and confidence among people they served and to gain support from almsgiving. These also show the distinctive ministry which they offered through their caritative caring for those in need.

The third division of chapters (4-7, 15) of the Rule of Raymond du Puy moved away from the outlook of separation from the world. The chapters in this grouping may be given the title, "Standards required when visiting outside the house". Here Raymond's Rule dealt with monks working outside an institution. As

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<sup>65</sup> Lawless, *Augustine*, Rule, ch. 4 (§§8-9, pp. 90-3).

<sup>66</sup> McCann, *St Benedict*, ch. 46 (pp. 108-9).

Cassian presumed that monks would not leave their calling for any other activity, this concept can be compared legitimately, only to the Augustinians and the Benedictines. The Hospitallers needed to move about in the community and countryside in order to preach and seek alms, as well as to do ambulance and social work.

Chapter four of the Hospitaller Rule detailed the behaviour expected of the brothers who left the Hospital to visit cities and farms. They were to travel in twos or threes, organised and chosen by the Master, and were to remain together at all times while away. Holiness was to be their standard in dress and movement and if they were in a house or church with women present, they were to preserve their modesty and not to allow them to wash their hands or feet or make their beds.<sup>67</sup> This was similar to the Augustinians, who were also to act with decorum when visiting within the secular community and who were to be accompanied by another brother.

In chapters fifty and fifty-one Benedict addressed monks away from their monastery at any time, even though they were expected generally to remain in the monastery.<sup>68</sup> If monks worked far from the oratory, or were travelling on a journey, or were away only for a day, they were instructed to say the office on bended knee. If their absence was only for a day, they were not to eat while away from the monastery. So strict were these regulations that a disobedient monk was to be excommunicated.<sup>69</sup>

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<sup>67</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70. ch. 4.

<sup>68</sup> McCann, *St Benedict*, chs. 50, 51 (pp. 116-17), 58 (pp. 128-133), 60 (pp. 136-7), 61 (pp. 138-141).

<sup>69</sup> McCann, *St Benedict*, chs. 50, 51 (pp. 116-17).

The idea of the Hospitallers visiting in the community may be reflected in the Augustinian as well as Benedictine Rules. Raymond may have combined the Augustinian desire for modesty when on outside business, with the Benedictine rule's permitting brothers to move outside on monastery business.

Chapters five and six discussed collecting and distributing alms. Both clerical and lay brothers were to find lodging in a church or other place and were not permitted to buy anything but rather had to ask for food. If things became desperate they were permitted to buy one meal. When the brothers returned to the Hospital all the alms collected were to be given to the Master with an accounting record. The Master would then transmit them to the poor in the Hospital with his own account. The Master was to receive a third part of the bread, wine and all the food from the obediences or properties owned by the Hospital. Any surplus was to be added to the alms and after being recorded, all was to be handed over to the poor, presumably in Jerusalem.<sup>70</sup> Brothers sent to make collections were to be received by whichever obedience they visited, were to receive such food as they had arranged, and were not to demand anything else. Those travelling were to carry a lantern, which was to remain alight outside the house where they were staying, presumably for identification or safety.<sup>71</sup>

Neither the Augustinians nor the Benedictines were engaged in these practices; however, the behaviour of brothers outside a monastery in both of these Rules was to be impeccable. In these regulations it seems the Hospital came close to following the ideals of both the Augustinians and the Benedictines,

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<sup>70</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, chs 5, 6.

<sup>71</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 7.

but Raymond added more directions because this outside work was important to the Hospitallers.

The four chapters of the fourth division of the Rule may be put under the heading of “The charity of the Order”. Chapter three regulated the brother’s conduct in church services, procedures at Mass, and the visit of the priest to the sick in the wards. In church brothers were to be decorous, with appropriate conversation. Clerics, deacons, and sub-deacons were to serve the altar dressed in white. A light was to be in the Church day and night. Dressed in white the priest was to visit the sick carrying the sacrament, with the deacon and sub-deacon, or an acolyte, walking in front carrying a light as well as a sponge with holy water and container.<sup>72</sup> There is nothing similar to this in either the Augustinian or Benedictine Rules, except that the attitude of the deacons in church was described in both.

Chapter sixteen described the way in which the sick were to be received into the Hospital. In the introduction to his rule Raymond spoke of “Christ’s service to the poor” and in chapter one the subject was the sick. When a sick person was first admitted into any obedience, he was to confess his sins to a priest and then to receive Holy Communion before being carried to his bed. Before the brothers ate themselves the sick were to be fed each day with food given in charity according to the ability of the House, as if they were their lords. Each Sunday the Epistle and Gospel were chanted in the House and the building was sprinkled with holy water during a procession around the wards.<sup>73</sup>

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<sup>72</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 3.

<sup>73</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 16.

There follows an out of place ending to this chapter. Brothers who held obediences in different lands and who gave the money of the poor to any secular person in an attempt to prevail by force against the Master, were to be cast out.

Although the Augustinian Rule instructed monasteries to care for sick monks, the admonition was in a paragraph in conjunction with eating food. It dictated that food for strengthening the ill, must not become a pleasure to the sick.<sup>74</sup> Little thought was given to the treatment of the sick in physical or spiritual ways. In the Benedictine Rule, however, more consideration was given to sick brethren. They were to be cared for as Christ himself and the Abbot was instructed to make sure that sick monks were not neglected by the cellarers or attendants of the monastery.<sup>75</sup>

The Benedictines offered hospitality to travellers or pilgrims and treated them as Christ in the same way as the sick. A complicated procedure was followed in welcoming guests and a warning was given to the effect that the utmost care should be taken in the reception of the poor and travelers, because Christ was more in them, whereas the wealthy were given respect because of their wealth.<sup>76</sup>

Benedict's regulations for the treatment of the poor and pilgrims were obviously the source from which Raymond and the Hospitallers took their own. His ideas pervaded Raymond's Rule in other ways as well. Because Benedict taught that idleness was the enemy of the soul, he encouraged his monks to

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<sup>74</sup> Lawless, *Augustine*, Rule, ch. 3 (§5, pp. 86-7).

<sup>75</sup> McCann, *St Benedict*, ch. 36 (pp. 90-1).

<sup>76</sup> McCann, *St Benedict*, ch. 53 (pp. 118-123).

engage in physical as well as mental and spiritual activities.<sup>77</sup> This practical attitude to religious life helped to give the Hospitallers a sense of purpose.

One example of the close connection between the Hospitallers and the Benedictines was the inclusion of the Trental (Masses for a dead brother) in Raymond's Rule. Rule fourteen decreed that the office be celebrated for the souls of deceased brethren. Masses were to be chanted for thirty days. At the first of these, each brother was to offer one candle and one coin. The money was to be given to the poor and the priest who conducted the Masses and if not then the House received it. If the priest was a visitor, he was to be given hospitality and at the end of the proceedings, the Master was to give charity to him.

All garments of a dead brother were to be given to the poor. Brother priests participating in the Masses were to pray to the Lord for the soul of the dead brother. Each cleric was to chant the psalter and each lay brother was to say one hundred and fifty paternosters. This chapter ended unusually by saying that in sins, complaints and all matters the Chapter had the final decision.<sup>78</sup>

The Benedictines had made use of the Trental of Masses, or Gregorian Masses for the Dead, since Gregory I had been a Benedictine abbot. Gregory found that one of his monks, Justus, had hidden three gold crowns. The abbot was angry and punished him severely by isolation, so much so that he was not buried in sacred ground but under a dunghill. However, since Justus had died penitent, Gregory ordered a Mass to be said for the repose of his soul on each of thirty days. Gregory was later told that the soul of Justus appeared to Copiosus,

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<sup>77</sup> McCann, *St Benedict*, ch. 48 (pp. 110-13).

<sup>78</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 14.

his natural brother, telling him he had been released from his torments. As a result of this incident, the Trental became a tradition in the Benedictine Order but not among the Augustinians.<sup>79</sup>

Chapter nineteen is the last chapter of the Rule of Raymond du Puy to be considered. It decreed that the capes and mantles of the brethren were to have the Sign of the Cross on the breast,<sup>80</sup> in honour of God and the Holy Cross and for the protection of the brother who wore it. It was considered that the brother would be guarded and defended in soul and body by his faith, works of obedience, and the sign of the Cross. As well as the Hospitallers, benefactors of the Hospital were considered to be under the protection of God from the devil, in this world and the next. This chapter and its doctrines was obviously not prefigured in any earlier rule.

Considering the Hospitaller Rule under the headings of traditional concepts of monasticism, moral standards of monasticism expected, standards of behaviour for brothers outside the house, and the individualistic ideas of the Hospital, reveals a clear pattern. The first two divisions were in line with the general culture of monasticism based on the Benedictine Rule. The third grouping also fits with a broad interpretation of the Benedictine Rule but the Augustinian Rule has a close similarity to chapter four of the Hospitaller Rule. The fourth division of chapters contains the inclusions which are unique to the Hospital and may have been the work of Gerard or Raymond, or both.

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<sup>79</sup> Thurston and Attwater, *Lives of the saints*, pp. 567-68. See also Symons, *Monastic agreement*, ch. XII, pp. 66. Note: This contradicts Dondi who assumes the Liturgy of the Hospitallers was that of the Augustinian canons of the Holy Sepulchre.

<sup>80</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 19.



To conclude, the Rule of Raymond du Puy is much more likely to have been composed upon the basis of the Benedictine Rule than on that of the Augustinian, despite the fact that Pope Lucius III, in 1184-1185, regarded the Hospital as an Augustinian Order. The Hospitallers may have been confused with the Templars, who were initially associated with that Order and up to 1129 followed their Rule.<sup>81</sup> Raymond's Rule may also have included a prior simple rule of Gerard's, some concepts of Raymond's, as well as some ideas taken from the Augustinian Rule.

However, the most outstanding feature of Raymond's Rule was its introduction of the concept of monks going abroad into the community to fulfil caritative functions. It was the first Rule to introduce the idea that a religious order should seek to minister both inside and outside its confines in the surrounding world. Although monasticism had passed through various transformations in the past, the Rule of Raymond du Puy introduced a completely different character to monasticism.

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<sup>81</sup> Lawrence, *Monasticism*, pp. 1, 11-12.

## Chapter 6

### The Hospital and Contemporary Rules

This chapter sets out to prove the unique position of the Hospitallers when compared with other orders which were formulated in the same era. It stands opposed to Riley-Smith on a number of issues. He has suggested that Raymond du Puy was influenced by the Cistercians regarding priests, responsions, chapters and important offices as well as by the growth of the Templars.<sup>1</sup> However, when the Hospitaller Rule is compared with the other two rules it has been found that it does not show any influences which may have infiltrated into it from them. Instead it may be concluded that Raymond's Rule was composed to suite an order designed for the serving brothers and their caritative ministry.

Raymond du Puy drew up his rule at a time when the Hospitallers were including a second concept of service in their order. This entailed the use of military brothers alongside the work of the serving brothers in caring for pilgrims and the sick. At the same time, the Cistercians and Templars were also using the Benedictine Rule as a source for their inspiration in developing their rules and yet each of the three orders had fundamentally different objectives.

The Cistercians came to have a powerful influence in the Western Church during the first half of the twelfth century, as was shown when under the influence of St Bernard, the Council of Troyes of 1129 formulated and passed the Templar Rule, basing it upon the Rule of Citeaux. Because Bernard supported what he termed the "new knighthood", it is possible that

the Cistercian Rule also influenced Raymond's Rule. In addition, since the Templar Rule was more detailed than Raymond's in outlining a religious way of life, he may also have incorporated some of its ideas.<sup>2</sup>

The Cistercian and Templar Rules needed to be compared to the Rule of Raymond du Puy, to see whether they may have influenced Raymond's. The main areas in which there may have been symbiosis would have been in treatment offered to the sick, organisation of the order, and religious motivation for ministry.

Conclusions must be qualified, however, by realisation that the Cistercian intent was to deepen religious commitment, and the Templars were dedicated to protecting pilgrims, while the Hospitallers' fundamental ministry was caritative. In comparing the three rules it is also necessary to keep in mind dates of composition in order to use only material which is chronologically relevant. Raymond's Rule was in use by 1153 so only those parts of the Cistercian and Templar Rules dated to before that date are of use.

The Cistercians expanded rapidly after Pascal II took the religious at Citeaux under his immediate protection in the bull *Desiderium quod* of 1100. By the middle of the twelfth century the order had "spread like a tidal wave through Europe".<sup>3</sup> In 1126 Cistercian monks began to become bishops and by 1160 there had been more than 50 bishops, ten cardinals and one Pope chosen from the Order.<sup>4</sup> Cistercian influence also spread with abbots giving

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<sup>1</sup> Riley-Smith, *Knights*, p. 49.

<sup>2</sup> Riley-Smith, *Knights*, pp. 41, 49, 51, 260, 287, 377.

<sup>3</sup> Williams, *Cistercians in the Early Middle Ages*, pp. 1-3, 25.

<sup>4</sup> Newman, *Charity*, Appendix, Cistercian Prelates 1126-1180, pp. 248-251.

counsel to kings, popes and bishops, as well as preaching crusades and exposing heretics.

The Cistercians emphasized enrolling knights in the Order and converting secular knights into spiritual warriors was part of their policy.<sup>5</sup> This allowed them to move in noble circles and their activities outside their monasteries, mediating between various parties in dispute as well as encouraging reform. At Rheims, Innocent II asked Stephen Harding to mediate in the dispute between two Burgundian monasteries of Saint Stephen and Saint Seine.<sup>6</sup>

Bernard and the Cistercians maintained close contact with many influential bishops and archbishops,<sup>7</sup> and additionally the Cistercian network of monasteries and associates developed connections with many ecclesiastical officials or high-ranking nobles. Bernard had close relations with Innocent II and in 1136 travelled to Rome to encourage noble Roman families and Roger of Sicily to leave the false pope Anacletus.<sup>8</sup> His powerful intellectual leadership meant that his influence was passed on by his monks and companions.<sup>9</sup>

Although *caritas*, or caring love, was the essential tenet of the Cistercians, it was only applied to life within their monasteries and to their high social supporters. They had little interest in practical caritative love for pilgrims and the sick.<sup>10</sup> The Cistercians higher social position, by comparison to the Hospitallers, meant that each of their influences was confined to very

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<sup>5</sup> William of St Thierry, *Sancti Bernardi vita prima*, 1. 9. 55 (p. 257).

<sup>6</sup> Innocent II, *Epistolae et privilegia*, p. 112.

<sup>7</sup> Upton-Ward, *Rule*, The Primitive Rule, pp. 20-1.

<sup>8</sup> Arnold of Bonneval, *Liber Secundus* 2. 7. 45, PL, vol. 185, pp. 294-5.

<sup>9</sup> Le Clercq, *St Bernard*, vol. 1, pp. 3-27, 193-213.

<sup>10</sup> Newman, *Charity*, p. 119.

different strata of medieval society. This was especially the case when Raymond du Puy was composing his Rule and the Hospitallers' main concern was with pilgrims and the sick.

Examination of the Cistercian materials shows that they are "complex and layered" and dating their development is far from certain, which makes comparison to Raymond's Rule difficult.<sup>11</sup> However, their approximate dating does place them within the years of Raymond's Magistracy. The primitive bases of both the *Exordium parvum* and the *Carta caritatis* were written between 1116 and 1119. The statutes in the *Summa cartae caritatis*, contained decisions of the Chapter General composed before 1124 and most of the first documents of the Order were established by the customary of ca 1147.<sup>12</sup>

Each of the *Exordium Cistercii*, *Summa cartae caritatis* and the *Capitula* were written and diffused early in the abbacy of Raynaud de Bar 1133/1134 to 1150.<sup>13</sup> The *Exordium parvum* was completed by 1151, with the primitive section written around 1113.<sup>14</sup> The *Carta caritatis prior* was also composed soon after 1133/1134, while the *Confirmatio cartae caritatis*, was given by Callixtus II on 23 Dec. 1119.<sup>15</sup>

The *Instituta generalis capituli apud Cistercium* has suffered editorial intervention. The earlier manuscript was incorporated into the customary towards 1147 (Statutes I to LXXXVII).<sup>16</sup> However the later statutes were added after 1152 and would have been too late to influence Raymond's Rule.

<sup>11</sup> Newman, *Charity*, p. 15.

<sup>12</sup> Newman, *Charity*, p. 15, also p. 257, n. 1.

<sup>13</sup> Waddell, *Early Citeaux*, p. 161,

<sup>14</sup> Waddell, *Early Citeaux*, p. 227.

<sup>15</sup> Waddell, *Early Citeaux*, pp. 267, 283.

<sup>16</sup> Waddell, *Early Citeaux*, p. 453.

This also applies to the *Carta caritatis posterior*, which was confirmed by Eugenius III on 1 Aug. 1152.<sup>17</sup> All this means that comparisons between the Hospitallers and the Cistercians must be based upon the founding papal bulls of the Hospital and the Rule of Raymond du Puy, and the three early compositions of the Cistercians.

The first comparison to be considered concerns possession of houses connected to each Order.<sup>18</sup> The first two daughter houses connected to Citeaux were La Ferté in May 1113 and Pontigny in the next year.<sup>19</sup> These were to be associated with Citeaux so that its monks could care for the spiritual lives of their associated brothers, but there were to be no requests by Citeaux for any gifts of money. However, the Hospitallers had acquired associated properties before they were mentioned in *Pie postulatio voluntatis*,<sup>20</sup> which means that they had properties other than in Jerusalem before the Cistercians had daughter houses.

Cistercian properties were connected to the mother house on a spiritual basis only, whereas Hospitaller properties were directly subject to its Master and were required to hand their accounts directly to him.<sup>21</sup> As referred to above the Hospitallers were severe when money was misused especially if used for rebellion.<sup>22</sup> Another rule was applied to the brethren of all the Hospital's obediences, when directed to wear the sign of the cross on their cassocks.<sup>23</sup> Each of these requirements was different from the basic concept

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<sup>17</sup> Waddell, *Early Citeaux*, p. 498.

<sup>18</sup> Riley-Smith, *Knights*, p. 49.

<sup>19</sup> Williams, *Cistercians in the early Middle Ages*, p. 3.

<sup>20</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>21</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 6.

<sup>22</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 16.

<sup>23</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 19.

expressed in the *Carta caritatis*. These examples indicate a different principle existed between the Cistercian's daughter houses and properties associated with the Hospital, both in the Holy Land and in the West.

A further way in which the Cistercians might have influenced the Hospital Rule concerned the organisation of authority. Riley-Smith suggested that Raymond copied the example of the Cistercians when he included in his Rule the holding of Chapters.<sup>24</sup> The Cistercians introduced in the 1130s a General or Universal Chapter, which was an annual meeting of Cistercian abbots. In chapter four the *Carta* demanded that the abbot of Citeaux was to be given precedence over other abbots when visiting all daughter monasteries. He, or his assistant, was to visit the other houses annually as decreed in chapter five, and a General Chapter of all abbots was to be held each year. Attendance at the General Chapter was decreed in chapter seven to be compulsory, when all important business was to be discussed.<sup>25</sup>

The Hospitaller Chapter was quite different to the Cistercian General Chapter even though both were based upon the Benedictine Rule and they accepted the basic concept of the abbot meeting with the brothers when necessary. In chapter three, the Benedictine Rule directed that in weighty matters the abbot was to call the whole community together.<sup>26</sup> In minor matters the abbot could confer with the seniors only. The concept of an abbot and brethren meeting to discuss the important business of the monastery may by later terminology be called a meeting of the abbot and chapter. By comparison, the opening paragraph of Raymond's Rule states that the

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<sup>24</sup> Riley-Smith, *Knights*, pp. 49, 51.

<sup>25</sup> Waddell, *Early Citeaux*, chs 4, 5, 7 (pp. 445-6).

<sup>26</sup> McCann, *St Benedict*, ch. 3.

Warden “with all the Chapter both clerical and lay brethren” met to establish the Rule.<sup>27</sup> This infers that the Chapter was comprised of priests and the professed brethren. No servants or paid workers were mentioned. No mention was made of any Hospitaller brethren from houses or obediences other than the Jerusalem Hospital being present.

In the Rule of Raymond du Puy nothing like the Cistercian gatherings of subject abbots was envisaged. Raymond’s Rule applied to the house in Jerusalem and to all other houses and obediences. In Raymond’s Rule the word chapter stood for the Warden, priests and professed brethren coming together in an important assembly. In line with Benedictine practice, Raymond used “chapter” in his Rule to mean a meeting of the ruling body of the brothers and Warden.<sup>28</sup>

The term “Chapter General” first appeared in the Statutes of Jobert of 1172-7, and of Roger de Moulins of 1182, where it was mentioned that the *capitulum generale* or Chapter General met together with the Master.<sup>29</sup> As the word *generale* could be translated as universal, it may mean that the Chapter included a wider membership by that time. In fact three types of Chapter were used by the Hospitallers. In general the word described an assembly of brothers who lived permanently in one place, were obedient to one superior, and met together every Sunday. A court of appeal for the brothers could also be called a Chapter.<sup>30</sup> The word convent was used to describe any house of permanent brothers but was always used of the seat of government, whether

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<sup>27</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, Introduction.

<sup>28</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, Introduction and chs. 7, 10, 12, 13, 16, 17, 19.

<sup>29</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 494, 627.

<sup>30</sup> Riley-Smith, *Knights*, p. 286.



in Jerusalem, or later in Acre and Limassol, and meant the Hospitallers who lived in each place.<sup>31</sup>

In the East a provincial Chapter was held annually in the thirteenth century and was attended by all Syrian castellans (wardens of castles) and commanders.<sup>32</sup> The Chapter General, however, met only irregularly and was attended by the Master, the convent, brothers-at-arms serving in Syria, and bailiffs from Europe. The Chapter General or General Chapter of 1206 set the standard for the Order's organisation and this was maintained until the end of the thirteenth century.<sup>33</sup> It is important to add that the brothers of the convent in the East took part in all conventual, provincial and General Chapters but only Cistercian abbots attended their General Chapter.<sup>34</sup>

Comparison of the Cistercian and Hospitaller uses of the word chapter shows that each order adapted the Benedictine concept rule of an abbot meeting with his brothers to discuss important business. From this practice the Cistercians organised their General Chapters, whereas the Hospitaller Chapter gradually developed over approximately one hundred and fifty years, from a simple meeting to organize the Hospital into a more highly organized arrangement. However, the chapters of each Order evolved through their own different needs into workable organisations to suit themselves. The Cistercians had no influence on Raymond du Puy's Rule in this matter.

A third area where it might be claimed that the Cistercians may have influenced Raymond's Rule concerned gifts, tithes and finance. When the Cistercians formulated their *Carta caitatis* they expressed the aim of observing

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<sup>31</sup> Riley-Smith, *Knights*, p. 279.

<sup>32</sup> Riley-Smith, *Knights*, p. 286.

<sup>33</sup> Riley-Smith, *Knights*, pp. 286-8.

<sup>34</sup> Riley-Smith, *Knights*, p. 285.

strictly the Benedictine Rule, and to them the use of the word *caritas* meant that they were to concentrate on working together, and being knit together in mind. This ideal denied Citeaux the possibility of levying financial or other exactions on its daughter houses so as to concentrate on fulfilling the purpose of helping souls “in matters human and divine”.<sup>35</sup>

The basic ideas which underlay the Cistercian *Carta caritatis*, were very different to those of *Pie postulatio voluntatis* with regard to the organization of the Hospital. Each of the eleven chapters of the *Carta* dealt with an aspect of the work and responsibilities of the various abbots.<sup>36</sup> In chapter one of the *Carta* it emphasised that the house of Citeaux did not demand any exaction of earthly advantage of temporal goods from other abbots or brethren, who had been established by itself.<sup>37</sup>

Even before the composition of Raymond’s Rule, Paschal had granted the Hospital permission to receive and hold all things previously acquired as well as gifts and tithes. This included anything which may have been situated in other dioceses apart from Jerusalem.<sup>38</sup>

The Cistercians, on the other hand, made a great deal of not receiving tithes. Chapter fifteen of the *Exordium parvum* outlined their reasons for rejecting tithes. It was claimed that there were four types of tithes ordained by the holy fathers. One was for the bishop. A second was for the priest and a third for guests, widows and the poor. The fourth type of tithe was for the repair of the church.<sup>39</sup> Because they could find no reference to tithes being

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<sup>35</sup> Lekai, *White monks*, p. 267; Waddell, *Early Citeaux*, pp. 442-3.

<sup>36</sup> Waddell, *Early Citeaux*, pp. 442-52.

<sup>37</sup> Waddell, *Early Citeaux*, pp. 443.

<sup>38</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>39</sup> Waddell, *Early Citeaux*, *Exordium parvum*, ch. 15, pp. 435, 435, § 2.

given to monks, who lived by working their own lands, they declined to accept tithes, regarding acceptance of them as an unjust usurpation of the needs of others.

So strict were they, on not accepting anything from others, that this was repeated in chapter twenty three of the *Summa carta caritatis* even more clearly. The Cistercians would not accept any returns or gifts from churches, altars, graves, tithes from work or food of another, rural domains, serfs, land rents, ovens or mills.<sup>40</sup>

St Bernard emphasised all this in a letter to the Benedictine monastery of Marmoutier, in which he argued that: “monks should not take the wine from vines they did not plant or milk from flocks they did not tend”. The Benedictines of Marmoutier on the other hand, believed that since they cared for the laity in the parish they ought to be able to collect the tithes. In response Bernard said that a monk’s role was to sit in church and be silent. He contended that it was not monks’ work to carry out the duties of clergy, and therefore they should not collect tithes. Monks should live from their own labour and not usurp the *pastoralia* of the priests with its rewards and income.<sup>41</sup> Because of their emphasis on not receiving gifts or tithes, the Cistercians obviously did not influence Raymond’s Rule.

A fourth area in which the Cistercians might have influenced the Hospitallers was the names given to central officers.<sup>42</sup> The Hospitaller Rule used monastic titles such as; *clericus* (clergyman), *prior* (prior), *magister* (master), *capitulum* (chapter) and *frater* (brother).<sup>43</sup> However, the Hospital did

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<sup>40</sup> Waddell, *Early Citeaux*, *Summa carta caritatis*, Capitula, ch. 23, pp. 412- 3.

<sup>41</sup> Le Clercq, *St Bernard*, Letter 397 (vol. 8, pp. 374 -5).

<sup>42</sup> Riley-Smith, *Knights*, p. 51.

<sup>43</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, chs. 1, 2, 3, 4, 17.

not use other designations such as *decanus* (dean), *abbas* (abbot), *noviter* (novice), *monacho* (monk) and *cellarius* (cellarer) because its responsibilities had no use for them. The Cistercians, however, used them as part of the Benedictine Rule.

Examination of positions mentioned in the Hospitaller Rule shows that the only ones which appear in any way unusual were *procurator*, *custos* and *magister*,<sup>44</sup> and none of these are found in the founding documents of the Cistercians. The word *procurator* may be translated as an appointed officer and holds no special cognisance with the Cistercians nor does *magister* meaning master.<sup>45</sup> A *custos* was a word descriptive of a warden or guardian.<sup>46</sup>

The only technical designation common to both the Cistercians and Raymond's Rule was *capitulum* or chapter, and it seems too much to claim that because of the coincidence of one word the Cistercians had an influence on Raymond du Puy. The word was derived from *capita*, which meant putting their heads together, from *caput* for head, and was a chapter heading in Benedict's Rule.<sup>47</sup> *Capitulum* became a diminutive of *caput*, and meant in monastic language a meeting of the heads or monks, although it was not actually used by Benedict. It became a word which implied the monks' way of life and was known and used long before the Cistercian and Hospitaller Rules.<sup>48</sup>

Because there is only one word which may be used to connect the Cistercians with Raymond's Rule and which had a wider use in monasteries,

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<sup>44</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, chs. 10, 12.

<sup>45</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 10.

<sup>46</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

<sup>47</sup> McCann, *St Benedict*, pp. 14 -163.

as well as the lack of evidence of any positional names taken from the Cistercian documents, it is evident that the Cistercians did not exert an influence over Raymond du Puy and the composition of his Rule in these matters.

Riley-Smith has suggested that the Cistercians influenced the way the Hospitallers organised their subject houses with lay brothers.<sup>49</sup> As the Hospitallers did not use lay brothers, in the sense of being a lowly brand of assistant *conversi*, comparison between the use of lay brothers as held by the Cistercians and the function of the Hospital, reveals no likeness between the two organisations. The essential difference between the two was that the Cistercian *conversi* were not considered monks whereas the Hospitallers were addressed as *fratres professi*, professed brethren and *religiosi persone*, religious persons, by the Pope and they made no difference between the *conversi* and other brothers.<sup>50</sup>

Chapter fifteen of the *Exordium parvum* referred to the Cistercians having *conversi laici barbati*, bearded lay brothers.<sup>51</sup> These were to be in charge of, and to run the farms and the physical interests of a monastery in order to allow the monks to concentrate on the *Opus Dei* and their prayers. The full responsibilities of *conversi* were detailed in chapter twenty of the *Summa cartae caritatis* and their period of probation was given in the next chapter.<sup>52</sup>

An impassable wall separated the Cistercian monks from their lay brothers, who were not considered monks and their position was inferior to

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<sup>48</sup> Cross, *Christian church*, p. 264.

<sup>49</sup> Riley-Smith, *Knights*, p. 49.

<sup>50</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30.

<sup>51</sup> Waddell, *Early Citeaux*, *Exordium Parvum*, pp. 132,435.

the Cistercians.<sup>53</sup> This was despite the fact that an early Cistercian statute described lay brothers as being family members and helpers under the care of the monastery, just as monks. Lay brothers shared in the spiritual and temporal blessings of the monastery as servants though they could never become monks.<sup>54</sup>

In some devotions, Cistercian lay brothers were treated as part of the monastery, but there was a clear distinction between the monks and novices on one side, and the lay brethren on the other. When the various positions held by the monks in the monastery were described, lay brethren were totally ignored in the list of those making up monastery life. Membership was divided into contemplatives, actives and leaders and the list of actives did not include lay brothers.<sup>55</sup>

Compared to the Cistercian use of lay brothers, the Hospitallers did not use lay brothers either in the West or on the Holy Land properties which were mainly in two groups. There were those which had been given to the Hospital and those which were held as fiefs. In both situations the tenants worked the land and paid rents. Even properties designated to send white bread to the Hospital for the patients did not acknowledge the use of lay brothers.

It is clear that the position of lay brothers and their particular way of service as used by the Cistercians had no influence on Raymond's Rule or in the organisation of the Hospitallers, in Jerusalem, the Holy Land, or Europe. It could also be added that the first Cistercian monastery in Palestine was not

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<sup>52</sup> Waddell, *Early Citeaux*, Summa cartae caritatis, Capitula, ch. 21 (p. 412).

<sup>53</sup> Newman, *Charity*, p. 101.

<sup>54</sup> De la Croix, *Anciens textes*, pp. 92-93; Waddell, *Early Citeaux*, Summa cartae caritatis, Capitula, chs 20, 21, 22 (pp. 411-12).

<sup>55</sup> Geoffrey of Auxerre, *Expositio*, vol. 2 (pp. 337-8); Gilbert of Hoyland, 'Semones in canticum', 43. 5, 45. 6 (pp. 228, 240).

founded in Tripoli until 1157 and, as far as is known, the Cistercians founded only three monasteries in Palestine,<sup>56</sup> all these after the composition of Raymond's Rule. This was too late a time to have any close influence on the Hospitallers, although the Hospitallers would have known of the Cistercians through their European connections.

The close proximity of the Templars to the Hospital in Jerusalem, as well as the length and detail of their Rule, suggests that the Templar Rule may have had some input into the Rule of Raymond du Puy. The Templars were given quarters by Baldwin II in a section of his royal palace near the site of the Al-Aqsa Mosque. They took their initial vows before the Patriarch of Jerusalem in 1119-20 and were connected with the Augustinian canons of the Holy Sepulchre.<sup>57</sup>

Any similarities between the Hospitaller and Templar Rules were more likely to occur where both owed a debt to the Benedictine Rule.<sup>58</sup> However, although from the same source, ideas found their way into each by different paths. The Templars were first influenced by the Augustinians and later by Bernard and the Cistercians. There was no reason for the Hospital to follow that pattern since it was so closely linked to St Mary of the Latins. The two rules shared common ground on such monastic concepts as morality, tithes, travelling, silence, clothing, behaviour, deceased brethren, the old and sick, and monks' profession.<sup>59</sup> The Templars differed from the Hospitallers with regard to religious practice, the acceptance of married men, having no sisters,

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<sup>56</sup> Hamilton, *Latin church*, p. 102.

<sup>57</sup> William of Tyre, *Chronicon*, 12, 7. 1-5 (vol. 63, p. 553).

<sup>58</sup> Upton-Ward, *Rule of the Templars*, p. 12, n. 51; Schnurer, *Templeregel*, p. 57, n. 3.

<sup>59</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no.30 and no. 70, chs 1, 4, 8, 11, 12, 14, 16.

Upton-Ward, *Rule of the Templars*, 'Primitive Rule', chs 1, 17, 23, 37, 39, 45, 58, 61, 62.

knights, no children as novices, organisation and fighting. The Templar Rule also included more descriptive details for dress, organisation, discipline and religion.<sup>60</sup>

The circumstances of composition of both rules were very different. The Primitive Templar Rule, comprising 76 chapters, compared to the 19 of the Hospital,<sup>61</sup> was written at Troyes in 1129.<sup>62</sup> Hugues de Payens, with the support of St Bernard, had promoted the acceptance of the Rule and, according to Upton-Ward, took with him to Troyes the early traditions of the Templars including their primitive customs.<sup>63</sup> By comparison, Raymond du Puy had no leading churchman to give advice and no Church Council to authenticate his Rule. The practical and simple nature of Raymond's Rule suggests that the Hospitaller's regulations were designed to facilitate the smooth running of a hospice alongside a monastery.

The entire Templar Rule was composed over a period of 150 years and those sections which may be compared to the Rule of Raymond du Puy are, the "Primitive Rule" (1129) and the "Hierarchical Statutes", "Penances" and "Conventual Life" (prior to 1165). Other sections were composed too late to have had any influence. The "Primitive Rule" dealt mainly with the origins, practices and discipline of the Order. As well it contained the previous customs of the General Chapter prior to 1129.<sup>64</sup> The "Hierarchical Statutes" included the authority structures of the Order and details of its organisation and was dated around 1165. Close attention was given to the conventual,

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<sup>60</sup> Upton-Ward, *Rule of the Templars*, 'Primitive Rule', chs 2, 15, 18, 48.

<sup>61</sup> Upton-Ward, *Rule of the Templars*, 'Primitive Rule', chs 1-76 (pp. 19-38); Delaville, *Cartulaire*, vol. 1, no. 70, chs 1-19.

<sup>62</sup> Upton-Ward, *Rule of the Templars*, p. 4.

<sup>63</sup> Upton-Ward, *Rule of the Templars*, 'Primitive Rule', ch. 7.

<sup>64</sup> Upton-Ward, *Rule of the Templars*, p. 11.



military, and religious life of the brothers, as well as to their clothing and equipment. The duties and positions of various officers and brothers were also outlined.<sup>65</sup>

The “Penance” addressed the penances, or punishments dealt out by the Order, but some sections were added much later than 1165 in the thirteenth century.<sup>66</sup> The “Conventual Life” described details of the daily life of the brother knights. It discussed their meals, rising and retiring, as well as discipline, relations with each other, religion, fasts, and campaign order. The Templars were similar to the Hospitallers and followed the Benedictine Rule in keeping the canonical hours.<sup>67</sup> “Holding Ordinary Chapters” described the manner of conducting ordinary chapters and mainly dealt with situations of disobedience to the Rule with subsequent rebukes and punishments.<sup>68</sup> “Reception into the Order” did not seem to be closely connected with the earlier sections and insisted that any man who entered the Order as a brother knight must be the legitimate son of a knight and his father was required to be of knightly descent.<sup>69</sup>

Riley-Smith has suggested that the most likely point of contact between the two rules was in connection with the acceptance and use of priests.<sup>70</sup> The Templars were permitted their own priests by *Omne datum optimum*, given by Pope Innocent II in 1139, while the Hospitallers received permission to have their own priests in 1154, 15 years later. However, since confession, absolution, and Holy Communion were associated with the ministry to the

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<sup>65</sup> Upton-Ward, *Rule of the Templars*, p. 13.

<sup>66</sup> Upton-Ward, *Rule of the Templars*, pp. 4, 16.

<sup>67</sup> Upton-Ward, *Rule of the Templars*, p. 14.

<sup>68</sup> Upton-Ward, *Rule of the Templars*, p. 15.

<sup>69</sup> Upton-Ward, *Rule of the Templars*, p. 171.

<sup>70</sup> Riley-Smith, *Knights*, p. 377.

sick, the Hospital would have needed priests and clerics long before 1139,<sup>71</sup> as is confirmed by references to them in prior Hospitaller correspondence.<sup>72</sup>

The Rule of Raymond du Puy had four references to priests. Chapter three referred to priests being assisted in Mass by clerics and visiting the sick. Chapter nine referred to Sunday Mass, presupposing a priest, and chapter 14 to priests performing Masses for deceased brothers. According to chapter 16, upon being admitted to the Hospital the sick were expected to confess their sins to a priest for absolution and then receive Holy Communion. Each of these chapters mentioned only priests' sacerdotal functions.<sup>73</sup>

The Templar Rule was much more detailed about the position and privileges of priests and the handling of recalcitrant ones. The "Primitive Rule" mentioned priests in chapters 62 and 64. Chapter 62 referred to priests conducting masses for dead brothers while chapter 64 concerned priests in the brotherhood for only a fixed time. Priests and clerics were to be given only food and clothing or anything else specifically allowed by the Master allowed.<sup>74</sup>

According to "Penance", chapters 268-273, priests sang Masses for dead brothers and sat at table next to the Master. They were to hear the confessions of the brothers but were not to absolve certain sins. If a chaplain brother sinned or behaved in a wicked manner certain punitive steps were to be taken.<sup>75</sup> Chapter 363 of the "Conventional Life" mentioned only vaguely the conduct of brothers in chapel.<sup>76</sup> Chapter 15 of the "Primitive Rule", which

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<sup>71</sup> McCann, *St Benedict*, chs 60, 62 ( pp. 136-7, 140-1).

<sup>72</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 19, 22, 130, 140, 165, 192, 202, 220.

<sup>73</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 16.

<sup>74</sup> Upton-Ward, *Rule of the Templars*, p. 34.

<sup>75</sup> Upton-Ward, *Rule of the Templars*, p. 79-80.

<sup>76</sup> Upton-Ward, *Rule of the Templars*, p. 100.

according to Upton-Ward, was part of the section of prior traditions included within the Rule, addressed divine service, presumably conducted by a priest or cleric.<sup>77</sup> Another chapter which was part of the prior traditions was Chapter 62, which concerned Masses to be said for the brothers<sup>78</sup>.

Both the Templars and the Hospitallers must have needed priests before they were given permission to include them within their order, since both Orders had to administer the sacraments to their brothers. But the Hospital would have needed them before the Templars since the Hospital had been serving the sick for at least fifty years before the foundation of the Templars.

Of the various chapters which referred to priests in both rules, the only one which was similar in each was that dealing with deceased brothers. However there was not a close agreement between them. The Rule of Raymond du Puy required 30 Masses by priests for a deceased brother, while the Templar Rule required only one. This shows that the Templars did not follow the Benedictine tradition of Trental as did the Hospitallers and that this change may have been from the influence of the Augustinians.

In any Templar house where the deceased's body lay, each priest and brother was to say one hundred paternosters for seven days. When a brother died in a house other than his own, all the brothers from his own house were required to recite one hundred paternosters when they knew of his death. A pauper was to be fed meat and wine for forty days in memory of the deceased

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<sup>77</sup> Upton-Ward, *Rule of the Templars*, p. 23.

<sup>78</sup> Upton-Ward, *Rule of the Templars*, p. 34.

brother and all other usual gifts were to be refused.<sup>79</sup> None of these provisions are to be found in the Rule of Raymond du Puy.

As would be expected, since the two Orders had different functions, and the Rule of Raymond du Puy did not mention anything about military brothers, there is little similarity between the Chapters in each rule, which deal with brothers away, or visiting other houses. The only mention of Hospitallers travelling outside the Hospital concerned the treatment of wounded knights, the collection of alms, and preaching.

By contrast the Rule of the Templars stipulated, that a brother who was overseas or in another country was to act in a morally correct manner, in order to bring honour to his Order.<sup>80</sup> This directive was similar to both the Benedictine and Augustinian Rules. He was to be well behaved when eating meat or drinking wine. Brothers were to leave a light burning outside an inn where they lodged to ensure that their enemies could not work wickedness against them.

It is clear that there were only two vague similarities between these two chapters. The first was regarding outside visiting and the second about leaving a light outside a lodging. Since the Hospitallers were performing their functions long before the Templars, it would suggest that Raymond's Rule described an existing practice and that the Templars might have emulated it.

Could the Templars have influenced Raymond's Rule in the use of crosses on their cloaks? Raymond's Rule explained that this symbol was

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<sup>79</sup> Upton-Ward, *Rule of the Templars*, p. 34.

<sup>80</sup> Upton-Ward, *Rule of the Templars*, ch. 37, p. 28.

partly to honour God and also to protect the wearer both in body and soul in this world and the next.<sup>81</sup>

The Templar Rule referred only briefly to the surcoats of sergeant brothers being black with a red cross on the front and back.<sup>82</sup> It did not mention crosses being emblazoned on the garments of knights and William of Tyre reported that only during the papacy of Eugenius III, 1145-1153, were Templar knights given permission to wear crosses on their mantles. Disciplinary measures also mentioned the use of the cross.<sup>83</sup> However, since the chapter of the Templar Rule in question has been dated as prior to 1165 and the Rule of Raymond du Puy dated to before 1153 no conclusion may be reached either way.

In those cases where the Templar Rule may have most probably influenced that of Raymond du Puy, it is virtually impossible to establish this clearly, or, indeed, that Raymond's Rule influenced the Templar Rule. Both developed within the concepts and practices of the Benedictine Rule, mitigated by the Cistercians in the case of the Templars, and grew out of the same culture. Likenesses between the two may be attributed to this fact. Since the Hospitaller Rule did not outline in detail a caritative ministry to the poor, it suggests that the Hospital was following the various behavioural patterns of the Benedictines.

Consideration of the Cistercian and Templar Rules and their possible influence on the Rule of Raymond du Puy shows that they were composed for different reasons and had no influence on the Hospitallers. In the basic areas

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<sup>81</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 19.

<sup>82</sup> Upton-Ward, *Rule of the Templars*, p. 54.

<sup>83</sup> Upton-Ward, *Rule of the Templars*, chs 141, 469, 470, 489, 654.

of organisation, the treating of pilgrims and the sick, and in religious motivation, the work and ministry of the serving brothers of the Hospitallers was not influenced by either rule. Raymond's Rule was unique in that it was designed especially for serving brothers. Its basic premise was based upon the spiritual concept of Benedictine good works.

## Chapter 7

### The Changing Course 1120-1160

In the second half of the twelfth century, just one hundred years after its founding, the Order faced its most serious challenge to its stability. Because of its Master and the knights who took part in a failed attempt to invade Egypt and the expense of the endeavour, it became engulfed in a financial crisis and had to take drastic action to stabilise its position.<sup>1</sup> This serious situation was symbolical of the developments taking place in the Order and heralded the turning point in the role, tasks and place of the serving brothers in the future.

The Order lost its original exclusive function of service to the poor and sick between 1120 and 1187 because it incorporated a powerful military force which grew into an important element in the defence of the Crusader states. Although it persisted with its social and medical care, the military brothers became increasingly important. This not only added to the responsibilities of the Hospital but also impacted on the contribution of the serving brothers, who continued to maintain the work of alleviating human suffering.

To comprehend the pressures the serving brothers experienced as a result, the introduction and growth of influence of the military brothers, must be outlined. The aim is to ascertain why and how knights were first admitted into the Order, why they were accepted readily, and what changes affected the serving brothers. In fact the Order was to be transmogrified into one in which the serving brothers were to take second place.

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<sup>1</sup> Riley-Smith, *Knights*, p. 73. Delaville le Roulx, *Cartulaire*, vol. 1, no. 391.

Because the Hospital had become well endowed and independent, it was able to contribute to the defence of the Holy Land. However, although the move became obvious, it is difficult to trace its progress. The first written acknowledgment of military involvement in Hospitaller documents did not appear until the Statutes of Roger des Moulins of 14 March 1182. These referred to *fratres* or armoured brothers of the Hospital among a list of “the special charities decreed in the Hospital”.<sup>2</sup>

Only after the loss of Jerusalem and the move of the Order to Margat, and then to Acre, did the military brothers take on the clear role of knights in the Order’s records. At Margat in 1206 the Master, Alfonso of Portugal, and the brothers formulated Statutes which stipulated that each *frater miles* was to be given four horses.<sup>3</sup> Thereafter the military brothers assumed a strong leadership role within the Order.

The *milites* of the Order were armed, mounted, and accompanied by servants or esquires, suggesting that the term knights may be applied to them. However the title *milites* had been used previously, so even in the twelfth century, before they were documented at Margat, the military brothers of the Order were knights in the Western sense of the term.

Opinions have varied as to why and when this change occurred. The most thorough attempt has been made by Forey, he endeavours to answer questions such as when, why and to what extent did the Order include knights prior to 1160, and to what degree was it committed to the knights thereafter. His work is important in understanding the difficulties faced by the serving

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<sup>2</sup> Statutes of Roger des Moulin 1182, §10, Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>3</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §17.



brothers continuing to perform their essential caritative work as the change occurred.

Forey searched for mention of knights in the Order during the early years and found little information. He studied gifts to the Order, Papal documents, and Hospitaller materials, all of which failed to produce conclusive evidence for the use of knights before 1160.<sup>4</sup> He also examined later references to the arrangements for military activity contained in gifts and agreements, also arrangements discussed by Riley-Smith.<sup>5</sup>

Why was military involvement by the Hospitallers not mentioned in the documents of the Order until much later? Was it because it was in the Order's interests to avoid open mention of it? Because it had been created for caritative care, those who supported the Order for this reason may not have approved of the inclusion of knights. The financial and other gifts which were responsible for the Order's early growth had been given because of its caritative work. Was it feared that a movement away from this might lack support in the future.

Riley-Smith has suggests that a letter from Raymond du Puy, written to Church leaders in the West, between, 1119-1124, which used the word *militia* implied that the Hospitallers were already fighting in the Holy Land.<sup>6</sup> He adds, however, that Raymond may have used the word figuratively in the way that Benedict referred to monks as soldiers of Christ. Later he states that Raymond's "equation of the *servus pauperum* with *miles Christi*" may well have changed their character and prepared for the introduction of military

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<sup>4</sup> Forey, "Militarisation", pp. 75-80.

<sup>5</sup> Forey, "Militarisation", pp. 81-2. Riley-Smith, *Knights*, pp. 66-8.

<sup>6</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 46.

brothers.<sup>7</sup> Raymond intended the Order to become part of the general defence of the Holy Land quite early in his magistracy.

However, this letter was written to thank God and prelates of the Church for alms sent to the Hospitallers. In the salutation, Raymond included all clergy and holy or dedicated people who were serving Christ's poor together with him. He continued with thankful words for the mercy to the Hospital which assisted the *fratres karissimi* in caring for Christ's poor. Raymond used the word *militia* twice but clearly to refer to those serving Christ's poor in Jerusalem and not to any military brothers. The fact that he sent to his readers gratitude from *omni clero et sancto populo* makes this perfectly plain. He used *militia* for the work of the serving brothers in the Hospital.

In fact the first definite sign of the Hospitallers accepting some kind of military role came in 1128 when they took over the village and tower of Calansue originally constructed by Geoffrey de Flugeac.<sup>8</sup> Then in 1136 King Fulk handed to them the castle of Bethgibelin.<sup>9</sup> This was one of three castles around Ascalon, which was still in Moslem hands, and was of crucial military importance to the kingdom's security.<sup>10</sup>

Fulk realised that Ascalon would be a strategic base from which to attack Egypt and also that it had to be contained for the security of the

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<sup>7</sup> Riley-Smith, *Knights*, pp. 53, 58; McCann, *St Benedict*, pp. 6, 7.

<sup>8</sup> Kennedy, *Crusader Castles*, p. 58; Pringle, *Red Tower*, p. 56; Trimble, *Monarchy and Lordship*, p. 67.

<sup>9</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 116.

<sup>10</sup> Forey, "Militarisation", p. 82; William of Tyre, *Chronicon*, 14. 22. 44-50 (vol. 63A, p. 661).

kingdom. The Muslims were becoming bolder and more aggressive and were overrunning the whole area without restraint.<sup>11</sup>

The Hospitallers taking over Bethgibelin indicates that they had reached a reasonable state of preparedness for military action by 1136. Their doing so elicited the admiration of William of Tyre, who reported that they were diligent in their charge and that the attacks of the enemy became less frequent.<sup>12</sup>

James of Vitry believed that the Hospitallers assumed a military role because of the example of the Templars,<sup>13</sup> and Forey also suggests that this lay behind the introduction of military brothers.<sup>14</sup> The protection of pilgrims would have hung heavily on the conscience of the Hospitallers because they would have seen the need long before the foundation of the Templars.

It would have been more “caritative” to protect western travellers, than to wait until they needed attention for their physical or medical needs. This would have been foremost in the minds of knightly patients nursed back to health in the Hospital.

The Templars took some time to become well established.<sup>15</sup> According to William of Tyre,<sup>16</sup> between 1118 and the Council of Troyes in 1129, their number had grown to nine. They did not emerge as a well organised force until the second half of the 1130s when Robert de Craon (1136-1149), became

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<sup>11</sup> William of Tyre, *Chronicon*, 14. 22. 1-50 (vol. 63A, pp. 559-661).

<sup>12</sup> William of Tyre, *Chronicon*, 14. 22. 44-50 (vol. 63A, p. 661).

<sup>13</sup> Jacques de Vitry, *Historia orientalis*, p. 1084.

<sup>14</sup> Forey, “Militarisation”, p. 86.

<sup>15</sup> William of Tyre, *Chronicon*, 12. 7. 1-5 (vol. 63A, p. 553).

<sup>16</sup> William of Tyre, *Chronicon*, 12. 7. 29-31 (vol. 63A, p. 554).

their Master.<sup>17</sup> However it is reasonable to suggest that the Hospitallers were conscious of the build up of the Templars and were challenged by them.

The first reflection of papal knowledge of a Hospitaller military connection may be in a bull of Innocent II to the archbishops, bishops, abbots and priors of the Church in 1130-31, soliciting assistance for them.<sup>18</sup> *Quam amabilis Deo* praised the work of the Hospital and the accommodation it afforded to poor pilgrims. Innocent declared that poor and miserable pilgrims were convalesced by the Hospitallers, who used their own animals to carry the sick to the Hospital. He mentioned that the brothers travelled with servants and horsemen (cavalry) *cum servantibus et equitaturis* to protect them from “pagan” attacks, and went on to appeal for funds for their work, requesting that the bishops inform their parishioners about this need. He also gave permission for clergy to serve the Order for a period of one or two years.<sup>19</sup>

The word *equitaturis* may possibly have referred to mounted warriors since the reference was to protection from “pagan” attacks; however, the bull does not specify clearly that the horsemen were Hospitallers.

Riley-Smith has rejected *Quam amabilis Deo* of 1130-31 as a forgery, although he concedes that it is obvious that the Hospitallers were becoming involved in military duties about that time.<sup>20</sup> He believes that *Quam amabilis Deo* was based upon the bull, *Ea que vobis* of 1183 for the Hospitallers and *Milites Templi Ierosolimitani* of 1144 for the Templars.

However, *Quam amabilis Deo*, although not printed in full in Delaville le

<sup>17</sup> Upton-Ward, *Rule of the Templars*, p. 5.

<sup>18</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 91.

<sup>19</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 91; *Quam amabilis Deo* is printed in PL, vol. 179, pp. 77-8.

<sup>20</sup> Riley-Smith, *Knights*, p. 77.

Roulx, has been included in *Epistolae et Privilegia, Innocentii II Papae*, 1130,<sup>21</sup> and was witnessed by fifteen bishops and cardinals as well as being acknowledged by the Papacy.

In 1139-43, in a second bull of the same name, Innocent II repeated the statement that the Hospitallers carried the sick on their horses, and that some of them gave their mounts to the incapacitated, although this time the accompanying protection of the servants and horsemen was not mentioned. It is unusual for there to be two bulls of the same name and Riley-Smith rejects the first because he sees it as an endeavour of the Hospitallers to show they had military brothers at an earlier date.<sup>22</sup>

The Hospital became interested not only in protecting pilgrims but also in occupying fortresses, to give greater security to Frankish lands. In 1142-4 Raymond II of Tripoli handed over to the Order some castles on his frontiers in order to strengthen his position which was threatened because Zengi had captured the towns of Ba'rin and Rafaniyah in 1137.<sup>23</sup>

In the agreement with Raymond the Hospitallers were required to recapture the towns lost and were treated as combatant troops. With the agreement of his barons and men, Raymond stipulated that the Order would owe no feudal dues on the lands given and they would be entitled to claim half the booty of any military offensive in which Raymond was present. If he was not present, or his constable or marshall was not present on the occasion, the Hospital could keep all the booty. Raymond also agreed that he would not

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<sup>21</sup> *Quam amabilis Deo*, PL, vol. 179, pp. 77-8.

<sup>22</sup> Riley-Smith, *Knights*, p. 77.

<sup>23</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 144.

make a truce or peace treaty with the Muslims, without the agreement of the Hospital.

This charter reflected the new influence and military power of the Order. In accepting the responsibility, the Hospital won the confidence of the count, the local barons, and the Bishop of Tripoli, all of whom shared the cost of purchasing properties, prior to handing them over to the Hospitallers. The charter indicates the Hospitallers had become capable of such undertakings. Also around 1144, the Lord of Marash handed over to the Order, Platta in the far north, together with two leagues of surrounding land, provided that it built a castle within twelve months.<sup>24</sup>

In a letter of 1146 to Louis VII of France composed to encourage participation in the Second Crusade, St Bernard referred to the wonderful example set by the brothers of the Hospital and the Templars. The Hospitallers were described as "*milites Christi*", which in this context may still have referred to the caritative work of the Order. However, because the letter was written to encourage participation in an armed crusade, and because the Hospitallers and the Templars were equated, it may also be read to mean that Bernard knew of the existence of a military wing of the Order.<sup>25</sup>

Among other grants to the Hospital, Maurice the Lord of *Krak de Montreal*, or *Shaubak*, handed over to it in 1152 part of Krak de Moab, south-east of the Dead Sea.<sup>26</sup> This was in an area where the Muslims were active and the Hospitallers were to have a tenth of all the booty and tribute taken from them. In addition, they were given free passage over the Dead Sea and

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<sup>24</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 313.

<sup>25</sup> Le Clercq, "Un document sur saint Bernard", p. 1.

<sup>26</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 207.

were not required to pay taxes on most of the goods they took across. Also in 1152, in a letter to Raymond du Puy, Eugenius III described the brothers as “...fighting in the service of the poor”, “...*in servitio pauperum militantibus*”.<sup>27</sup> This may have reverted back to the idea that monks in service were fighting evil and not men.

Raymond du Puy introduced in his Rule the use of the cross on the brothers’ capes,<sup>28</sup> and since the cross was recognised as the sign of Crusaders, it suggests that Raymond wished to associate the Order with Crusading and protecting pilgrims

In 1157 Humphrey of Toron gave to the Hospitallers half of Banyas and half of Chastel Neuf. Banyas was north of the Sea of Galilee in a strategic position which generated reasonable trade. The condition of the contract was that the Hospitallers would assist in its maintenance and protection.<sup>29</sup>

These various donations made to it indicate that the Order was now becoming active in the defence of Frankish territory.<sup>30</sup>

Due to Raymond du Puy’s leadership, the Order became closely involved in military affairs. He assumed a leadership role when included as a member of a council of war held at Acre in 1148 which decided to attack Damascus,<sup>31</sup> and he was present at the siege of Ascalon. Riley-Smith suggests that Raymond was only part of Baldwin II’s entourage at Ascalon, implying that he was not an influential participant;<sup>32</sup> however, William of Tyre

<sup>27</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 212.

<sup>28</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, § 19.

<sup>29</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 258; Riley-Smith, *Knights*, pp. 57, 72.

<sup>30</sup> Riley-Smith, *Knights*, p. 57.

<sup>31</sup> William of Tyre, *Chronicon*, 17.1. 47 (vol. 63A, p. 761).

<sup>32</sup> Riley-Smith, *Knights*, p. 54; Delaville le Roulx, *Cartulaire*, vol. 1, no. 83.

clearly equated the roles of the Hospitaller and the Templar Masters at Ascalon.

When Baldwin attacked Ascalon, the siege at first went badly until after some months the defenders lit a fire between an attacking tower and the city wall. The fire, which they hoped would destroy the tower, became an inferno when a strong wind turned it against the city wall, part of which collapsed. The whole army ran to the breach hoping to gain entry into the city.<sup>33</sup> The Templars held back all except some forty of their own, who rushed in but were killed in an ambush within the city. They had hoped to gain great spoils and have the pick of the booty but, as a result, many, including the king, seemed to lose heart and felt the city was impregnable.<sup>34</sup>

When the leaders of the army met, they divided into two factions for and against continuing the siege. Patriarch Fulcher of Jerusalem, Archbishop Peter of Tyre, and all the clergy, together with Raymond and his brothers wanted to continue the siege and persuaded the king and barons to persevere, which finally resulted in the city's capture.<sup>35</sup> That both Raymond and his brothers were part of the council means that the Hospitallers were present not only as observers but as part of the Frankish forces and that Raymond was part of the leadership of the army.<sup>36</sup>

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<sup>33</sup> William of Tyre, *Chronicon*, 17. 27. 38-59 (vol. 63A, p. 798).

<sup>34</sup> William of Tyre, *Chronicon*, 17. 28. 1-24 (vol. 63A, p. 800).

<sup>35</sup> William of Tyre, *Chronicon*, 17. 28. 28-30 (vol. 63A, p. 800); Delaville le Roulx, *Cartulaire*, vol. 1, no. 83.

<sup>36</sup> William of Tyre, *Chronicon*, 17. 28. 29-30 (vol. 63A, p. 800).



The Order's involvement with various military actions and functions during Raymond's Mastership suggests clearly that military brothers were introduced during this period.<sup>37</sup>

However, no distinction was made between those who fought and those who served in the Hospital, nor is it known how many military brethren actually worked alongside the serving brethren in the wards. No clear division was recorded until the Statutes of Alfonso in 1206 and prior to these the only designations used in the records were those of clerical and lay brethren. This has helped to confuse the actual participation of the military brothers in the Hospital and in warfare during this period.

By the middle of the century, the Order seems to have been enrolling knights. In 1148 a certain *Gillebertus, miles et frater Hospitalis*, "knight and brother of the Hospital" witnessed a donation by Humphrey of Toron to the leper hospital of St Lazarus in Jerusalem.<sup>38</sup>

Forey has pointed out that the terms *frater* and *confrater* were used interchangeably so Gilbert may have been a lay associate and supporter of the Order. *Miles* may have referred to a secular function since it was used in that sense for other witnesses to the charter.<sup>39</sup> However, the donation was given in Jerusalem, where the term "brother of the Hospital" would have meant that Gilbert was a Hospitaller.

Further to this, Walter Map claimed that during the early days of the Hospitallers many people supported the Order with "patrimonies", and a large number worked for it, by ministering to the sick in the Hospital. He related the

<sup>37</sup> Forey, "Militarisation", p. 88.

<sup>38</sup> Gillebertus, *Cartulaire de S. Lazare*, vol. 2, no. 6, p. 127.

<sup>39</sup> Forey, "Militarisation", pp. 78-9.

tale of a nobleman, *nobilis*, who was accustomed to being waited upon, bathing the putrid feet of a patient. He became so upset by the suffering that he drank some of the washing water in order to condition his stomach to what it would normally refuse.<sup>40</sup> Map was contrasting the early work of the Hospitallers to the later attitude of the knights.

The younger brother of Bishop Roger of Worcester was one English knight who joined the Hospitallers. He had not received due recognition from King Henry and was reduced to penury at some time before 1170.<sup>41</sup> The bishop's brother would have been a knight because a nobleman who was not a knight would have been unusual in the twelfth century.<sup>42</sup>

The early admission of knights and nobles into the Order meant that the serving brothers must have begun to feel socially inferior. This may not have affected their overall situation before the knights became numerous, but it would have taken effect as the balance began to favour the knights. The growing party of the military brethren would have become obvious at Chapter meetings in which all brothers took part. As the number of military brothers increased, it would have thrown a heavier load onto those with responsibility for the Order's finances. The costs incurred by the knights, with their expensive equipment, horses, servants, and training, would have been extensive .

Riley-Smith has pointed out that although the Hospitallers were given fortresses during Raymond du Puy's magistracy, this does not necessarily mean that there were a great number of military brothers or knights. They may

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<sup>40</sup> Walter Map, *De nugis curialium*. pp. 68-71.

<sup>41</sup> William fitz Stephen, *Vita S. Thomae*, vol. 3, p. 105.

<sup>42</sup> Forey, "Rank and authority", p. 298.

have employed mercenaries.<sup>43</sup> However this would have been difficult to do in some parts of the Holy Land especially in lonely areas.<sup>44</sup>

Even if the Hospital decided to engage mercenaries to assist in the defence of pilgrims and its properties it would still have needed some military brothers to lead and organise them.<sup>45</sup> The military brothers would have lived separately to their mercenaries and servants, as they did at Bethgibelin, where the garrison included some Turkopoles by 1179.<sup>46</sup>

The rapid growth of the military brothers was recorded by Benjamin of Tudela around 1162. He reported that the Hospital was able to provide four hundred knights for battle, as well as to give care to the needy in life and death.<sup>47</sup> This figure need not be accepted literally, but if there were other knights who had responsibilities in their fortresses, the total number of knights would nevertheless have been a formidable element in the Chapter by then. If the knights numbered several hundred in the sixties, their numbers must already have been impressive even at the time of Raymond du Puy's death in 1160.

Despite the growth of the number of knights, the caritative work of the Hospital continued unabated. The Unknown Pilgrim, whose visit to Jerusalem Kedar dates to between 1182 and 1187,<sup>48</sup> described the running of the Hospital and the life of the brothers. Despite the fact that his visit was twenty years after the death of Raymond du Puy, the standard of Hospital care was not diminished. He was impressed by the work being done and the dedication

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<sup>43</sup> Riley-Smith, *Knights*, p. 58; Forey, "Militarisation", p. 82.

<sup>44</sup> Hamilton, *Latin church*, p. 89.

<sup>45</sup> Forey, "Militarisation", p. 83.

<sup>46</sup> Riley-Smith, "Hospital spirituality", p. 2; Riley-Smith, *Knights*, pp. 58, 467.

<sup>47</sup> Benjamin of Tudela, *Itinerary*, p. 22.

<sup>48</sup> Kedar, "Jerusalem Hospital", p. 4.

of the serving brothers to the poor and sick. He made little mention of the presence of military brothers in the life of the Hospital and concentrated rather on its *caritas* and the practical way the serving brothers showed their Christian commitment.

He described how the serving brothers and sisters nursed and fed patients, ably assisted by their servants and by worthy pilgrims who were presumably well enough to help.<sup>49</sup> He did not mention any responsibilities that the military brothers may have had in the nursing care. His only reference to the knights performing a charitable duty was that they sometimes allowed wounded soldiers to ride behind them on their horses back to Jerusalem. He added, that when necessary, they gave up their horses to the wounded for transport back to the Hospital and they walked home themselves.<sup>50</sup>

After skirmishes and battles pressures on nursing staff in the Hospital would have increased. Nursing the wounded at the scenes of various confrontations and transporting some back to Jerusalem were added burdens. Collecting alms in the Kingdom, and the responsibility for assisting local people in need, would both have had to continue as part of the work of the serving brothers, their assistants, and perhaps some knights who may have assisted. As evidence of the added pressures upon the administration, Pope Anastasius IV gave permission in 1154 for the Order to employ laymen, meaning that doctors could be included in Hospital medical work.<sup>51</sup>

Although the Unknown Pilgrim described sisters as working in the Hospital it is difficult to assess the position of women associated with the

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<sup>49</sup> Kedar, "Jerusalem Hospital", 136r (pp. 19-20).

<sup>50</sup> Kedar, "Jerusalem Hospital", 137r (pp. 21-2). Compare *Quam amabilis Deo* of 1139-43 in Delaville le Roulx, *Cartulaire*, vol. 1, no. 130.

<sup>51</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 226.

Hospital while it was in Jerusalem.<sup>52</sup> Those described as sisters could have included women associated with the early hostel for women in Jerusalem who had continued to provide assistance in the men's Hospital. Alternatively, they may have been attendants employed by the Order.

As well as letters regarding donations of gifts to the Hospital and the foundational bulls, other correspondence and documents, which deal with the general contemporary business of the Hospital, do not mention knights. The correspondence of the Hospital clarifies neither the relationship of the military brothers to the serving brothers nor their respective responsibilities within the Order.

Another aspect of the Order's shift to military activity and its effect on the work and standing of the serving brothers needs consideration. Although military brothers had been part of the Hospitaller's organisation at least since the 1130s, no Pope either mentioned them directly or gave permission for their existence, despite the fact that the relationship between the papacy and the Order was basic to its existence and well being. During the reigns of six Popes; Honorius II, Innocent II, Celestine II, Lucius II, Eugenius III, Anastasius IV and Hadrian IV, no correspondence between any of them and the Hospitallers referred to military brethren. However, at the same time the Papacy knew about the Order of the Templars.

Papal bulls emphasised that the reason for the support given by so many was the caritative work of the serving brothers who carried the main burden of this ministry.

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<sup>52</sup> Forey, *Military Orders and Crusades*, p.67.

The inclusion of knights in the Order changed its very essence to one which existed for the defence and security of the Frankish Lands. This was reflected in a letter, supposedly sent from the Holy Land to Archumbaldo, Master of the Hospitallers in Italy.<sup>53</sup> The unknown author described the tragedy of the battle of the Horns of Hattin and of contemporary events in the Holy Land, bemoaning the capture of Guy de Lusignan and the destruction of the Christian forces.

Although the letter may have been an *excitatorium* to stir up support for the Holy Land, it does show the passions which existed at the time, revealing that the Hospitallers' primary concern for pilgrims and the sick had changed to one for their military role.

After describing the battle of Hattin, the letter went on to anticipate the capture of Jerusalem and to enumerate the places already captured by, or surrendered to, Saladin. The supposed author was aboard a galley that had left Tyre which he claimed was still in Christian hands. Despite the author's foreshadowing the capture of Jerusalem and the danger this presented to the headquarters and Hospital of the Order, no sorrow or grief was expressed at their expected loss and no concern is shown for the fate of the serving brothers or pilgrims in the Holy City. Even if the writer was a knight, he should have realised the importance of the Jerusalem Hospital to the Order. However, the emphasis of the letter was instead, on the defeat of the army.

The author requested the Hospitallers in Italy to send military assistance immediately. He was concerned for the security of the Franks in

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<sup>53</sup> Munro, *Letters*, vol. 1, no. 4 (pp. 17-19); Ansbart, *Historia*, pp. 2-4.

general and in not mentioning the Hospital and the serving brothers he reflected the change in the primary functions of the Order.

The forces which produced and fostered the development of military brothers within the Order were both hidden and plain to see, but the serving brothers were perhaps too busy or illiterate to record their passage through this turbulent time.<sup>54</sup> However, Masters of the Order and Kings, as well as the tense situation of a frontier, all influenced the Order and each played a part, as did the military brothers themselves, in promoting and encouraging the formation and development of the Hospital's military involvement.

It is important to remember that it was the original intent of the Hospital that produced its good reputation, wealth and stability. The concept of military monks was made possible only by the ministrations of the Hospital and its reputation as a dispenser of *caritas*. It was under the banner of caring for poor and sick pilgrims that the Order became involved in military service and saw itself as acting in accordance with the need of the moment. By 19 December 1184,<sup>55</sup> when Pope Lucius III issued a new Papal bull for the Order, declaring the forgiveness of sins for those defending the Holy Land, he was endeavouring to encourage the military brothers in their activities and had accepted the new situation.

As the twelfth century wore on, the knights gradually gained influence and prestige in the General Chapter, and the work of serving brothers of ministering to the sick slipped into second place. It was reflected in the political involvement of the Masters and the growing emphasis on the knights. Those brothers who were concerned about this changing situation had to wait

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<sup>54</sup> Forey, "Literacy and learning", pp. 187, 205; Forey, "Novitiate and instruction", pp. 6-7.  
<sup>55</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 712.

until things went wrong before they could attempt to recall the Order to its previous intentions. Even then, their effort was to prove to be too little too late.



## Chapter 8

### Controversy and Diplomacy

#### 1160-1187

Conflicts of purpose developed within the Hospitallers during the second half of the twelfth century. As the military brothers increased in numbers they became an important part of the forces of the Crusader States. Accordingly their presence became stronger within the Order and in decision making at the level of Chapter Meetings. This became evident in Gilbert d'Assailly's swaying of the Chapter to accept a proposed invasion of Egypt. The Masters who followed Gilbert accepted the new role of military brothers and from Roger des Moulins became politically influential. These developments had a great effect on the serving brothers and their caritative functions in the years 1160-1187.

The serving brothers and other moderate brothers had every reason to react against this change of direction and emphasis, and this resulted in a serious attempt to re-establish the Hospital's original course and make it concentrate on its primary purpose.<sup>1</sup> The discontent within the Order arose because of the conflict of conscience associated with the psychological difficulty of the brothers accepting the concept of war, which had begun to influence their former pacifist Order.

The first real indication of disagreement in the ranks of the Hospitallers came in a bull of Pope Alexander III issued between 1168 and 1170.<sup>2</sup> Criticism

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<sup>1</sup> Riley-Smith, *Knights*, p. 73.

<sup>2</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 391.

had reached Rome of the involvement of Gilbert d'Assailly in the failed invasion of Egypt, one result of which was the near insolvency of the Order when its debt amounted to 100,000 pieces of gold.<sup>3</sup> This helped to create an opportunity for an appeal to be made to Rome.

Alexander rebuked the Hospital, stating that the first duty of the Order was towards the poor. He added that the exercise of arms was contrary to the customs of the Hospital and the intentions behind its foundation.<sup>4</sup> In drawing attention to the exercise of arms and the original intentions of its founders, the Pope criticized the widening military functions of the knights. Since most of the the Order's brothers were not educated,<sup>5</sup> it is probable that the Pope's information came from either literate brothers, church authorities in the Kingdom of Jerusalem, or leading laymen. That the Pope found it necessary to rebuke the Hospital in this way is evidence of a strong reaction against the leadership and the military brothers.

The financial crisis would have thrown a heavy weight of responsibility upon the serving brothers and their administration of the Hospital. Alexander mentioned the Order's impoverishment and that support had declined in England, which could also have been the case in France. Phillips has drawn attention to the seriousness of the situation after 1168 and to William of Tyre's statement that the Hospital's treasury was exhausted and its borrowings spent as well.<sup>6</sup> He

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<sup>3</sup> Riley-Smith, *Knights*, p. 73.

<sup>4</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 391.

<sup>5</sup> Riley-Smith, *Knights*, p. 272.

<sup>6</sup> Phillips, "Henry of Reims", p. 84; William of Tyre, *Chronicon*, 20. 5. 20-33 (vol. 63A, pp. 917-918).

points to Jobert's letter of appeal to Henry of Reims, which is probably the only one to have survived of many others written to important European sympathizers. It requests a gift of property, does not mention finance and refers only to the caritative work of the Order. Phillips suggests that the Hospitaller's request to the Archbishop Henry of Reims for property, may have been prompted by the dire straits of its finances at the time. As a result of the crisis "the Hospitallers' financial and military standing had suffered much in the late 1160s and early 1170s."<sup>7</sup>

Jobert may have emphasized support for the caritative ministry and omitted mention of finance, because it would have been associated with support for the knights. He must have realised that any mention of the knights would be ill-received by those in Europe reacting to their introduction and concerned about the difficulties faced by the serving brothers in their work.

If Jobert had requested finance for the knights it could have aggravated contemporary concerns over the militarization of the Order. He perhaps did not know at the time if Henry shared the Pope's view that warfare was having a detrimental affect on the Hospital and had led to its lack of support.<sup>8</sup> Within the Order many would have agreed. As Riley-Smith has said: "The internal crisis that followed revealed the existence of a party, that was opposed to the policy of active participation in military enterprises".<sup>9</sup>

Discontent within the Order centred on the behaviour of Gilbert d'Assailly

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<sup>7</sup> Phillips, "Henry of Reims", pp. 84-85.

<sup>8</sup> Phillips, "Henry of Reims", pp. 84-88.

<sup>9</sup> Riley-Smith, *Knights*, p. 73.

and the influence of the military brothers. He had not only led the Order into near insolvency but had brought down upon it a moral judgement. William of Tyre reported that those opposed had complained about the proposal to invade Egypt, a country with which the Kingdom of Jerusalem had agreements and treaties. They asserted that it was only rumoured that Shawar, the sultan of Egypt, was communicating with Nureddin to come to his aid. There was no justification in Gilbert d'Assailly's pressing the king to invade a peaceful country.<sup>10</sup>

They had argued that the war was unjust, contrary to divine law, that the reason for it was a pretext to support a heinous crime, and that as a result the Lord had withdrawn his favour and refused victory to the king.

William's whole record of events is summed up by his constant use of the expression: "it is said". His object was to condemn Gilbert, his character, and the hope of financial gain from the war. To further emphasis his criticism he declared that the Templars had declined to take part in the campaign either because it was against the dictates of conscience or perhaps because that a master of a rival order was the originator and leader of the enterprise. The refusal of the Templars may have been expressed within the planning procedures before the actual war.

Nicholson has drawn attention, however, to Lambert of Watrelos's *Annals of Cambrai*, in which these events are portrayed quite differently.<sup>11</sup> Lambert

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<sup>10</sup> William of Tyre, *Chronicon*, 20. 5. 33-39 (vol. 63A, p. 918).

<sup>11</sup> Riley-Smith, *Knights*, p. 72 note 2 and p. 61 note 3.

claimed that his version was trustworthy and that Gilbert d' Assailly, the king and the Templars each led their own contingent in the invasion.<sup>12</sup>

Nicholson suggests that “Perhaps the Templars protested about the breaking of the truce, yet had no choice but to accompany the king” and that William of Tyre may have concealed some of the events in order to emphasize his own attitude towards the military orders and perhaps to warn others not to support them.<sup>13</sup> However, William was equally disillusioned with both military orders because he saw them “damaging the Kingdom of Jerusalem”,<sup>14</sup> and including both orders in the invasion would have added strength to his argument.

Riley-Smith has expressed the opinion that “the appearance of religious dedicated to war was bound to lead to controversy”.<sup>15</sup> He stresses that Augustine and the Fathers had taught love for both friends and enemies and that this was made canonical by Gratian in his *Decretum*.<sup>16</sup> This was the idea which the serving brothers expressed by their caritative attitude towards all comers, whether Christians or those of other religions. However, Riley-Smith describes the interpretation of love, as presented to Crusaders by some preachers, was that war showed love for enemies, in order to correct them. He believes that this was a debased form of love for a neighbour.<sup>17</sup>

The idea that one form of Christian love was correcting an enemy by warfare as a good work and meritorious for salvation was not the original

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<sup>12</sup> Lambert Wattrilos, *Annals Cameracenses*, vol. 16, p. 547.

<sup>13</sup> Nicholson, “Before William of Tyre”, pp. 116-7.

<sup>14</sup> Nicholson, “Before William of Tyre”, p. 117.

<sup>15</sup> Riley-Smith, *Knights*, p. 70.

<sup>16</sup> Riley-Smith, “Crusading as an act of love, p. 188; Winroth, *Gratian’s Decretum*, C.23, q. 4c. 54. *Item Augustinus ad Donatum presbiterum*, p. 219.

<sup>17</sup> Riley-Smith, “Crusading as an act of love, pp. 189-91.

purpose of the Hospitallers. The military brothers had shown little justice in invading a country which had a treaty with the Kingdom of Jerusalem. The serving brothers were not concerned with war except for treating the wounded and would have felt that Gilbert and the military brethren had overstepped the mark. These sentiments would have helped to stimulate the need to express disappointment with the Master for leading the Hospital into debt and a desire to return to basic caritative functions.

Gilbert resigned because of the discontent in the Order and withdrew to live the life of a recluse, adding fuel to the fire, because the brethren were annoyed that he had not consulted the Chapter. Some claimed that a Master could not abdicate without the advice of the brothers, as well as the Pope's permission, and his resignation brought about a constitutional crisis. No previous Master had resigned and there was nothing to cover such a situation in the Rule of Raymond du Puy or the Order's bulls. Paschal II had assumed that a Master would remain in the position for his life as was the case in Benedictine monasteries. The only mention of a new Master in *Pie postulatio voluntatis* was at the death of the reigning one.<sup>18</sup>

Gilbert would have been better advised to remain in office to guide the Order through a difficult period. Leaving it so impetuously to lead a solitary and contemplative life as a hermit when the Order was in crisis, was to allow the situation to become worse. Gilbert had placed all his hopes on military and political affairs and, when these were dashed, gave little thought to running the

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<sup>18</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 30, ch. 9.

Hospital and its ministrations to pilgrims and the poor.<sup>19</sup> His attitude and behaviour would have caused deep resentment among the serving brothers left with the responsibility of running the organisation.

Gilbert's military and political ambitions had led to friendship with king Amalric and since the Hospitaller knights had become part of the armed forces of the kingdom, the king asked that Gilbert return and remain the Master.<sup>20</sup> To retain the Hospitaller knights in the forces of the Kingdom of Jerusalem, he needed a willing and co-operative military leader of the Order.

On Gilbert's departure, Pons Blanus became the Acting Master. He and the leading officers of the Order then moved outside the boundaries of the Rule and the bull of 1113, to invite the intervention of the Patriarch, Amalric of Nesle who persuaded Gilbert to return to his position and threatened him with excommunication, if he again resigned the magistracy without the Pope's permission.<sup>21</sup> The Patriarch's ultimatum upset the Acting Master and the brothers, who argued that Gilbert could not be excommunicated by the Patriarch as the Order was directly subject to the Pope.<sup>22</sup>

The appeal to Amalric showed how far the Order had moved away from its original conception of a self contained brotherhood under the auspices of the Pope. The concept of serving brothers united under their Master and dedicated in religion and practice to the work of ministering to pilgrims, the poor, and the sick had been largely lost.

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<sup>19</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 310.

<sup>20</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 404.

<sup>21</sup> Riley-Smith, *Knights*, p. 62.

<sup>22</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 403.

The only grounds for Pons appealing to an authority outside the Chapter meeting were based on the Benedictine Rule. According to Benedict, if a monastery was being troubled, either from within or without, it could approach a local bishop for a ruling.<sup>23</sup> Since the Pope was the Order's protector, and in reality its bishop, the Patriarch was not in a position to interfere. There was no need for any mediator apart from the Pope.

At this point the serving brothers and other moderate brothers who remained loyal to the foundational principles of the Rule realized that they needed to act if the Order was to regain some semblance of its original intent. They believed that their future security lay in the support given to the Hospital for its caritative work. As a result, the Chapter criticized Gilbert's past record and his favouring the knights almost to the exclusion of the serving brothers. He was requested to promise that in future a Master would not receive or build castles on the frontiers without consulting the Chapter and having its support.<sup>24</sup>

This request was not outside the general spirit of the Order of meeting in Chapter to discuss its business.<sup>25</sup> The brothers hoped that the Master would consult with them when making major decisions, much the same as was done in any Benedictine monastery. The question arises, therefore, of whether the majority of brothers had been consulted about the expedition to Egypt and had agreed to it or whether Gilbert had committed the Hospital without consulting the Chapter.

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<sup>23</sup> McCann, *St Benedict*, ch. 64, pp. 144-5.

<sup>24</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 434.

<sup>25</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, Preface of the Rule.



Chapter three of the Benedictine Rule exhorted brothers not to presume to defy the abbot. However, the abbot was to consult with them on important matters and to listen to their opinions, Benedict believed that on many occasions younger or more junior brothers spoke the will of the Lord best.<sup>26</sup> After consultations were over, the Rule was to be their guide in everything and no one was to depart rashly from it.<sup>27</sup> This principle must have been in the minds of the brothers when they made it a condition of Gilbert's return, that he would in future consult the Chapter and gain its support for military actions on the frontiers. There appears to have been a mood of reconciliation at this point between the knights and the serving brothers. No doubt the fiasco in Egypt and the fear of financial disaster helped to create embarrassment and guilt which assisted in bringing the two factions together.

However, Gilbert refused to comply with the request that he consult with the Chapter in future and resigned a second time. As Acting Master Pons continued to support him and refused to accept his second resignation, at the same time pressing for Gilbert's return on his own conditions.<sup>28</sup> There was a stalemate. Gilbert was willing to admit his extravagance, but refused to submit to the Chapter. For its part, the Chapter insisted that the Patriarch had interfered in the business of the Order in directing Gilbert to return to the Hospitallers and the brothers to obey their Master.

As a result of this impasse, the majority of the brothers in Syria acted in

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<sup>26</sup> McCann, *St Benedict*, ch. 3, pp. 24-25.

<sup>27</sup> McCann, *St Benedict*, ch. 3, p. 25.

<sup>28</sup> Riley-Smith, *Knights*, p. 62.

accordance with *Pie postulatio voluntatis* and elected another Master, Cast de Murols.<sup>29</sup> New officers were elected and Pons Blanus was removed as Grand Commander, a title used for an Acting Master, after which he determined to appeal to the Pope. He continued to receive the support of the King and the Patriarch in refusing to accept Gilbert's resignation and a schism resulted for many months, during which an anti-Master, Rostang, was put forward by some brethren.<sup>30</sup>

After some time Amalric again intervened.<sup>31</sup> Pons and the new Grand Commander were called before the Patriarch and the new Grand Commander refused to allow Pons to appeal to Rome. The latter demanded *esgart des frères*, or the judgement of the brothers. When denied this, he wanted to appeal to Rome but the new Grand Commander ordered him to surrender his horse and weapons and told him not to go. When Gilbert d'Assailly heard of the turmoil he tried to become Master again and, when denied, left the Holy Land to justify himself in Rome.

Finally after all this turmoil, in 1172 Alexander III accepted Gilbert's resignation and the election of Cast de Murols. The Pope also declared that in future decisions of the Master regarding the acquisition of castles were to be made in consultation with the Chapter,<sup>32</sup> the very restriction on the Master's power which the Chapter had requested. The Pope's actions supported the outlook of the serving and the more moderate brothers.

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<sup>29</sup> Riley-Smith, *Knights*, p. 62.

<sup>30</sup> Riley-Smith, *Knights*, pp. 62, 63.

<sup>31</sup> King, *The seals*, pp. 9, 11, 21.

<sup>32</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 434.

The Pope's decisions were in accordance with the spirit of the Benedictine Rule.<sup>33</sup> Benedict had advised that for problems or legislation needing solutions, which were not clearly covered in his Rule, wisdom should be sought from elsewhere. When this situation arose, his brothers were to examine the Holy Scriptures, the letters of Cassian, the Catholic Fathers or Basil of Caesarea's Rule.<sup>34</sup> With this in mind, Alexander III quoted *Ecclesiasticus*: "Do all things with counsel and thy deeds shall not bring thee sorrow",<sup>35</sup> the inference being that Gilbert should have taken wider advice in decision making.

Gilbert d'Assailly provoked the conflict within the Order because of his primary interest in the military brothers and their contribution to the Kingdom. The conflict reflected the influence he was able to exert over the Chapter and the strong position of the knights within the Order. However, as Forey has pointed out, the position of the Master with respect to the Chapter did not actually change because Alexander II did not introduce a new practice.<sup>36</sup> The Master was still able to introduce new ideas and the ruling did not prevent him from acting arbitrarily after consulting the Chapter.

Alexander did rule that upon appointment a Master had to promise to observe the ancient customs and statutes of the Order and not to make decisions about major and internal or household matters without consulting the Chapter. This referred to seeking advice regarding the acquisition and fortification of frontier castles as well as the administration of obediences and the making of

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<sup>33</sup> McCann, *St Benedict*, chs 3, 64 (pp. 25, 144 -9).

<sup>34</sup> McCann, *St Benedict*, ch. 73, pp. 160-3.

<sup>35</sup> *Ecclesiasticus*, 32. 24 in *The Apocrypha*.

<sup>36</sup> Forey, "Constitutional conflict and change", pp. 17-18.

pacts on oath. The Pope did not stop the Master from presenting new issues, nor limit the general existence of military brothers, provided that he respected the traditions of the Order. He did, however, outline clearly those issues for which the Master was obliged to seek and accept advice.<sup>37</sup> Forey believes that during the crisis no party opposed the excesses of the Master, and the military brethren, and that no section within the Order objected to the background events which had caused the situation.<sup>38</sup> He argues that a general concern by the whole Order resulted in demands being made upon the Master by the Chapter.<sup>39</sup>

However, this is difficult to accept as the crisis erupted in 1168 and Gilbert resigned in late 1169 or 1170. The Chapter made its demands in 1170 so nearly two years had passed since the trouble had started. After so much time it seems that the initial anger at Gilbert and the knights had subsided, allowing upset parties to be reconciled somewhat in order to solve the obvious problem. It must be recalled that there had been great division within the Order over points of tradition and law.

The serving brothers were those most affected by the crisis. They would have been anxious for the caritative work of the Order and concerned about the bad effect of the behaviour of the military brothers on the reputation of the Order and its financial difficulties. Alexander III's reaction in rebuking the Hospitallers and reminding them to concentrate on their service to pilgrims must have reflected the seriousness with which the crisis was viewed by the Papacy.

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<sup>37</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 434.

<sup>38</sup> Forey, "Constitutional conflict and change", p. 23;

<sup>39</sup> Forey, "Militarisation", p. 89.

Those brothers who were concerned for the Order's caritative functions for which they were responsible would have been united in objecting to the gravity of the situation and endeavoured to rectify it. They were the core of those who wanted to return to the foundational intent of the Order and who opposed those who saw no contradiction in the changes taking place.

Cast de Murols, who had been the Order's Treasurer, was remarkably able to pay off the debts by the end of his magistracy in June 1172.<sup>40</sup> His reputation for conciliation meant that he became an ameliorating force within the Order and also established a pattern for the next Master, Jobert. He was a leader who kept a balance between the purposes of the serving brothers and the knights. In the later traditions of the Order, he was regarded highly as a man of integrity, humility and kindness,<sup>41</sup> and as someone able to harmonize the two factions within the Order.<sup>42</sup>

Papal communications during the magistracies of Cast de Murols and Jobert reveal the main concerns of the Popes and the Masters: what they considered to be the important business of the Hospital and its apparent neglect of the caring and nursing work. They show Cast de Murols and Jobert playing quiet leadership roles in the Order while also supporting the military brothers.

A total of fifteen Papal communications survive from the Magistracy of Cast de Murols, six of which were bulls. They include two in which bishops were instructed to defend the rights of the Hospital over its lands and cattle. One

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<sup>40</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 309, 375, 399.

<sup>41</sup> Riley-Smith, *Knights*, p. 63; *Cronica magistrorum defunctorum*, p. 797.

<sup>42</sup> Delaville le Roulx, *Les Hospitaliers*, p. 80.

renewed privileges given by previous popes and one gave an exemption from the payment of taxes on the collection of alms or income from tenants. The last two declared excommunication for anyone “unhorsing an Hospitaller” or otherwise acting violently to one. It seems from these letters that Cast was content to concentrate on the general running of the Order and on restoring the Hospital’s finances.

Riley-Smith has suggested that the election of Jobert was a reaction to the military aspirations of Gilbert d’Assailly.<sup>43</sup> The serving brothers had many reasons to be at odds with the knights and the Pope had emphasized the caritative ministry of the serving brothers. Jobert’s Statutes were conciliatory, in line with the Pope’s directive to return to the prime intent of the Order, and made no mention of the knights. There was a definite attempt to bring the work of the Hospital to the forefront at the expense of the knights.<sup>44</sup>

Jobert’s Statute of 1176, “The privilege of the sick to have white bread”, may have been part of his reconciliation programme. By using such phrases as, “our blessed lords”, “our lords the poor” and “the poor”, he hoped that the Pope would be reassured of the Hospitallers’ concentration on the needs of pilgrims. In this Statute two *casales* were to supply white bread to the poor sick forever and, if this source failed, the Hospital was to purchase enough corn to supply the need.

On the other hand Jobert’s decision to introduce white bread could also

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<sup>43</sup> Riley-Smith, *Knights*, p. 64; “Cronica magistrorum defunctorum”, p. 797; Delaville le Roulx, *Cartulaire*, vol. 2, Statutes nos 1176, 1177.

<sup>44</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

have been due to a genuine concern to follow what he considered to be good medical advice. Although there is no evidence to suggest that Jobert knew that Abū 'l Qasim (d. 1013) had discussed white bread in his work on diet and drug treatment, it is interesting that he believed that white bread was easier to digest and assimilate than brown bread made from heavy red wheat. In his opinion brown bread might cause swelling and constipation in a weak constitution. Because of this he claimed that it was dangerous to give brown bread to the sick and thought it better to give it to those who were physically strong and well.<sup>45</sup> This suggests that Jobert may have had a genuine concern for the welfare of the sick pilgrims.

Roger des Moulins became Master of the Hospital in 1177 and during his magistracy the Order received a total of 305 surviving letters. Of these, 138 were Papal bulls and of those 110 were renewals of various privileges given by previous Popes. Seven letters dealt directly with the knights, three concerned the Third Lateran Council, and 15 general business of the Order. Only three letters referred to the serving brothers.

In *Piam admodum et jugem* of 1178 or 1180,<sup>46</sup> Alexander III again emphasized the ministry of the brothers and their caring for the poor. Evidently the question of the primary work of the Hospital had again been raised. The bull emphasized that the knights' activities should not be at the expense of the serving brothers. Knights were not to take part in war unless it was necessary and the Pope explained in detail what he meant. The knights were only justified

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<sup>45</sup> Harmarneh, "Ecology and therapeutics", pp. 172-3.

<sup>46</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 527.

in going to war when the standard of the Holy Cross was carried in the Christian army for the defence of the Kingdom of Jerusalem, or in a siege of some “pagan” city.<sup>47</sup>

Having made his conditions clear, the Pope answered a direct criticism levelled at the knights by insisting that care for pilgrims must not be jeopardised by spending money on weapons. Other complaints continued to arrive in Rome and it has been suggested that the Statutes of 1182 were written to assuage the feelings of the Pope and the complainers.<sup>48</sup> These Statutes were wholly concerned with works of charity, something which was at odds with the dire situation of the Franks in Syria.

As time passed Alexander either changed his mind regarding the knights or he endeavoured to please both parties. Whereas between 1168 and 1177 he placed emphasis on the serving brothers, in 1178-80 he accepted the role of the knights but set limits on their activities.<sup>49</sup> This change of position suggests that he had come to be convinced of the importance of the role being played by the knights. Consequently, he sought to encourage the knights without diminishing his support for the serving brothers.

During the seventies the position of the Pope became very difficult in that he needed to accept the bishops’ criticisms of the Hospitallers and yet behind the scenes accept the reality of the contribution being made by the knights. This became abundantly clear during the Third Lateran Council of 1179, which

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<sup>47</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 527.

<sup>48</sup> Riley-Smith, *Knights*, p. 333.

<sup>49</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 513, 527, 560, 566, 569, 590.



Alexander summoned to heal the schism within the church and the quarrel between the emperor and the papacy.<sup>50</sup> Three hundred bishops gathered for the conference including William of Tyre, Heraclius of Caesarea, Prior Peter of the Holy Sepulchre and the Bishop of Bethlehem.<sup>51</sup> Amalric, the patriarch of Jerusalem, did not attend presumably because of illness or old age as he died the following year in 1180.

At the Council, complaints were directed against the military orders and an attempt was made to place limits on them.<sup>52</sup> Some of these criticisms may have reflected many of those shared by the serving brothers of the Hospitallers. A canon was issued which rehearsed grievances against the Templars, Hospitallers and other professed religious, and laid down remedial steps to be taken in order to set things right. William of Tyre agreed with the findings of the Council.

In Canon 9 the Council reported that the Templars and Hospitallers and other professed religious had exceeded the privileges granted to them and had shown great disregard and disrespect towards bishops. The complaints included receiving churches from the laity, receiving people who bishops had excommunicated, acceptance and use of unlicensed priests, and burying pilgrims on their properties.<sup>53</sup> It was also claimed that they admitted and defended those who wished to join their brotherhoods who may have been excommunicated by bishops.

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<sup>50</sup> Tanner, *Councils*, vol. 1, p. 205.

<sup>51</sup> William of Tyre, *Chronicon*, 21. 25 (26). 1-9 (vol. 63A, p. 996)

<sup>52</sup> Tanner, *Councils*, vol. 1, Lateran III, 1179, Canon 9, pp. 215-7.

<sup>53</sup> Tanner, *Councils*, vol. 1, Canon 9, pp. 215-217.

Canon 9 made an important distinction between those considered the perpetrators of offences and those considered to be innocent members of the Orders. It stated that the Orders' evils did not stem from the superiors so much as from the indiscretion of some of their subjects.<sup>54</sup> The reference to subjects was vague and may have referred to ordinary brothers or to people living or employed on their properties.

The Orders were criticized for brothers who decided to keep their possessions being exempt from the jurisdiction of local bishop's. Bishops should have been able to judge brothers found guilty of keeping possessions captured in war like any other parishioners in correcting their faults.<sup>55</sup> Brothers in protected orders breaking this rule should automatically lose Papal protection and become subject to their local bishop. Any Hospitaller in this position would have been a military brother. In being intended to tighten discipline this canon was similar to Alexander III's bull of 7 April 1177 to the Hospital, which decreed that a brother who left the Order for marriage or the world would be excommunicated.<sup>56</sup>

As with Canon 9 of Lateran III, William of Tyre did not condemn all the brethren for the behaviour of some. He understood that in such a large body of men some would be worse behaved than others.<sup>57</sup> He also stated that he

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<sup>54</sup> Tanner, *Councils*, vol. 1, Canon 9, pp. 215-7.

<sup>55</sup> Tanner, *Councils*, vol. 1, Canon 9, pp. 215-7.

<sup>56</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 514.

<sup>57</sup> William of Tyre, *Chronicon*, 18. 3. 62-66 (vol. 63A, p. 813).

admired the caritative work of the Hospital during its early years in Jerusalem in caring for poor pilgrims and offering them shelter and care.<sup>58</sup>

Consideration of critics of the Hospitallers and Templars such as John of Salisbury and Walter Map further clarifies the relationship between the serving brothers and the knights, even though these critics frequently misjudged their actions and motives.<sup>59</sup>

In 1159 John of Salisbury linked the Hospitallers to the exempt international orders; Carthusians, Cistercians, Cluniacs, canons, hermits and Templars. Although he said that there were many good and pious brethren among the monks, he condemned some because of the way they used their positions for personal gain. Among his criticisms he said that they were hypocritically humble in order to impress the unthinking laity. This does not seem to have been directed at the serving brothers of the Hospital because they had no opportunity to use their positions except in the service of poor pilgrims and were apparently self-effacing in their attitude and behaviour.

John also believed that the international orders were bad farmers, who over stocked their farms causing deserts, and accused them of desecrating churches by using them for stalls or wool workshops. These particular criticisms appear to have applied to the West. In a wider sphere he decried the way the orders claimed knowledge about all matters and expected a leading role in politics both religious and secular. In a very severe turn to his argument, he

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<sup>58</sup> William of Tyre, *Chronicon*, 18. 5. 47-56 (vol. 63A, p. 816).

<sup>59</sup> John of Salisbury, *Policraticus*, vol. 2, pp. 190-201, 209; John of Salisbury, *Letters*, no. 91 (vol. 1, p. 140).

described the military orders as living by killing and maiming their enemies and then presuming to administer the holy sacrament of the Mass.<sup>60</sup>

John's criticisms when applied to the Hospitallers clearly referred to the knights. They were the brothers who took part in politics and used violence in their profession. His condemnation of the performance of sacerdotal roles while condoning aggressive acts seems to apply to the priests of the Order. However, his general denunciation of the international orders, including the Hospitallers, was a very broad generalisation of their work, without any appreciation of the *caritas* of the serving brothers.

Walter Map, who became archdeacon of Oxford and who had attended the Third Lateran Council,<sup>61</sup> wrote satirically about the Templars and Hospitallers in the mid 1180s, and was a prominent critic of most monks.<sup>62</sup> He did however commend with respect some of the holy men he had known among the Grandmontanes, Gilbertines and Carthusians.<sup>63</sup> In his assessment of monks, the *Incidencia magistri Gauteri Mahap de monachia*, he emphasized that "It is faults that I reprove, not a way of life" and he added that it was "false professors (meaning monks) not a well-ruled order" who were the object of his main condemnation. He admired those monks who "keep lust under, (and) feed the poor that God may show them mercy".<sup>64</sup>

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<sup>60</sup> John of Salisbury, *Policraticus*, vol. 2, pp. 190-201, 209; John of Salisbury, *Letters*, no. 91 (vol. 1, p. 140).

<sup>61</sup> Walter Map, *De nugis curialium*, p. xvii.

<sup>62</sup> Walter Map, *De nugis curialium*, pp. 84-113.

<sup>63</sup> Walter Map, *De nugis curialium*, p. xliii.

<sup>64</sup> Walter Map, *De nugis curialium*, pp. 110-1.

By supporting the purpose of the serving brothers of the Hospitallers Walter Map was also condemning the warfare of their knights.<sup>65</sup> He was full of praise for the early days of the Hospitallers and described them as being modest, charitable, following Christian teaching, faithful, not charging for their services, and as such “succouring the pilgrims”. This was a clear description of the serving brothers and their caritative functions.<sup>66</sup>

His main objections to the behaviour of the Hospitallers was based on their covetousness, increased wealth and their support from the Popes. He claimed that secular clergy not associated with the Order and its possessions had been demoted in the Church and that, “They increase ever, and we decrease”, meaning that the Order ever increased in wealth at the expense of the secular clergy. He complained that it used variations in Church Law to avoid simony and increase its wealth by cheating the sons and daughters of knights of their “patrimony” and at an even worse level “worthy parsons, go without parsonage to their dying day”.<sup>67</sup> This was, of course an exaggerated view of the situation designed to enforce his argument.

In the years following Lateran III, Alexander III increased his support for the knights despite the rulings of the Council. It had decided that from March 1179 onwards no churches or tithes were to be given to the Hospitallers; that all recent (*modernum tempus*) gifts to the order were to be “put away” or given back, and that the Order should avoid all excommunicated persons. Bishops had to

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<sup>65</sup> Walter Map, *De nugis curialium*, pp. 60-1.

<sup>66</sup> Walter Map, *De nugis curialium*, pp. 68-9.

<sup>67</sup> Walter Map, *De nugis curialium*, pp. 70-3.

give permission for the Order's priests to occupy new churches and no priests were to be removed without a bishop's permission. It also decreed that alms-visitors of the Hospital were to visit churches under interdict only once a year and that no burials were to be carried out while they were under interdict.

The decisions of Lateran III would mostly have affected the knights since castles, *casales*, or houses with churches were under the control of a knight. The serving brothers in Jerusalem were generally not concerned with outside business except when collecting alms. The ruling that applied to all gifts of "modern time" was an attempt to confiscate some of the properties acquired recently by the Order.

Alexander III interpreted the reference to gifts of "modern time" to mean gifts made during the preceding ten years.<sup>68</sup> He then issued two more bulls supporting the Hospitallers despite Lateran III. On 28 July 1179 he declared that licences to conduct services given to Hospitaller churches could not be revoked.<sup>69</sup> Then, just before he died, he declared that the Hospitallers had been made to suffer and ought to be respected despite the decisions of the Lateran Council.<sup>70</sup>

Walter Map claimed that the decrees of Lateran III were emptied of any power by Alexander's later bulls and that those present at the Council hardly gained any satisfaction from their criticism of the Hospitallers. He attributed the reason for the papal reversal to money, saying that "as the Council broke up my

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<sup>68</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 566.

<sup>69</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 569.

<sup>70</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 590.

lady Purse opened her wrinkled mouth” and then added that she, “though she be not love, yet masters all things in Rome”.<sup>71</sup>

This assessment may have been biased, but it is true that at Lateran III Alexander was silent about the Hospitallers, and that later he continued to assist them as he had before the Council.<sup>72</sup> No doubt the Pope realised the importance of the Hospitaller knights for the defense of the Holy Land. This had placed him in an invidious position at Lateran III as he really needed the knights to play their part in the worsening situation of the Franks in the Holy land.

The next Pope, Lucius II (1181-1185), continued to support the Hospitallers for the same reasons. In a bull of 1181 he instructed the bishops of the Holy Land to excommunicate anyone who attacked the Hospital or the Temple.<sup>73</sup> On 28 March 1182 or 1183 he reminded them that the goods of the Hospital were for the defense of the Holy Land and the care of poor pilgrims.<sup>74</sup> On this occasion he listed the defense of the Holy Land first in the work of the Hospital. He also forbade levies or taxes on imports of goods for Hospitaller castles and villages. This is puzzling, however, for it was the crown rather than bishops who controlled taxes on commerce. Although Lucius was pontiff for only approximately five years he issued at least 98 bulls in favour of the Hospitallers, more than any previous Pope.

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<sup>71</sup> Walter Map, *De nugis curialium*, pp. 70-1.

<sup>72</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 290, 319, 320, 360, 392, 419, 420, 428.

<sup>73</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 616.

<sup>74</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 628.

Among Lucius's bulls were instructions to the bishops to excommunicate those who arrested or molested Hospitallers or who took their horses.<sup>75</sup> Roger des Moulins was again reminded that the word "modern" in the Lateran instruction should be interpreted to cover the past ten years.<sup>76</sup> Bishops were to respect the Order's privileges and it was to be exempted from taxes or levies in all villages and castles not nominated in letters patent, or covered by any restrictions.<sup>77</sup> Some Hospitaller properties had been apparently partly under the authority of local bishops but were to be freed from it.

The Master was given permission to refuse to pay bishops, who contrary to their rights required dues, and bishops were ordered by the Pope to allow Hospitallers alone to wear the white cross.<sup>78</sup> On 6 December 1184 they were instructed to protect the Order from evil men who took its goods or ignored its privileges.<sup>79</sup> The Pope gave permission for Hospitallers to be buried in cemeteries and churches and for their priests to celebrate masses for the dead when requested by their friends.<sup>80</sup> Prelates were told on 12 December 1184, not to deduct a quarter of the goods left by someone in a will, who was buried in the Hospital. Hospitallers' horses and weapons were to be exempted from tax for defense.<sup>81</sup> A Papal indulgence for forgiveness of sins was given for the defense of the Holy Land which emphasized the need for the knights and encouraged their work. Yet another bull declared that no one was to oppose any Hospitaller,

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<sup>75</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 634.

<sup>76</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 640.

<sup>77</sup> Delavillele Roulx, *Cartulaire*, vol. 1, no. 682.

<sup>78</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 698, 700..

<sup>79</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 702.

<sup>80</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 705.

<sup>81</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 706.



who was not excommunicated, from collecting alms.<sup>82</sup> Lucius also issued over seventy bulls for the Hospital between 1181 and 1185 renewing previous papal bulls.<sup>83</sup>

Of all the Papal bulls between 1178 and 1187 not one was written specifically for the Hospital in Jerusalem or for its serving brothers, except for general references to serving poor pilgrims. This contrasted directly with the previous papal support which had pointed so obviously to the need to concentrate more on the work of the serving brothers.

As the number of knights or military brothers increased, they forced a change to the Order's main objectives. Money was directed from the caring, social and medical work of the serving brothers and this caused a division to form between the knights and the other brothers. Their influence increased to such a degree that they gradually assumed control of the Chapter. The Order's wealth allowed it to contribute to the defense of the Frankish states and to make the knights an important part of their forces.

The discontent, which smouldered under Gilbert d'Assailly, came to a head after the Egyptian debacle of 1168, when he resigned unexpectedly in late 1169 or early 1170. As those most concerned for the caritative service to the poor and the sick, the serving brothers then led the way in recalling the Order to its original intent. This resulted in Alexander III's bull of 1168-1170,<sup>84</sup> which demanded that it return to its first duty of serving pilgrims, the poor and the sick.

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<sup>82</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 711, 712.

<sup>83</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 785, 789, 810, 811.

<sup>84</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 434.

He declared that the exercise of arms was contrary to the customs of the Hospital and against the intention of its founders which illustrated the basic concerns of the serving brothers.

Alexander III resolved the stalemate which resulted after Gilbert's resignation by accepting the election of Cast de Murols in 1172. However, as well as reinforcing the primary functions of the Order, he wanted the knights to continue their military duties unhindered. The knights were quiet under Cast de Murols and Joubert but their importance was recognized under Roger des Moulins as Saladin became active. The *caritative* work of the brothers continued but became overshadowed by the importance of defending the Holy Land.

Unfortunately most critics of their wealth, political influence and papal support of the Order, did not appreciate the dire nature of the military situation in the Holy Land. William of Tyre was willing to criticize the Order but also realized the precarious position of the Franks. His chronicle is replete with forboding of imminent catastrophe. Alexander III, however, discerned the needs of the Franks and supported the knights. Even though the continued backing of the Papacy could not save the Jerusalem Hospital from capture by Saladin, the Order's European wealth did allow it to continue its caritative ministry in Acre later, as well as continuing to support the knights.

## Chapter 9

### The Religious Life of Service

The most important aspect of any caritative work is the source from which it receives its inspiration and motivational force, and this was especially true of the history and caritative functions of the serving brothers of the Hospitallers. The use of the word “history” is important since it conveys the idea of a continuing work carried out over time. Because of this, the Hospitallers were strengthened morally in difficult times, as in easier ones, to continue their caritative work. The spiritual functions of their life and work, lying behind their social and later medical endeavours, are important.

The Order has left only limited written evidence for the religious life and work of the serving brothers. What is available is found in some papal bulls, as well as in the Rule of Raymond du Puy, the Statutes of both Jobert and Roger des Moulins, and the records of visiting pilgrims. Two other sources are valuable which assist in describing the work and organisation of the Hospital in Jerusalem.

The first is a manuscript in the Bavarian State Library in Munich first noticed by Berthold Waldstein Wartenberg.<sup>1</sup> This is the report of the Unknown Pilgrim of his visit to Jerusalem and the Hospital of St John. The document had been folios 132v-139v of Codex Vat. Lat. 4852, which Delaville le Roulx left out from his *Cartulaire des Hospitaliers*. Kedar transcribed it in the article, “A twelfth-century description of the Jerusalem Hospital”.<sup>2</sup>

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<sup>1</sup> Waldstein-Wartenburg, *Die Vasallen Christi*, pp. 112-118.

<sup>2</sup> Kedar, “Jerusalem Hospital”, pp.3-26.

The second is folios 83r-104r of Codex Vat. Lat. 4852, a set of Hospital regulations in Old French. Delaville le Roulx also left this out of his *Cartulaire*. Klement has dated it to 1177-83. Both of these two texts mentioned were compared by Edgington and found to vary in detail, although they are essentially in agreement.<sup>3</sup> She included a transcription and translation of it in “Administrative Regulations for the Hospital of St John in Jerusalem dating from the 1180s”.<sup>4</sup>

Because of the close connection between the Order and St Mary of the Latins, the organisation of the Hospital was based upon an adaptation of the Benedictine Rule and in reconstructing the inside working of the Hospital the monastic routine of the Benedictines must be born in mind. The Hospitallers conducted their religious life of service under obedience to their Rule, regulated by Chapter meetings.<sup>5</sup>

Riley-Smith drew attention to the importance of the Hospitallers’ spirituality and to the fact that they remained professed religious in their daily living. In Jerusalem, as elsewhere, they lived in a community in imitation of Benedictine monasteries and their lives were controlled as in any religious order. The daily office was performed and they originally slept together in dormitories, although in the thirteenth century they began to use individual cells. They ate together in a refectory and at various times followed strict fasting.<sup>6</sup> In their houses and cassals they lived apart from any mercenaries or servants who performed the necessary daily chores. Even so, the serving

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<sup>3</sup> Edgington, “Hospital of St John”, pp. X, XIV.

<sup>4</sup> Edgington, “Regulations for the Hospital”, 4 (pp. 23-37).

<sup>5</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

<sup>6</sup> Riley-Smith, “Hospital spirituality”, p. 2.

brothers organised and led the caritative work. They managed all the buildings within the Order's compound in Jerusalem.

The only reference to the religious life of the Hospital found in any of the foundational papal bulls of the Order was that which mentioned priests. In following the traditions of Benedict's Rule priests were essential in the Hospital for the performance of the various sacraments and religious services. At first the Order was only permitted the use of priests on a part time basis. Then in 1154 it was allowed to have its own priests in its various houses.<sup>7</sup> Priests heard confessions, conducted Masses each morning, as well as for dead brothers, for the sick and in private.<sup>8</sup>

The Hospitallers followed the Benedictines who allowed priests to become brothers, to pronounce blessings, and to celebrate Masses. A priest was to take his place according to the date of his entrance into the monastery although the abbot was able to rank him in a higher place if he considered him worthy and the Community agreed to it.<sup>9</sup> Hospitaller priests, however, were subject to the authority of the Chapter of the Order and the Pope during the twelfth century.<sup>10</sup>

Some of the priests' duties were outlined in Jobert's "The customs of the church of the Hospital of Jerusalem"<sup>11</sup>. Masses were to be conducted by the day and not begun in the dark and priests were to only chant one Mass a day, except for a burial or the Trental Masses said for deceased brothers.

<sup>7</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 130 [Innocent II, 'Quam Amabilis Deo', 7 May 1139-43]; *Cartulaire*, no. 226 [Anastasius IV, 'Christiane fidei religio', 21 Oct., 1154].

<sup>8</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 14; no. 504, *Consuetudines*, §§ 1, 5.

<sup>9</sup> McCann, *St Benedict*, ch. 66 (pp. 140, 141).

<sup>10</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 226 [Anastasius IV, 'Christiane fidei religio', 21 Oct. 1154].

<sup>11</sup> □ Delaville le Roulx, *Cartulaire*, vol. 1, nos 494, 627.

Two priests on these occasions were required and if no local one was available a stranger could be employed. If the celebrant on these occasions was a brother priest he was to be rewarded by receiving new clothes. When only one priest was available for the Trental he was given special consideration on Sundays, Easter and solemn festivals, and afterwards received his new clothes.

Gifts given to priests for their services during Trental were to belong to them rather than the House, although half of that given to stranger priests was to remain with the Order. Nothing was to be charged by priests for public and private Masses although they could retain any gift given to them freely by the brothers. A sixth of any payments for confessions was to be given to priests and clerics but in *casales* where there was only one priest and no “burgesses” any settlement was left to the discretion of the Commander of the house.<sup>12</sup>

Even though the purposes of Benedictine monasteries and the Hospital were entirely different, the activities of both were structured around the daily offices and Mass.<sup>13</sup> Every day of the week had a meaning relative to the Church’s Year and fitted into a pattern. In the Hospital the caritative work of ministrations to the sick was carried out within this daily, weekly, monthly and yearly plan.<sup>14</sup>

The Hospital followed the Benedictines in keeping the solemn festivals, *festas solemnia*. During Lent special emphasis was placed on assisting the poor. On any Sunday the feet of thirteen poor people were washed and each

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<sup>12</sup> □ Delaville le Roulx, *Cartulaire*, vol. 1, no. 504.

<sup>13</sup> □ McCann, *St Benedict*, chs. 8-20, 35, 38, 60; Delaville, *Cartulaire*, vol. 1, no. 627.

<sup>14</sup> □ Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 8; nos 504, 627.

was given a shirt, trousers, and new shoes. Each of five chaplains or clerics, was given three deniers among the thirteen poor persons, while the other of the poor received two deniers.<sup>15</sup>

The Hospital followed the Benedictine tradition of chanting the psalm *Laetare Jerusalem* on the fourth Sunday in Lent.<sup>16</sup> Hospitaller “clerics”, which term meant either priests or their assistants, chanted psalms over the bodies of dead brothers,<sup>17</sup> using the psalms in the same way as other monks, who chanted the Psalter for benefactors.

Benedict’s intent had been to foster living a Christian life within a monastery, he considered that monks were attending a school of the Lord’s service.<sup>18</sup> The Hospitaller ideal was to live a Christian life within a monastic situation with the prime motive of living as servants of pilgrims, the poor and the sick.<sup>19</sup> Both, however, organised their activities each day within the framework of the canonical hours. Serving brothers were expected to respect and include worship as part of their work for God, performing the *Opus Dei* by attending the daily and nocturnal offices in the same way as the Benedictines. Each of the seven offices every twenty-four hours in Benedict’s Rule had specified psalms and readings.

The Rule of Raymond du Puy, and “The customs of the church of the Hospital in Jerusalem” referred to the offices. Chapter eleven of the Rule decreed that brothers should eat in silence and not drink after Compline.<sup>20</sup> Chapter four of “The customs of the church of the Hospital in Jerusalem”

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<sup>15</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>16</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>17</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, Rule, ch. 14, no. 504.

<sup>18</sup> McCann, *St Benedict*, Prologue (pp. 12, 13).

<sup>19</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

<sup>20</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70.

referred to pilgrims or other Christians who died after Vespers. They were to be left in the Hospital with a light beside their biers. The next day before Prime they were to be carried to the church for the service and then buried in the cemetery following Mass.<sup>21</sup>

A daily routine may have been as follows. In place of the Benedictines' study time, the Hospitallers would have worked in the Hospital,<sup>22</sup> spending at least five hours a day working there. Most of the physical work of the Hospital would have been carried out between Tierce and Sext, and between None and Vespers. Before Tierce, and following Prime, the brothers may have been occupied with personal responsibilities and having breakfast. Then they may have utilised the two hours available preparing for the day ahead. No doubt arrangements were made for some brothers to take their turn caring for patients when most were otherwise occupied.

The sick were expected to participate in the liturgy of the Hospital and to join in celebrations on Holy Days and during sacred festivals. On Candlemas Day the Hospitaller was to give each sergeant a candle to carry in procession on the Feast of the Blessed Virgin Mary and the Presentation of Christ in the Temple. Ash Wednesday was commemorated by the brothers and laity present, processing among the patients singing psalms and the litany. At the altar a sermon was preached to the sick for their eternal salvation and then the prior and chaplains went among the patients to put ash on their foreheads.<sup>23</sup>

On the Monday of Rogationtide, when prayers were said for a

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<sup>21</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 504.

<sup>22</sup> McCann, *St Benedict*, chs. 8-18 (pp. 48-67).

<sup>23</sup> Edgington, "Regulations for the Hospital", 4 (pp. 32-3).



successful harvest, processions came to the Hospital from the town and the patients had silk covers placed over their beds. On special days such as Christmas, Easter and Pentecost, patients were given different food to help them enjoy the occasion. However, they also had to fast on the vigils of days such as St Lawrence, Our Lady, St Bartholomew, Pentecost, All Saints, and the Ember days in May.<sup>24</sup>

When the communion wine was given to the patients on Sundays they were covered with long and wide precious covers made of purple and silk and decorated with gold. The procession from the church went to the patients and stopped in front of the altar in the ward, where the Epistle and the Gospel were read to them, before the procession returned to the church.<sup>25</sup>

The evening procession around the wards was led by the *karanannier*, or brother in charge of the clothing room, holding a lighted candle. He covered the uncovered patients and exhorted them to be peaceful and reverent until the procession passed. Next came the brother *boutellier* who censured the area as he passed. Then came a serving brother who offered a prayer for all Christendom and the benefactors of the Hospital, and more especially for the most generous ones. The Hospitaller came next carrying a large lighted candle, followed by the prior, chaplains, clerks, the commander, brothers and sergeants from all their areas.<sup>26</sup>

The various buildings in the Hospitaller Quarter in Jerusalem covered an area of approximately 130m by 130m and included two basilicas called St Mary Major and St Mary Minor (or of the Latins) as well as the hospital and

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<sup>24</sup> Edgington, "Regulations for the Hospital", 4 (pp. 34-7).

<sup>25</sup> Edgington, "Regulations for the Hospital", 4 (pp. 32-3).

<sup>26</sup> Edgington, "Regulations for the Hospital", 4 (pp. 32-5).

other buildings. Among these was the church of St John the Baptist and another building to which was later added a bell tower. Other buildings were added later, perhaps a second hospital, a bathhouse, the house of the Grand Master, the dormitory and refectory of the brothers, stables, a granary, and possibly other buildings as well. Each of these buildings, where hundreds of knights, serving brothers, pilgrims and sick were sometimes housed, had to be maintained. The Hospital also had to be run, the kitchen organised, and horses watered, fed and groomed.<sup>27</sup>

The Hospitallers had a large organisation to organize and would have had much to do to conduct it efficiently. The Hospital building appeared to be more impressive than the Holy Sepulchre to many pilgrims.<sup>28</sup> John of Würzburg, who visited the Holy City in the 1170s, described the Hospital as having various rooms in which were housed an enormous multitude of sick, both men and women.<sup>29</sup> Theodericus, who visited Jerusalem around 1169, according to Huygens, saw many rooms with 1,000 beds and other materials for the poor and sick. He also described the actual structure of the Hospital as being incredibly beautiful.<sup>30</sup>

Aqua Bella is a semi-fortified Hospitaller building whose ruins remain a few kilometres west of Jerusalem near the road to Jaffa. Much conjecture has surrounded the building but it is in too isolated a position to have been a convent for nuns as suggested by Arab tradition. The archaeological evidence suggests rather that it was an infirmary for the sick, aged or wounded

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<sup>27</sup> Boas, *Jerusalem*, pp. 86-7.

<sup>28</sup> William of Tyre, *Chronicon*, 18, 3, 32-37 (vol. 63A, pp. 812-813).

<sup>29</sup> John of Würzburg, pp. 131-2, ll. 1276-1310; Riley-Smith, *Knights*, p. 57.

<sup>30</sup> Theodericus, pp. 157-8, ll. 465-482.

members of the Order. It may also have been used as a staging place for wounded returning to the main Hospital in Jerusalem.<sup>31</sup>

Although the Unknown Pilgrim did not mention the sources of supplies the Hospital needed the statutes did. Priors in both the West and the East were instructed to send each year to Jerusalem quantities of cotton sheets, cotton cloth for the coverlets of the sick, and felts, as well as sugar for medicines.<sup>32</sup> The Chapter General decreed that France and St Giles should send one hundred dyed sheets of cotton for coverlets for the poor sick as well as other gifts and supplies. The priors of Italy, Pisa and Venice, were to provide two hundred sheets of various colours, as were the bailiffs of Antioch, Tripoli and Tiberias, whereas the prior of Constantinople was to send two hundred felts to Jerusalem.<sup>33</sup> The designated casalia in the Holy Land, namely, Mount Gabriel, Sareth, Tuisinat, St Mary, Caphaer and Cola, supplied fruit, bucks, ewes, goats, pigs and hens for the sick.<sup>34</sup>

Financially the Chapter General decreed in 1181 that 1,500 *bezants* should be given to the brother Hospitaller to hire doctors and to purchase almonds for them. This money was to be divided and half given at “the procession at Easter” and the other half at “the procession of the Holy Cross”. Any money left over was to be used in the service of the “house”.<sup>35</sup>

The Unknown Pilgrim had written that upon arrival at the Hospital, and after confession, the sick were given *medicina celesta*, that is Holy Communion. In the Hospital the sick were given coats, furs and shoes to keep

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<sup>31</sup> Pringle, “Aqua Bella”, pp. 163-7.

<sup>32</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627 (Statutes of Roger des Moulins, 1181).

<sup>33</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627, (Statutes of Roger des Moulins, 1181).

<sup>34</sup> Edgington, “Regulations for the Hospital”, 4 (pp. 26-7, Codex Vat. Lat. 4852).

<sup>35</sup> Edgington, “Regulations for the Hospital”, 4 (pp. 26-27, Codex Vat. Lat. 4852).

them from the coldness of the marble floor and also to keep them clean. He also said that the private clothing of the sick was secured in sealed bags.<sup>36</sup> In “The confirmation by the Master Roger de Moulins of the things that the house should do”, of 1182, it was stated that a sheepskin coat should to be given to each patient, as well as a pair of shoes and a cap of wool for when using the latrines.<sup>37</sup>

The Rule of Raymond du Puy and the Unknown Pilgrim also agree on the treatment of the sick. The Rule also decreed that upon arriving at the Hospital the sick were to confess their sins and then receive Holy Communion. After they had been carried to a bed, they were given the food of the House and treated like lords. They were fed before the brothers had their own meals.<sup>38</sup>

After a new patient had confessed and received Communion, and had a meal, he was taken to “the room of the *karavane*”, which meant the place where the clothing was stored. He placed his clothes in a recognisable bag so as to be able to collect them when he left. The *karavannier* then gave him a pair of linen sheets, one cover, one pillow, one goblet, one spoon and one container for his wine. Next he was required to declare any money he had and to give it to the Hospitallier to keep safely. If he wanted to make a will he could have it witnessed by the Hospitallier or a serving brother. A legal will needed to be witnessed by at least one brother and the notary or a chaplain or another person and the notary was to redact it on parchment. The serving

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<sup>36</sup> Kedar, “Jerusalem Hospital”, fol. 135v (pp. 18-19).

<sup>37</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>38</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70 (ch. 16).

brother then explained the privileges or rights of the Hospital and that the patient was to consider his first duty was to be to the Hospital.<sup>39</sup>

At least twice a year, or according to necessity, the *karavane* was unlocked and stored clothes placed into a convenient place for checking. Patients examined them to identify their own and, if well enough, put them on and left the Hospital. Remaining patients returned to their ward and their clothes were stored away again in the *karavane*. If a patient could not find his clothes, the Hospitaller compensated him as best he could. If the patient was thought untrustworthy he was questioned as to the cost of his lost clothing and whether he had lost it in the House of the Hospital.

When this procedure was completed the clothes of the dead were separated from the rest and the next day the Hospitaller with his sergeants or trustworthy companions examined them to find money which may have been sew into them. Then they were separated into piles of woollen and linen clothes, breeches, robes, shoes and other items. The Hospitaller collected the best items and stored them for those who could not regain their clothes from the *karavane*.<sup>40</sup>

The Unknown Pilgrim provided a detailed description of the workings of the Hospital. According to him the buildings had eleven wards.<sup>41</sup> The pressures on the serving brothers may be comprehended when it is recalled that seven hundred and fifty men had to be nursed after the battle of Montgisard, in addition to the nine hundred sick already in the Hospital. In desperate situations the building could accommodate more than one

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<sup>39</sup> Edgington, "Regulations for the Hospital", 4 (pp. 28-9, Codex Vat. Lat. 4852).

<sup>40</sup> Edgington, "Regulations for the Hospital", 4 (pp. 34-5).

<sup>41</sup> Kedar, "Jerusalem Hospital", fol. 135v (pp. 18-19).

thousand patients,<sup>42</sup> and it was believed that this figure could be doubled in emergencies. The brothers would evacuate their dormitory to provide more room for the sick, finding a place on the ground to sleep themselves.<sup>43</sup>

The Unknown Pilgrim said that the beds were covered with linen, as well as a bedspread and cushions, so that the sick could be comfortable.<sup>44</sup> The Statutes of Roger des Moulins of 1182 stated that the beds were to be as long and as broad as most convenient for repose and that each should have its own coverlet and sheets.<sup>45</sup> Extra covers and rugs and also a pair of slippers were given to patients in winter.<sup>46</sup>

There is no detailed evidence for the actual daily routine followed by the Hospitallers. However, the patients received wine every morning after Mass, or sugar if they preferred it. While the servants (sergeants) were having breakfast, the Hospitaller and the serving brothers served the best food to the weakest patients. After the servants had eaten, a bell rang and they would use water and large towels to wash the patient's hands before giving them their breakfast of white bread and house bread and meat. The use of diet for the medical care of patients will be discussed in the next chapter. In the evening the patients were given wine again, and twice a week had salad. The table cloth was changed twice a month and some treats were given four times a week.

The actual nursing in each ward was done by a ward master and serving brothers, who supervised and organized the servants and lay people

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<sup>42</sup> Kedar, "Jerusalem Hospital", p. 8.

<sup>43</sup> Kedar, "Jerusalem Hospital", fol. 135v (pp. 18-19).

<sup>44</sup> Kedar, "Jerusalem Hospital", fol. 135v (pp. 18-19).

<sup>45</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>46</sup> Edgington, "Regulations for the Hospital", 4 (pp. 30-1).

employed by the Hospital.<sup>47</sup> According to Roger des Moulins Statutes of 1182 in every ward and place in the Hospital nine *sergeants* or servants were to wash the feet of the sick gently. They were also to change their sheets, make their beds and administer necessary and strengthening food to the weak. All this was to be carried out devoutly and obediently in every way for the benefit of the sick.<sup>48</sup> The Unknown Pilgrim said that there were twelve servants in each ward and added that, as well as making beds, they keep the patients clean and took them to the privy. At night two brothers worked the night shift “to ensure that nothing befalls our sick lords”.<sup>49</sup>

Nursing involved covering patients, sitting them up, and supporting them when they were walking. Some brothers were given the task of washing their heads and one brother, who was a barber, trimmed beards when necessary. Twice a week, these same brothers were supposed to wash the feet of the sick and cleaned their feet with pumice stone. Then, when meals were being distributed, delegated brothers sprinkled everyone with holy water and used incense.<sup>50</sup>

The Unknown Pilgrim provided more details of the nursing of the sick than the Hospital records. According to him each patient was given the same sized loaf of bread so that each one had the same amount. To make the bread more appetizing the type of bread was changed frequently.<sup>51</sup> He wrote that the food was carefully prepared by the cooks and served by the brothers and sisters and worthy pilgrims. The servers were to make sure that the meal

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<sup>47</sup> Kedar, “Jerusalem Hospital”, fol. 135r (pp. 17-18).

<sup>48</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>49</sup> Edgington, “Hospital of St John”, Codex 4852, fols 91r-91v (p. X)

<sup>50</sup> Kedar, “Jerusalem Hospital”, fol. 138r (p. 23).

<sup>51</sup> Kedar, “Jerusalem Hospital”, fol. 136r (pp. 19-20).

was suitable and if the food was poor, or the patients had little appetite, the nurses were required to offer them supplementary food which could be chicken, doves, lamb, or perhaps eggs or fish.<sup>52</sup>

“The confirmation by the Master Roger of the things that the house should do” of 1182 stated that the house was to give either pork or mutton to the sick on three days of the week. Those who were unable to eat meat were to be given chicken.<sup>53</sup> The Unknown Pilgrim said that the Hospital only gave meat on two days of the week and that the Treasury of the Hospital provided each ward with twenty to thirty gold coins per week for additional food. As well as other food, the staff regularly had to buy pomegranates, pears, plums, chestnuts, almonds, grapes and dried figs. They also bought vegetables such as lettuce, chicory, turnips, parsley, celery, cucumber, pumpkin, sweet melons and yet more.<sup>54</sup>

The Unknown Pilgrim also wrote that at night two brothers were assigned to each ward. They lit three or four lamps to ease the patients’ fears of illusions or insecurity. One of them went around the ward with a candle in his left hand and a wine jar in his right hand, calling out tenderly, “You lords, wine from God”, and then gave a drink to any who asked for it. The second brother walked around the ward calling out, “You lords, water from God”.<sup>55</sup>

When all had quenched their thirst, both brothers walked the ward calling out “Warm water, in God’s name”. They then washed the sick, without force but with mild persuasion. After doing so they walked around the ward continuously to watch over the sleeping patients. They covered the uncovered

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<sup>52</sup> Kedar, “Jerusalem Hospital”, fol. 136r (pp. 19-20).

<sup>53</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>54</sup> Kedar, “Jerusalem Hospital”, fol. 136r (pp. 19-20).

<sup>55</sup> Kedar, “Jerusalem Hospital”, fols 137v-138r (pp. 22-3).



and repositioned those lying uncomfortably. If necessary they called a priest and removed those who died.<sup>56</sup> The Statutes decreed that the biers of the dead were to be concealed in the same way as were the biers of the brothers meaning that they should have a red covering with a white cross emblazoned on it.<sup>57</sup>

The Unknown Pilgrim wrote, furthermore, that after the brothers had said nocturne they processed around the wards by candlelight examining each to find any wardens, brothers in charge, who may have been careless or disorderly. When the procession had finished one of them was appointed to supervise the wards for the rest of the night. He walked continuously through all the wards keeping an eye on all wardens, making sure that none were asleep, careless, or cruel when nursing the sick.<sup>58</sup>

At night sixteen servants, divided into two shifts of eight, were on duty to care for the patients. The first watch was from compline to midnight after which the second took over until daylight. Four were at one end of the “palace”, in the general ward, and four at the other end. Four servants in the room provided for frail patients and if the patients were weak they carried them to the privy chamber there and back.<sup>59</sup>

When necessary, the servants provided urinals then emptied them, rinsed them out and put them back under patients’ beds. If patients wet their beds the sergeants cleaned and wiped them and gently replaced their

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<sup>56</sup> Kedar, “Jerusalem Hospital”, fol. 137v (pp. 22-3).

<sup>57</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>58</sup> Kedar, “Jerusalem Hospital”, fol. 138r (p. 23).

<sup>59</sup> Edgington, “Regulations for the Hospital”, 4 (pp. 32-3).

bedclothes with soft and fine white linen sheets. They did this night and day whenever it was necessary and the serving brothers also did the same.<sup>60</sup>

If the patrolling brother found a mistake in the nursing care, he was to correct it immediately. When necessary, he was permitted to sentence a guilty warden to flagellation on the following day. If a warden was repeatedly found to be wanting he was suspended from service and replaced by another brother. A guilty warden was sentenced by the Hospitaller, or his deputy, who had jurisdiction over all nursing and medical staff. Punishment was to be imprisonment for forty days on bread and water.<sup>61</sup>

As well as the main Hospital the Unknown Pilgrim mentioned a hospital for women in a separate building and referred to the nurses as mothers of St John and nuns. This may have been a reference to the convent of St Mary Magdalene. The female hospital was mainly a maternity ward in which mothers in childbirth were given warm baths and all they needed for bodily hygiene. The commissioner of the hospital provided napkins for new-born babies, who were laid in cradles alongside their mothers.<sup>62</sup>

Myra Struckmeyer has drawn attention to Adelaide, the first known sister of St John, who in 1146 was made a member of the Order by the chapters of Saint-Gilles and Trinquetaille. She donated all her possessions to the priory of Saint-Gilles for her redemption and that of her children before being initiated as a *soror*, and spending the rest of her life serving in the Hospital at Jerusalem, where she died.<sup>63</sup>

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<sup>60</sup> Edgington, "Regulations for the Hospital", 4 (pp. 32-3).

<sup>61</sup> Kedar, "Jerusalem Hospital", fol. 138r (p. 23).

<sup>62</sup> Kedar, "Jerusalem Hospital", fol. 139r (pp. 24-5).

<sup>63</sup> Struckmeyer, *Female Hospitallers*, p. 2, citing P. A. Amargier, ed., *Cartulaire de Trinquetaille* (Gap, 1972), no. 110 and J. Raylaud, *Histoire des grands prieures et du prieuré de Saint-Gilles*, vol. 1, (Nîmes, 1904), p. 54; Delaville le Roulx, *Cartulaire*, vol. 1, no. 54.

If a mother was poor, very ill, or harshly negligent with her infant, the baby was given into the charge of a wet nurse. As soon as the health of the mother improved the child was returned to her, though no later than two weeks after birth. If an impoverished mother was unable to raise her child, the Master of the Hospital visited her and arranged for the baby to be transferred to the care of a foster mother. According to the Unknown Pilgrim this situation arose frequently and the Hospital supported up to one thousand children each year at a cost of twelve ‘talents’, probably gold Saracenta bezants of the kingdom, each.<sup>64</sup> “The confirmation by the Master Roger of the things that the house should do” of 1182 decreed that little cradles were to be made for babies of pilgrim women born in the House in order to ensure that by lying separately to the mother babies were not endangered by their mother’s restlessness.<sup>65</sup>

There is similarity between the report of the Unknown Pilgrim and the bull *Quam amabilis Deo* of 7 May 1139-43, in that in exhorting prelates to support the Order, Innocent II praised the Hospitallers for serving not only patients within the Hospital but also those who were ill but living outside its confines. Evidently the Pope knew that serving brothers collected sick from outside the Hospital and carried them to safety within. He admired the cheerful way in which this service was carried out and the personal care given to the patients when in the Hospital itself.<sup>66</sup>

Not only did the serving brothers minister to the sick, they also provided social services to the needy and poor, especially in Jerusalem. “The

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<sup>64</sup> Kedar, “Jerusalem Hospital”, fol. 139r (pp. 24-5).

<sup>65</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>66</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 130, ll. 8-12.

confirmation by the Master Roger of the things that the house should do” stated that all children abandoned by their parents were to be received and nourished by the Hospital and that couples who wished to marry, but who had nothing with which to celebrate their marriage, were to be given two bowls, *escuelles*, or the rations of two brethren.<sup>67</sup>

In his description of the social work of the serving brothers, the Unknown Pilgrim wrote that foundling children were brought to the Hospital by people who found them. Sometimes single mothers with forehead covered, single parents or the sick, would leave their infants at the Hospital. Other mothers with twins would keep one baby and leave the other with the Order. These babies were handed over to nurses. The Unknown Pilgrim claimed that, “...even if there were a thousand of these nurses they all received the same help”. They were given twelve gold coins a year and each major holiday they had a meal equal to that of the brothers in quantity and variety.<sup>68</sup>

These nursing foster mothers were watched carefully and had to bring their children to the Hospital often, where the sisters of the house examined them. If a child was found to be neglected, it was given another nurse. The Unknown Pilgrim wrote that these children were called “children of blessed John”. On reaching maturity they had the choice of either serving the one who had raised them, the Order, or of embracing “the seductive allurements of the frivolous world”. Because of this good work Innocent II called the Hospital a “Father of Orphans”.<sup>69</sup>

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<sup>67</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>68</sup> Kedar, “Jerusalem Hospital”, fol. 139r (pp. 24-5).

<sup>69</sup> Kedar, “Jerusalem Hospital”, fol. 139v (pp. 25-6); Delaville le Roulx, *Cartulaire*, vol. 1, no. 122.

The Hospital also had a brother shoemaker, *cordoisier*, with three servants who repaired old shoes, *soliers*, donated for the love of God. The Almoner also had two servants to repair old robes to be given to the poor. He also gave twelve *deniers*, silver pennies to any prisoners newly released by the Muslims. In addition, thirty poor people were fed every day for the love of God. Among these were five clerics who would eat with the convent or community of brothers. The other twenty five would eat before the brothers. On three days of the week the brothers gave alms to all who came asking for food. They were given bread, wine and cooked food.<sup>70</sup>

Barber also has pointed to the Hospitallers accepting all who needed help and care, referring to the grant by Count Joscelin of Edessa in 1134 to the Hospital in order that “the poor and sick, widows and orphans” would be “cherished and protected from want and poverty and molestation by the infidel”.<sup>71</sup>

Both John of Würzburg and Theodericus commended on the caritative ministry offered to pilgrims and the sick. John wrote of the very great expense incurred in the running and upkeep of the Hospital.<sup>72</sup> Theodericus remarked on the Hospital’s generosity in giving refreshment to the poor and sick as well as on how devoted were those who ministered to them. He was so impressed by what he saw that he exclaimed it was difficult to tell how beautiful were the buildings of the Hospital as well as the generosity, care and service offered to the patients.<sup>73</sup> The praise of these pilgrims for the work of the serving brothers reflected the high regard in which the Hospital was held.

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<sup>70</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>71</sup> Barber, “Charitable and medical activities”, p. 155; Delaville le Roulx, vol. 1, no. 104.

<sup>72</sup> John of Würzburg, p. 131, ll. 1279-1289.

<sup>73</sup> Theodericus, pp. 157-158, ll. 466-476.

Nikulás of Pverá, a pilgrim to Jerusalem around 1140, described the Hospital as “..the most magnificent in the whole world”. Another pilgrim visiting between 1128 and 1137 reported on the *xenodochium* and the *nosokomion* and explained that *xenodochium* translated meant a refuge for travellers and poor people while *nosokomion* was the hospice which cared for the sick people taken in from the squares and alleys. A “Guide paper to Jerusalem” in *Jerusalem Pilgrimage*, by Wilkinson, Hill and Ryan, reported that the church of St John Baptist was famous for its relics, and admired it because it performed the six corporal works of mercy.<sup>74</sup>

The six corporal works of mercy were taken from St Matthew’s Gospel in a passage which describes the Last Judgement. Those who performed these acts were the good, and received their reward from the Lord. He commended those who had fed the hungry, given drink to the thirsty, welcomed the stranger, clothed the naked, and visited the sick and those in prison.<sup>75</sup>

The report of the Unknown Pilgrim went further than the comments of both John and Theodericus. He was so impressed by the work of the serving brothers that he was inspired to write about Christian charity or love. He commenced with the human need for salvation and God’s plan. The concern and love of God was shown in the events of Jesus’ miraculous conception and birth, and also by his miracles, rejection and crucifixion.<sup>76</sup> At that time

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<sup>74</sup> Nikulás of Pverá, *Jerusalem Pilgrimage*, p. 217, also *Work On Geography*, p. 200 and *Second Guide*, p. 239.

<sup>75</sup> *Matthew*, 25. 34-46.

<sup>76</sup> Kedar, “Jerusalem Hospital”, fol. 132v (p.13).

Peter was told to sheath his sword as this was not part of God's plan, and Pilate was told that God's kingdom was spiritual and not physical.<sup>77</sup>

People should therefore not be insensitive to God's real purposes since he has prepared better things for the world and they should love their neighbours. God has suffered because of man's rebellion and wants peace for all and has provided good gifts and healing for humanity and the greatest gift was his Son. Love is greater than prophecy, knowledge or faith and even if there is suffering love will eventually triumph.<sup>78</sup>

According to the Unknown Pilgrim some have allowed love to grow cold, but not in the Hospital of St John. John the Baptist was great because he served Christ and ministered to the poor. Similarly he wrote, "...it is most fitting for the House of Charity, the forerunner of all virtues, to take the Lord's precursor for its patron".<sup>79</sup> He stated that his description of the Hospital's nursing care was based entirely on his own observations,<sup>80</sup> and that whatever the infirmity of the poor or sick, or whoever needed another's care to recover health, or whoever needed help to eat or to walk, all were attended to by the brothers. No matter what the illness, whether it affected the whole body or part of it, no duty of care was ever denied. The only exception was for those suffering from leprosy.<sup>81</sup>

According to the Pilgrim's evidence the Hospital's caritative mission was founded upon belief that God cared about people's need rather than their background or position thus leading the Hospital to attend the sick of every

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<sup>77</sup> Kedar, "Jerusalem Hospital", fol. 133r (p.14).

<sup>78</sup> Kedar, "Jerusalem Hospital", fols 133r, 133v, 134r, 134v (pp. 14 –17).

<sup>79</sup> Kedar, "Jerusalem Hospital", fol. 134v (p. 17).

<sup>80</sup> Kedar, "Jerusalem Hospital", fol. 135r (pp. 17-18).

<sup>81</sup> Kedar, "Jerusalem Hospital", fol. 135r (pp. 17-18).

nation or condition or sex. None were denied attention and Muslims, Jews and all comers were accepted. No matter of what rank or class every person was considered to be worthy of Christ's assistance and all were accepted for care and so that they might convalesce.<sup>82</sup>

Another aspect of the work of the Hospitallers was in giving the dead Christian burial in consecrated ground or enclave. At Jerusalem they were buried in a communal cemetery at the Hospitaller Church of St Mary in Aceldama outside the city where they were placed in graves and also in an underground building. Theodericus mentioned the place and that a brother Adolf from Cologne was buried there.<sup>83</sup> The church and land were given to the Order by Patriarch William I of Jerusalem in 1143.<sup>84</sup> The site was examined and described by Schick in 1892.<sup>85</sup>

The Hospitallers, also ransomed prisoners from the Muslims, an activity not confined to them alone. Forey has pointed to brothers who negotiated for their own freedom in the twelfth and thirteenth centuries when they surrendered their castles.<sup>86</sup> However this was not always the case and many brothers remained in prisons. In 1196 Geoffrey de Donjon, the Order's master, appealed to Sancho of Navarre, that "the voice of our captive brothers calls to you from prison".

The ministry of the Hospitallers, and particularly the devotion of the serving brothers, grew out of the caritative work of the Benedictines of St Mary of the Latins. From their monastic culture the Hospitallers gained their

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<sup>82</sup> Kedar, "Jerusalem Hospital", fol. 135r (p. 18).

<sup>83</sup> Theodericus, pp. 146-147, ll. 122-128.

<sup>84</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 150.

<sup>85</sup> Schick, "Aceldama", pp. 285-289.

<sup>86</sup> Forey, "Ransoming of captives", pp. 260, 264, 274.



motivation and the reason for their service of care and assistance to pilgrims and the poor visiting the Holy Places. The pilgrims' religious beliefs and their gratitude for the service given, at first by the Benedictines and then by the Hospitallers, led to the initial support for the Order and the development of its wealth.

The ideas of the serving brothers originated in the religious milieu of the West. Although the Rule of Raymond du Puy was based on a monastic behavioural pattern, it was written within an atmosphere of wider religious belief. A clear creedal statement was included in neither the Rule nor other early texts of the Hospital, nor was any detailed religious life outlined for the brethren. However a definite religious framework was assumed. An unwritten curriculum assimilated from the Benedictines lay behind the life and witness of the Hospital.

Because the Hospitallers came into existence to minister to a pressing need, their faith was shown chiefly by a compassionate reaction to a particular situation. Theirs was an exhibition of Christian love which left little time for reflection or study. The Franks occupied territories continually under threat from brigands and Muslim raiding parties operating within, as well as from invasion without. As a result the Hospitallers were called upon not only to care for the poor and sick pilgrims but also to contribute to the defence of the Frankish frontier. Their time was occupied with action, rather than contemplation.

In a letter to Pope Innocent III a monk named Angehöriger explained that he had joined the Order to travel and visit the Holy Land. Prior to that he had been an Augustinian canon and he requested the Pope to be allowed to

return to his previous order because he had found that the Hospitallers were active rather than contemplative like other monks or canons, or as strict as the Augustinians.<sup>87</sup> This had become a burden upon his soul. He was apparently surprised by the activities of the Hospitallers and preferred study and prayer. This also suggests, incidentally that the Hospitallers were not connected closely to the Augustinian canons of the Holy Sepulchre, as they were referred to as an independent Order.

This is not to say that the Order of St John did not contain any literate Brethren, as de Jong has claimed that the second half of the twelfth century was a period in which Latin was becoming more easily available in medieval cities. This had led to the status of converts to monastic orders becoming much improved<sup>88</sup>. However, the military orders did not expect their brethren to be necessarily literate.<sup>89</sup>

The Hospitallers' ideals were inculcated from monasticism. The basic framework of the Rule of Benedict was followed with regard to meetings of the brethren, behavioural patterns, keeping of the offices, conducting of various masses, and observing the church year. From that point, however, the similarity ended and the Hospitallers adapted Benedictine practices to their own needs.

Benedict listed seventy-three examples of what he considered to be "good works", among which were relieving the poor, clothing the naked, visiting the sick, burying the dead, helping in a time of trouble and consoling the sorrowing. These applied to all travellers, especially those on religious

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<sup>87</sup> Nicholson, *Knights Hospitaller*, p. 87; Innocent III, *Die Register Innocenz III*, no. 54 (vol. 2, p. 101).

<sup>88</sup> De Jong, *In Samuel's Image*, p. 297.

<sup>89</sup> Nicholson, *Knights Hospitaller*, p. 86.

journeys.<sup>90</sup> From these ideals the Order received its inspiration to carry out its work of *caritas*,<sup>91</sup> and thus became an example to other orders, such as the English order of St Thomas of Acre.<sup>92</sup>

Although the Hospitallers did not have a detailed devotional rule, their aim was to fulfil their religious obligations by providing the type of practical support recommended by St Benedict. This concept of serving God by acts of love drove them to reach out into the community to care for the poor in various circumstances of need.

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<sup>90</sup> McCann, *St Benedict*, chs 4. vs 14-19, 53 (pp. 26-7, 118- 123).

<sup>91</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 70, ch. 1.

<sup>92</sup> Forey, "The Military Order of St Thomas", p. 487.

## Chapter 10

### The Hospital

The Hospital of St John was the first Western institution to offer freely to all on a large scale a combination of hostel, nursing home and medical care by the standards of the day,<sup>1</sup> and it is important to understand the situational and historical factors which helped to bring this about. It had been founded at a time when caritative care motivated by religious incentives was part of Western pilgrimage and monastic culture. It had the dedicated service of serving brothers who provided the organization required as their *Opus Dei*, work of God. The care and hospitality it provided to travellers to the Holy Land provoked gratitude in many and this brought gifts and wealth.

A number of questions relating to a hospice and nursing home developing into an institution which created a medical arm arise, such as, when did the word *hospitale* come to apply to a medical hospital? Did outside influences assist in developing the work of the Hospital and did these come from the West or the East? What were the standards which prevailed in the East which the Hospital attained? How did the Hospital compare to Eastern hospitals, and what were the similarities and differences? These are questions which need to be considered to elucidate the context of the caritative functions of the serving brothers.

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Amouroux, "Creation of hospitals", p. 38.

However, it should be understood that the history of hospitals, and indeed of medicine, is not the primary concern here. This and the following chapter do not pretend to be at the cutting edge of research in their respective fields. Their purpose is simply to cast light on the work of the serving brothers during their time in the Holy Land. However, it has been necessary to trace the hospital practices of the Western, Byzantine and Muslim cultures to find out the influences which were brought to bear on the Jerusalem Hospital. This will also reveal the creative work of the serving brothers in overcoming entrenched habits in order to undertake fresh organizational arrangements and knowledge.

The serving brothers developed practices based upon those of the Benedictine monks, and their own desire to serve the sick. In doing so, they were not performing good works in order to gain salvation,<sup>2</sup> but because of their obedience to their ideals. In their caritative functions they endeavoured to practice the Benedictine Rule which stated in its Prologue that “we must always so serve him (Christ) with the gifts he has given us, that he may never as an angry father disinherit his children”. Benedict had said, “Such men as these, fearing the Lord, are not puffed up on account of their good works, but judging that they can do no good of themselves and that all cometh from God, they magnify the Lord’s work in them”.<sup>3</sup> The Unknown Pilgrim saw in the serving brothers a living example of such sentiments and wrote glowingly of their caritative work.<sup>4</sup>

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<sup>2</sup> Luttrell, “From Jerusalem to Malta”, p. 15; Lagleder, *Ordensregel der Johanniter*, p. 76-8.

<sup>3</sup> McCann, *St Benedict*, pp. 6-7, 10-11.

<sup>4</sup> Kedar, “Jerusalem Hospital”, fols 132v-135r (pp. 13-18).

Besides their many other duties the Infirmarian and brothers began to arrange the employment of doctors, servants and general domestics as well as drawing up rosters and responsibilities.<sup>5</sup> The brothers supported the doctors and other staff in providing articles and materials necessary for care and nursing in the wards.<sup>6</sup> In the eighty two years between 1100, when the hospice was beginning to expand, and 1182, when it appeared in the statutes that it had become a hospital, the serving brothers of the Order played an important role in its transformation. In that period a hospice for the recuperation of poor pilgrims became a hospital which offered contemporary Eastern medical treatments and services. The culmination of this was seen in brief outline in the statutes of Roger des Moulins of 1182.<sup>7</sup> The various nursing and medical pressures, as well as the circumstances of the Kingdom, caused this change.

Different words were used for early hospices and medical hospitals and the type of service each offered. During the eleventh and twelfth centuries large numbers of *hospitalia*, hospices, sprang up along pilgrim routes in Europe to provide accommodation for pilgrims.<sup>8</sup> However, the word *hospitale* was used in the West for a number of institutions.<sup>9</sup> Some serviced patients with leprosy, chronic and incurable sickness, the blind and disabled and those unable to help themselves, meaning those for whom no medical care was considered possible.

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<sup>5</sup> Edgington, "Hospital of St John", pp. X-XVI.

<sup>6</sup> Kedar, "Jerusalem Hospital", 135v (pp. 18-19).

<sup>7</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 494, 627.

<sup>8</sup> Mitchell, *Medicine in the Crusades*, p. 53; Riley-Smith, *Knights*, p. 40; Luttrell, "Hospitallers' medical tradition", p. 76; Richard, "Hospitals", pp. 89-90.

<sup>9</sup> Mitchell, *Medicine in the Crusades*, p. 52; Jones, "The clinic in three medieval societies", pp. 86-101.

Others provided homes for the frail and elderly, and yet others housed pilgrims and travellers for short stays.<sup>10</sup>

Up to the eleventh century monastic infirmaries were the main source of medical aid for the poor sick. In what is today modern England, France, Italy and Spain nobles and the wealthy preferred to have doctors to care for them at home and there is no clear evidence for doctors and treatment of the sick by Eastern medical theory in *hospitalia* before the thirteenth century.<sup>11</sup> Before then, although monastic infirmarians had some basic knowledge of medicine, they had not reached a standard of theoretical medicine found in the East.<sup>12</sup>

In England infirmarians were monks who up to the twelfth century were regarded as *medici*, physicians.<sup>13</sup> In the eleventh century there were successful monastic physicians such as abbot Baldwin of Bury St Edmunds, and Faritius of Abingdon, who may have studied in Salerno.<sup>14</sup> Monasteries began to train their own physicians during the eleventh to thirteenth centuries and were available to assist the outside sick. As well, some monasteries had separate infirmaries for the general populace.<sup>15</sup>

There were English monasteries which admitted the sick, other than those with leprosy, and made efforts to provide cures. One such was the hospital of St

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<sup>10</sup> Carlin, "Medieval English hospitals", p. 21; Prescott, *English medieval Hospital*, pp. 1-2.

<sup>11</sup> Mitchell, *Medicine in the Crusades*, p. 53; Epstein, *Wills and wealth in medieval Genoa*, p. 178; Miller, *Birth of the Hospita*, p. 5; Orme and Webster, *English hospital*, 1995, pp. 21-23; Hörander, *Prodromos*, Poem XLVI, p. 431.

<sup>12</sup> Rubin, *Medieval English medicine*, pp. 97-149.

<sup>13</sup> Harvey, *Living and dying in England*, p. 81.

<sup>14</sup> Rubin, *Medieval English medicine*, pp. 181-2, citing William of Malmesbury, *De Gestis pontificum, Anglorum*, 156; *Chronicon monasterii de Abingdon*, vol. 2, p. 44.

<sup>15</sup> Rubin, *Medieval English medicine*, pp. 179-80.

Mary Magdalen at Kings Lynn, Norfolk, founded in 1145, where “whole” patients as well as lepers were admitted.<sup>16</sup> It was believed that sin caused sickness and therefore healing was second to confession, the sacrament, prayer, and holy water for cleansing.<sup>17</sup> At first, monastic medical theories and applications were not uniform in England. However, the number of monasteries with medical hostels in England multiplied during the twelfth century and by 1200 there were around 250.<sup>18</sup>

Although not known to have been used in practice, the ninth-century plan for the Anglo-Irish monastery of St Gall in Switzerland reflected the ideal monastic practice of its time. It gave a prominent and comprehensive place to the infirmary and illustrated comprehensive provisions for the sick. Rooms were provided with fire-places and there was a ward for seriously ill patients as well as rooms for blood-letting. The infirmarian or physician had a house, a consulting room, and a dispensary with a large herb garden laid out for sixteen herbs. Among those mentioned in the plan were rose, mustard, fennel, lily, sage, mint, pennyroyal, and rosemary.<sup>19</sup>

In Italy hospitals and monastic infirmaries were mostly for the poor, needy and pilgrims. The hospital attached to the monastery at Cava, however, did treat the sick and in 1129 was described as a *nosocomium*, a place for treating the

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<sup>16</sup> Rubin, *Medieval English medicine*, p. 167.

<sup>17</sup> Rubin, *Medieval English medicine*, pp. 173, 178, 180, 183, citing D. Knowles, ed., trans., *The monastic constitutions of Lanfranc* (Edinburgh, 1951), pp. 199 ff.

<sup>18</sup> Mitchell, *Medicine in the Crusades*, p. 53.

<sup>19</sup> Horn and Born, *St Gall*, vol. 1, pp. 11-12.



sick rather than as a *hospitalium*.<sup>20</sup> *Nosocomium* was derived from the Greek *nosokomeō*, to care for the sick.<sup>21</sup> Only rarely was an infirmary associated with the performance of purely medical functions.

Although there were *medici* in Sicily, Apulia, Naples, Salerno, Lombardy and northern Italy from the ninth-century, there were no professional standards until the eleventh century. The term *medicus* was used in a general sense to apply to anyone who practiced medicine or surgery but did not imply any actual medical training by Eastern standards. The education of doctors at Salerno, the first Western medical school concentrating on theoretical medicine, was not established until the second half of the eleventh century.

Although some Western monastic libraries had manuscripts of Hippocrates, Galen, and Dioscorides, medical knowledge of the Greek and Islamic worlds was not a vital part of Western medicine. Salerno produced no influential doctors, no theoretical medical literature, and no arrangements were made for teaching medicine at that level. The eleventh century showed the first traces of medical literature at Salerno, however, the earlier texts are obscure and controversial, and most of them were of a practical nature dealing with the healing practices of local doctors.<sup>22</sup>

Not until Constantine the African translated some of Hippocrates' and Galen's writings from Greek and Arabic around 1077 did Greek or Islamic medical teaching began to capture the imaginations of teachers at Salerno.

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<sup>20</sup> Skinner, *Health and medicine in early medieval southern Italy*, p. 103, citing *Capitolare di Agrigento*, doc., 42.

<sup>21</sup> Skinner, *Health and medicine*, p. 103.

<sup>22</sup> Kristeller, "School of Salerno", pp. 145-6; Voigts and McVaugh, *Phlebotomy*, pp. 1-2.

Kristeller points out that “The declamations of Renaissance humanists and of modern nationalists should not blind us against historical fact that in the eleventh and twelfth centuries Arabic science was definitely superior to occidental science, including Salernitan medicine”.<sup>23</sup> Constantinian material was not fully utilised at Salerno until the second half of the twelfth century when Greek and Arabic medicine became the basis of medical instruction there.<sup>24</sup>

The first known Salernitan commentary on classical medicine was Maurus’ commentary on the Hippocratic thesis *Aphorisms*, said to be dated to the second half of the twelfth century. He is known through the several medical treatises carrying his name and was a most important Salernitan author.<sup>25</sup> By the middle to the later twelfth century, the Hospital in Jerusalem was employing doctors and this was too early for the School of Salerno to have influenced it.

The standard of medical practice in France was similar to other European countries and may be understood by fact that the first mention of “sanity facility” occurred in the thirteenth century and physicians became attached to hospitals only in the fourteenth.<sup>26</sup> This treatment of Western hospitals, although brief, does help to show that they were not established on the basis of theoretical Hippocratic medicine. What has been said about Western hospitals has not been greatly comprehensive as this would require a much longer thesis. It has rather

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<sup>23</sup> Kristeller, “School of Salerno”, p. 152.

<sup>24</sup> Kristeller, “School of Salerno”, p. 157.

<sup>25</sup> Kristeller, “School of Salerno”, p. 157.

<sup>26</sup> Amouroux, “Creation of hospitals”, p. 37; Imbert, *Les hôpitaux*, pp. 139-140; E. Wickersheimer, “Organisation et législation sanitaires”, *Archives internationales d’histoire des sciences*, pp. 694-8 ; Miller, “Knights of St John”, pp. 716-717.

been the aim to suggest what the Hospital of St John would have gained from its European background.

The standard of medical care offered by the Hospitallers after the occupation of Jerusalem would not have been much better than that in the Crusader armies. Edgington has suggested that the first generation of crusaders approached medicine in a practical way and may have had less to learn from native doctors than has been assumed. She shows that they used practical methods of treatment, and after overcoming excessive religious fears, caused by the first epidemic at Antioch, they approached illness and healing more rationally.<sup>27</sup>

The standard of medicine introduced by the Hospitallers was derived from the West so it would have taken some time for them to establish Eastern medical practices. However, the Jerusalem Hospital was in a different situation to European hospices. As well as assisting in local social work for the poor and giving care to pilgrims and the sick, it tended to wounded military brethren after they became part of the Order. This forced it to commence calling in doctors to carry out medical procedures which the serving brothers were not capable of providing.<sup>28</sup> Despite these developments medical doctors were not fully employed in the Hospital until around 1182, but from that date onwards the earlier Hostel may be called a medical Hospital, since it provided doctors and a more advanced treatment to some patients.

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<sup>27</sup> Edgington, "Medical knowledge", p. 326.

<sup>28</sup> Mitchell, *Medicine in the Crusades*, p. 55; Harvey, *Living and dying*, pp. 81-109.

Roger des Moulins recorded in his Statutes of 1182 that the Hospital was, “accustomed to keep four wise doctors who have care of the sick”,<sup>29</sup> which suggests that physicians had been working in the Hospital with the serving brothers before that date. The other question then becomes, when did the Hospital introduce doctors part time, before it employed them on a full time basis. The end of the second stage of the Hospital’s growth and the beginning of the third is a grey area. However, a number of pieces of evidence suggest an approximate date when doctors were first admitted into the Hospital.

The Hospital may have commenced employing doctors soon after 1130 when canon 5 of a Synod of Clermont declared that monks and canons were to concentrate on the care of souls and not be physicians of human bodies. This prohibition was reiterated as canon six of the Synod of Rheims in 1131, and again as canon 9 of the Second Lateran Council of 1139. The Council of Tours in 1163 issued a similar directive, giving as its reason that clerics were not to make money from their medical knowledge.<sup>30</sup>

In 1136 Roger II of Sicily referred to the poor and the sick of the Hospital in a donation of a church to the Order.<sup>31</sup> His use of the word *infirmus*, sick, suggests that some of those being cared for were afflicted by some kind of physical problem beyond the need for simple recuperation. Pope Innocent II also

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<sup>29</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>30</sup> Schroeder, *Disciplinary Decrees*, p. 201; Amundsen, “Medieval canon law”, pp. 22, 28-30.

<sup>31</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 119.

referred to *infirmi* in *Quam amabitis Deo* of 1139-43 and this again suggests that the Hospital was no longer merely a hospice or rest home for poor pilgrims.<sup>32</sup>

Anastasius IV's *Christiane fidei religio*, of 1154 was a significant bull, which may have had some bearing on the employment of doctors by the Hospital. It permitted the Order to use lay persons to serve in the Hospital and this meant that doctors could have been employed.<sup>33</sup>

Edgington's dating of the Unknown Pilgrim's visit to Jerusalem to the 1170s or 1180s suggests that the Hospital employed doctors before 1182 since he reported four doctors learned in physic (*quatuor medici phisicam docti*) working in the Hospital. He also referred to general practitioners (*practicantes theorici*), surgeons (*cyrugici*) and blood-letters (*minutores*), who tended wounded in the Hospital.<sup>34</sup> All of this suggests that the Hospital begun using doctors some time between ca 1130 and 1181, eventually leading to the appointment of doctors as medical staff. But not until doctors working by Eastern standards, were fully employed by the Hospital could it be claimed that it had become a medical hospital as well as a convalescent hospice.

As well as the question of when the transformation took place from a hospice to a hospital, there is also that of the essential difference between the two. Mitchell believes that the Hospital in Jerusalem was like hospitals of today in that it attended the sick and provided treatment according to the knowledge

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<sup>32</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 130; Niermeyer, *Lexicon*, p. 533.

<sup>33</sup> Dellaville le Roulx, *Cartulaire*, vol. 1, no. 226.

<sup>34</sup> Edgington, "Hospital of St John", pp. XIII- XIV; Kedar, "Jerusalem Hospital", 136v-137v (pp. 20-1)

and practice of the era.<sup>35</sup> Others disagree, however, and Edgington believes the evidence suggests that “the primary purpose of the hospital in Jerusalem, even in the 1180s, was to restore to health pilgrims and people who were suffering from exhaustion and malnutrition, and for old age or chronic ailments”.<sup>36</sup> Nevertheless, the Hospital was definitely employing doctors and treating patients by Eastern standards in 1182.

Because the Hospitallers began by using Western medical practices and then introduced Eastern ones, they must have been influenced by the rich traditions of both Byzantine and Muslim medicine and charitable caring.<sup>37</sup> Both cultures had long histories of building hostels and hospitals both for recuperation and also for medical treatment. The West had also had hospitals using simple medical practices and therefore the questions arise as to the degree to which the Order was influenced by its surroundings in Palestine, and by its inherited Western past and also what new practices it contributed .

Since the Hospitallers were connected with a monastery and chapter and were associated with pilgrims, their early work has been likened to that of Byzantine monasteries.<sup>38</sup> They came into close contact with Byzantine hospices and hospitals in the eleventh and twelfth centuries,<sup>39</sup> especially in Constantinople. By 1163, when Alexander III corresponded with Gilbert d'Assailly about a certain *Petrus, prior hospitalis* of the *domus* or *prioratus* of St

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<sup>35</sup> Mitchell, *Medicine in the Crusades*, p. 46.

<sup>36</sup> Edgington, “Hospital of St John”, p. XXI; Edgington, “Medical care”, pp. 32-3.

<sup>37</sup> Jones, “clinic in three medieval societies”, p. 86.

<sup>38</sup> Richard, “Hospitals”, p. 89.

<sup>39</sup> Luttrell, “Hospitallers in twelfth-century Constantinople”, pp. 227-8.

John in Constantinople, the Order had maintained a hospice in that city for some time.<sup>40</sup> Networks of hospitals called *xenodocheia* or xenons existed in the East before the First Crusade.<sup>41</sup> These were associated with monasteries such as St Catherine at Mt Sinai and St Theodosius between Jerusalem and the Dead Sea, which had hospices in Jerusalem, as well as in Jaffa, Ascalon, Gibelet, Nicosia and also Constantinople.<sup>42</sup>

Even if the Hospital in Jerusalem was initially inspired by Western hospices for pilgrims and the sick, it must also have known about Byzantine monastic traditions because of its close proximity to them.<sup>43</sup> At first it had a link to Constantinople through the Amalfitans and their business and religious interests. It may have been that they stayed in Constantinople with the Benedictines, to learn something of the *xenones* in that city. As well, Mauro of Amalfi was familiar with Greek culture and had established a hospice for Latins at Antioch around 1060 as well as in Jerusalem. His son Pantaleone di Mauro had a mansion in Constantinople. An Amalfitan church of San Salvatore was built there around 1062 and the Amalfitans also established a Benedictine monastery in Constantinople during the 1060s.<sup>44</sup>

Byzantine caritative care for the weak and sick by both nursing and medical methods had a long history stretching back to the early Christian

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<sup>40</sup> Luttrell, "Hospitallers in twelfth-century Constantinople", p. 225.

<sup>41</sup> Richard, "Hospitals", p. 91.

<sup>42</sup> Richard, "Hospitals", p. 91; Hofmann, "Sinai and Rom", p. 262; Tautu, "Acta Honorii et Gregorii", p. 2.

<sup>43</sup> Amouroux, "Creation of hospitals", p. 32.

<sup>44</sup> Luttrell, 'Hospitallers in twelfth-century Constantinople', pp. 227-8.

Church. Early Christians had shared and cared for each other. In the first century Christians in Antioch provided help for those suffering from a famine in Judea,<sup>45</sup> and Greek widows in Jerusalem shared food with Jewish ones at a time when believers pooled their money and goods.<sup>46</sup>

By the third century the Christian Church had become a patron of good works within the Greek-speaking world and in the following century the Church established xenons in Antioch (330) and in its hinterland.<sup>47</sup> St Gregory of Nazianzus (330-390) studied and wrote about medical topics and St Gregory of Nyssa (340-396) related various experiences with physicians regarding anatomy, physiology, pathology, therapeutics, clinical medicine and surgery.<sup>48</sup>

Caritative *xenodocheia* had also existed in classical Greece. The practice of Greek medicine had a long history extending back to Homer and had been maintained by family tradition. Allan has argued that Asklepios, the Greek god of healing, was akin to Christ in Greek religion and that “a synthesis or continuity” took place when the Greek Fathers called Christ a “physician”. In the fifth century this led to the title of “spiritual physician” being used for bishops.<sup>49</sup>

In the fourth century St Basil of Caesarea supervised a multipurpose institution providing care for the sick and poor as well as shelter for lepers and travelling pilgrims. Within twenty years of his death in 379, monks were serving as nurses under Patriarch John Chrysostom (347-407), of Constantinople, who

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<sup>45</sup> Allan, “Hospice to hospital”, p. 447; *Acts of the Apostles*, 11. 26-30.

<sup>46</sup> *Acts of the Apostles*, 6. 1-5.

<sup>47</sup> Birchler-Argyros, “Spitalgeschichte”, p. 51; Miller, “Birth of the hospital”, p. 61.

<sup>48</sup> Keenan, “Gregory of Nazianzus”, pp. 8-30; Keenan, “Gregory of Nyssa”, pp. 150-161.

<sup>49</sup> Allan, “Hospice to hospital”, p. 452.



fostered the establishment there of institutions similar to that of Basil. After Saint Ephraim had visited Basil he built an institution in Edessa which assisted famine victims who were then sheltered in the city under the patronage of the Church.<sup>50</sup> Approximately fifty years after the establishment of Ephraim's *xenodocheion*, Bishop Rabbula established *xenodocheia* in Edessa which were both hospices and medical hospitals.<sup>51</sup>

John Chrysostom recommended, that those suffering from bad health through living an urban life should use an *iatros*, physician, and praised the use of baths, physicians and medicines. He believed that medical knowledge was achieved through a long and extensive course of studies, which included studying Hippocrates and Galen and he wrote that a doctor needed *techne iatrike*, practical experience, as well as *pharmaka*, drugs and medicines.<sup>52</sup> After Chrysostom became Patriarch in 398 his biographer Palladios reported that he allocated his personal fund to the support of *nosokomeia* with physicians, nurses and cooks, which also catered as *xenodockeia* for travellers.<sup>53</sup>

According to Miller, tracing relationships between *xenones* and medical science in Byzantium is difficult between the fourth and fifteenth centuries because of the many unpublished texts and the problems of interpreting extant ones.<sup>54</sup> Constantelos, however, is more optimistic and sees real difficulties only

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50 Allan, "Hospice to hospital", pp. 452-3.

51 Allan, "Hospice to hospital", p. 453.

52 Frings, *Medizin und Arzt*, pp. 29-32.

53 Frings, *Medizin and Arzt*, pp. 29-32.

54 Miller, *Birth of the hospital*, p. 167.

between the seventh and the tenth centuries. He believes that the available evidence between the tenth and eleventh centuries is more specific.<sup>55</sup>

There were two *xenones* in seventh-century Constantinople which practiced rational or theoretical medicine. The *xenon* of St Sampson provided surgeons and a special section for patients with eye problems. At the Christodotes physicians worked in monthly shifts assisted by medical attendants, *hypourgoi*, who cared for patients at night. Each morning the chief physician made rounds through the various wards.<sup>56</sup>

In the ninth century, the emperor Theophilos (829-842) endowed a hospice and *xenones* for the poor in Constantinople.<sup>57</sup> A twelfth-century *xenon* in Thessalonica provided medical attention for bed-ridden patients as well as treating those who attended it by day. It was a place where, as well as patients seeking medical treatment those facing death also could be cared for.<sup>58</sup>

Something of the milieu of Byzantine medicine and hospitals may be gained from the experience of Theodore Prodromos who, in 1140, became ill in Constantinople. He was a well-respected philosopher, theologian and royal poet during the reigns of Alexios I (1048-1118), John II (1118-1143) and Manuel I (1143-1180). The years of his illness corresponded to those of the most intensive development of the Hospital in Jerusalem.

At first Prodromos called in an inexperienced private practitioner whose

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55 Constantelos, *Byzantine Philanthropy*, p. 170.

56 Miller, *Birth of the hospital*, p. 23; *Miracula S. Artemii*, p. 31.

57 Birchler-Argyros, "Spitalgeschichte", pp. 51-8.

58 Miller, *Birth of the hospital*, pp. 38, 96; Eustathios, *Espugnazione*, p. 146.

diagnosis failed to impress him, taking his pulse, feeling him all over, and diagnosing that he had a fever and plague. “Such are the physicians of great Byzantium!” exclaimed the poet. As Prodomos grew progressively worse he entered a hospital which was adjacent to the recently endowed *Pantocrator* monastery.<sup>59</sup> This had been founded by John II around 1136 and had a *triclinon*, or infirmary for the sick monks, within its walls and a *xenon*, or hostel for the care of the sick poor, outside the walls. The *typikon*, or rule, of the monastery described a special ward for those suffering from illness of the eyes, intestines, and other ailments.<sup>60</sup>

Comparison of the *typikon*, and *xenon* of the Pantocrator with St John is instructive.<sup>61</sup> In Constantinople the hospital had accessory structures around its walls, and rooms built onto the main structure, used for consulting and treating patients, which was similar to Jerusalem.<sup>62</sup> Although Jerusalem may not have had a library and lecture hall, as in Constantinople, there would have been a need for living quarters, a pharmacy, kitchen, bakery and storage areas as at the Pantocrator. Both would have had administrative and organisational sections and laundry facilities and certainly they each had a chapel and a cemetery.<sup>63</sup>

The *xenon* in Constantinople apparently had a total capacity of between one hundred and fifty and two hundred, and the largest ward had fifty beds, each of which had a mattress, sheets, a coverlet and pillow and two blankets in the

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<sup>59</sup> Risse, *Mending bodies*, p. 118; Hörandner, *Prodromos*, Poem XLVI, pp. 431-3.

<sup>60</sup> Matthews, *Pantocrator*, p. 44.

<sup>61</sup> Sterns, “Care of the sick brothers”, p. 68; Delaville le Roulx, *Cartulaire*, vol. 1, no. 494.

<sup>62</sup> Miller, *Birth of the Hospital*, p. 12.

<sup>63</sup> Butler, “Pantocrator”, Appendix 1: ‘The Typicon’, pp. 97-120.

winter. There was a total of seventy three carers, including twenty one physicians, forty six nursing assistants and six pharmacists. The physicians worked in shifts and there was a hierarchy of the doctors.<sup>64</sup>

According to the *typikon*, steps were also taken to satisfy the spiritual needs of patients.<sup>65</sup> The *xenon* had one chapel for men and another for women and provided religious services in addition to the worship of the monks in their associated monastery.<sup>66</sup>

Because the Hospitallers had a close relationship through the Amalfitans with the East, as well as the examples of Byzantine Hospices in the Holy Land, it would be expected that they knew something of their organization. However the Order of St John was situated also within the ambit of influence of Muslim medical traditions.

Because of this Toll has argued that Muslim medicine and hospitals influenced the Franks.<sup>67</sup> Muslim reasons for the establishment of *hīmāristans*, Persian for places for the sick, were different to those for the establishment of hospitals in the West and Byzantium. They were not established by monasteries or religious orders but by influential Muslims such as Caliph al-Manṣūr (754-775), who fostered Christian elites in Baghdad. Then under Harūn al-Rashīd a royal *himaristan* was opened in Baghdad in the 790s.<sup>68</sup>

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64 Miller, *Birth of the Hospital*, pp. 15-16.

65 Miller, *Birth of the Hospital*, p. 19.

66 Butler, *Pantocrator*, pp. 100-120.

67 Toll, "Arabic medicine and hospitals", pp. 36, 39.

68 Dols, "Myth and reality", p. 379.

*Hīmāristans* were mostly private institutions under the authority of Caliphs, amīrs and other rulers and run by physicians.<sup>69</sup> Their medical practices were influenced by Persian and Hindu therapeutics, as well as by practices inherited from the Greeks and new Muslim practices.<sup>70</sup> They may also have been influenced by the earlier *xenons* of the Byzantines,<sup>71</sup> since both Byzantine and Islamic doctors were dependent on accepted knowledge handed down from Hippocrates and Galen.<sup>72</sup>

By 1047 there was an endowed Muslim hospital in Jerusalem, which is presumed to have catered for Muslim pilgrims, in which patients were given potions and draughts. Doctors were paid by the endowment.<sup>73</sup> Such institutions were steeped in Muslim religious teaching though were not controlled by religious institutions as were most charitable houses in the West.<sup>74</sup> They became a common feature of Muslim life, with large hospitals concentrating on medical practices in capital cities and in some country towns.<sup>75</sup> Muslim rulers sought to provide experienced practitioners and gave authority to leading court physicians to examine all who wanted to become doctors in a city or hospital.

Larger Muslim hospitals in cities such as Baghdad and Cairo were well staffed with physicians who worked by medical means to cure, *shifa*, their

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<sup>69</sup> Risse, *Mending bodies*, p. 126.

<sup>70</sup> Toll, *Arabic medicine and hospitals*, p. 37; Dols, “Myth and reality”, p. 384.

<sup>71</sup> Dols, “Myth and reality”, p. 379.

<sup>72</sup> Edgington, “Hospital of St John”, p. XVII.

<sup>73</sup> Mitchell, *Medicine in the Crusades*, p. 51; Boas, *Jerusalem*, p. 86; Nasir-ī Khosraw, *Book of travels*, p. 23.

<sup>74</sup> Dols, “Myth and reality”, pp.377-390; Lev, *Charitable institutions in medieval Islam*, pp. 120-

126.

<sup>75</sup> Lev, *Charitable institutions in medieval Islam*, p. 120; Hamarneh, “Hospitals in Islam”, pp. 366-384.

patients and bring them to full health, *sihha*.<sup>76</sup> Smaller urban hospitals worked on the same principles and an example was the Talmud hospital in Fustat built in 872-874.<sup>77</sup> Other Muslim hospitals of this type built in the eleventh and twelfth centuries were at Wasit in southern Iraq and those set up by Nur al-Din in Homs and Hama,<sup>78</sup> and many others in the Maghrib ad al-Andalus.

At Wasit, the amīr Buyid al-Umāra endowed a hospital because he thought it was needed as the town was situated among swamps and he feared local fevers and illnesses.<sup>79</sup> The large hospital in Hama employed a physician, eye doctor and surgeon and provided medications, good food and beds even up to the sixteenth century.<sup>80</sup> Islamic hospitals were built for charitable reasons and used a variety of treatments to cure patients.<sup>81</sup>

When Ibn Jubayr passed through Sicily in 1185 he saw near Palermo churches for the use of Christian sick and commented that he and his travelling companions had seen similar places in Acre and Tyre and described them as being similar to Muslim hospitals. The likeness between the two caused his companions to marvel at such compassion. More than any other comment, Ibn Jubayr's observation indicated the general similarity that existed between the hospitals of the Byzantines, Hospitallers, and Muslims.<sup>82</sup>

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<sup>76</sup> Lev, *Charitable institutions in medieval Islam*, p. 120; Hamarneh, "Hospitals in Islam", pp. 366-

384.

<sup>77</sup> Lev, *Charitable institutions in medieval Islam*, pp. 120-1 ; Sayyid, *La capitale*, 57-58.

<sup>78</sup> Lev, *Charitable institutions in medieval Islam*, pp. 123-4.

<sup>79</sup> Lev, *Charitable institutions in medieval Islam*, pp. 123-4.

<sup>80</sup> Lev, *Charitable institutions in medieval Islam*, pp. 123-4.

<sup>81</sup> Lev, *Charitable institutions in medieval Islam*, p. 126.

<sup>82</sup> Ibn Jubayr, *Travels*, p. 346.

Similarities between the Byzantine and Muslim hospitals had evolved over the centuries. Classical Greek medical theories may have preceded Muslim ideas yet the latter had absorbed the various uses of drugs from Dioscorides and Muslim contacts in the East. Byzantines and Muslims had slightly different reasons and ways of expressing charity and caritative care, but in each culture there was a gradual development of specialized treatment for the sick, by genuine care and contemporary medical theory. From these beginnings the theories and practices of medicine developed within establishments set apart for the treatment of the sick.<sup>83</sup>

Since the Hospitallers were within the ambit of influence of Eastern hospitals and began to employ doctors, as well as inheriting traditions from Europe, Mitchell argues that a combination of influences affected the development of the Hospital. It adopted and adapted various Western, Greek, and Muslim theories and practices as the need arose.<sup>84</sup>

Comparison of the Hospital in Jerusalem with both the Greek *xenon* and the Muslim *hīmarīstan* shows a number of similarities. Each had impressive buildings, local doctors, nursing services, beds for patients, and segregation of the sexes. They were also similar in their use of drugs and medicines in hospital routines, and in their theories about medicine and surgery. However, closer analysis suggests that the Jerusalem Hospital had more in common with an *xenon*, and in particular the one attached to the *Pantocrator* in Constantinople,

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<sup>83</sup> Allan, "Hospice to hospital", p. 462.

<sup>84</sup> Mitchell, *Medicine in the Crusades*, pp. 103-7.

than to Muslim *himaristans*. The Western and Byzantine hospices for the sick were associated with religious institutions and monasteries whereas in the East most Muslim places for the poor were not organized and promoted by religious orders, but rather by rulers and benefactors.

In comparing the Jerusalem Hospital to those which existed in Byzantine and Muslim societies, Edgington has pointed to four major differences. She has concluded that the Hospitallers responded to particular circumstances in developing their own institution. She has pointed to the lower number of patients serviced by Eastern hospitals, their specialized wards, their greater number of doctors to patients and to the fact that Muslim hospitals were sponsored and organized differently and not controlled by religious institutions.<sup>85</sup>

Since four doctors nursed one thousand patients in the Jerusalem Hospital it meant that its ratio of patients to doctors was much larger than Eastern hospitals. This suggests that most patients required a convalescent type of nursing and were not sick enough to require the service of doctors. If this was the case, the Hospital nursed an unknown proportion of sick patients to those who only required nursing care.

Moreover, the Jerusalem Hospital was clearly different to both *himaristans* and *xenones* in its capacity of having over one thousand beds. The Mansuriyah hospital founded in Cairo in 1283 had several thousand patients, making it approximately the same size as the Jerusalem Hospital.<sup>86</sup> This was

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<sup>85</sup> Edgington, "Hospital of St John", p. XXXII.

<sup>86</sup> □ Mitchell, *Medicine in the Crusades*, p. 52.



over one hundred and fifty years later, and some *xenones* had as few as eight beds. Also, although the Adudi hospital in Baghdad, established in 982 by the amīr Buyid al-Umarā had twenty four physicians on its staff, it reflected a quality of service rather than the number of patients. As previously mentioned, the *xenon* associated with the *Pantocrator* in Constantinople could service only one hundred and fifty to two hundred patients and its largest ward contained fifty beds.<sup>87</sup> The general concensus is that Muslim hospitals were larger than Byzantine ones, but smaller than the Jerusalem Hospital.

In admitting and nursing patients of all religions, the Hospital was similar to Muslim hospitals. Edgington suggests that this should be questioned since patients of other religious persuasions may have objected to the religious nature of the Hospital. She questions whether the veracity and reliability of the Unknown Pilgrim can be accepted.<sup>88</sup> However, because the pilgrim claimed to have been in the Hospital and was so impressed by its openness to patients that he emphasized that aspect in opening his essay on charity, I believe that his claim should be accepted.

In conclusion, evidence suggests that the original Jerusalem hospice was founded in keeping with those being established in the West during the eleventh and twelfth centuries. Such hospices cared for travellers and some may have attempted to cure illnesses as well as to nurse patients back to health. However, the serving brothers of St John were serving in an Eastern city and

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<sup>87</sup> Geanakoplos, *Byzantium*, pp. 314-315.

<sup>88</sup> Edgington, "Hospital of St John", p. XII.

must have absorbed medical ideas from the Byzantine and Muslim worlds. As the Hospital grew, it accepted the teachings and medical ideas of its surrounding cultures, although when this took place is arguable.<sup>89</sup>

The Jerusalem Hospital differed from both Byzantine and Muslim hospitals in two clear ways. The serving brothers essentially followed the Benedictine Rule whereas Greek monks would have followed that of St Basil, and Islamic medical practices were secular. Secondly, the brothers had by far the largest international hospital in the East at that time.<sup>90</sup>

A number of forces of change both internally and externally altered the character of the Hospital. The occupation of the city by the First Crusade gave it a potential for greater growth. The number of pilgrims visiting the Holy City increased dramatically and the need to increase its capacity to cater for their health requirements increased correspondingly. The establishment of military brethren presented it with wider nursing responsibilities and transport problems. The growth of the number of patients serviced and their illnesses brought a challenge to improve its standard of medical treatment.

During the middle twelfth century in Jerusalem the medical service most readily available was through Byzantine, Jewish and Muslim doctors and

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<sup>89</sup> Allan, *Hospice to hospital*, p. 462.

<sup>90</sup> Amouroux, "Creation of hospitals", p. 38.

perhaps later, some from Salerno. The Hospital was in a position to assimilate easily Eastern medical practice and knowledge. It is not possible at present, however, to assess from which Eastern source the Hospital inherited its change from a practical to a rational and theoretical interpretation of medicine.

What is clear is that early Hospitallers used Western ideas of caring and nursing in their caritative work. The use of doctors during the second half of the twelfth century introduced the influence of Eastern medicine. This led to the employment of doctors and the Hospital then became an institution which served as both a nursing home and a medical hospital during the last years of its existence in Jerusalem. Without the self-denying ministry of the serving brothers the Hospital's work for the poor and sick could never have been carried out. Every aspect of service rendered by the Hospital, from the knights down to the paupers in the streets of Jerusalem, relied on their work and caritative functions.



## CHAPTER 11

### THE MEDICAL WORK

In order to understand the medical standard reached by the Jerusalem Hospital it is essential to comprehend something of the medical theory practiced there and of the quality of the doctors available for employment. When this is done it becomes possible to compare that situation with the Hippocratic ideas followed by the Byzantine and Muslim cultures. This method has been followed in this chapter and it shows how the Hospitallers offered a similar standard of medical treatment as the surrounding theorists. The linking of Hospitaller medical work with that of the Middle East has not been done by this method before.

The employment of doctors by the Hospitallers in their caritative work introduced a completely new aspect to their ministry, even though it was mentioned only briefly in its statutes, which referred neither to the illnesses suffered by patients nor the background of the doctors. The medical work of the Hospital must be conceptualized within contemporary ideas and practices in the Middle East during the twelfth and thirteenth centuries.

As with the previous chapter, it must be emphasized that the object here is not to conduct original research into the history of medicine but merely to assess how the introduction of Eastern medical practices into the Hospital was a change which greatly affected the serving brothers. The new medical practices brought with them new responsibilities to add to the serving brothers' traditional ones. Supporting the doctors entailed the administration of various treatments, diets,

medicines and utensils as well as pharmaceutical management. The new work of the serving brothers needs to be contextualized within what is known of Eastern medicine in order to appreciate their success in endeavouring to improve the medical care offered to their “lords the sick”.<sup>1</sup>

Ministering to patients suffering from many different ailments presented many problems. Travellers to the Holy Land, either by land or by sea, may have had to contend with problems such as frostbite, malnutrition and the “spread of communicable conditions from fleas to tuberculosis”.<sup>2</sup> Weak immune systems may have given rise to conditions such as “the parasites dracunculiasis (Guinea worm disease) and schistosomiasis” (parasitic worms).<sup>3</sup> Where possible, soldiers wounded in action would have been attended to at the scene of the battle and then taken to the Hospital where they would have received further treatment.<sup>4</sup>

Ullmann and Alvarez-Millan have pointed to other illnesses which may have been prevalent in the Middle-East at that time. Using Doughty, Lipsky and Shihāb ad-Din al-Khafājī as his sources, Ullmann suggests malaria, tuberculosis, trachoma and conjunctivitis, amoebic and bacillary dysentery, smallpox, parasitic infections, rickets, scurvy, and eye problems, including blindness.<sup>5</sup> Alvarez-Millan has enumerated diseases reported in the *Kitāb al-Tajārib*, a Casebook, by Abū

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<sup>1</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627, § 10.

<sup>2</sup> Mitchell, *Medicine in the Crusades*, p. 1.

<sup>3</sup> Adamson, “Schistosomiasis in antiquity”, pp. 176-188; “Dracontiasis in antiquity”, pp. 204-9; Mitchell, *Medicine in the Crusades*, p. 1.

<sup>4</sup> Edgington, “The Hospital of St John”, p. XIV.

<sup>5</sup> Ullmann, *Islamic Medicine*, p. 1, citing, C. M. Doughty, *Travels in Arabia Deserta*, vol. I, ch. 11 (Cambridge, 1888), index s.vv. madadies, cauterising, etc.; G. A. Lipsky, *Saudi Arabia, its people, its society, its culture* (New Haven, 1959), pp. 262-276.

Bakr Muhammad ibn Zakariyyā' al-Rāzī, or Rhazes (865-923),<sup>6</sup> the largest and oldest collection of case histories available in medieval medical literature.<sup>7</sup> Rhazes was a practitioner and teacher who directed hospitals in Rayy and Baghdad and produced works covering two hundred different subjects. He followed the medical theories of Hippocrates and Galen and based his diagnosis of urine on observation. In his treatment he concentrated on dietetics and hygiene with the use of simple drugs. His works included small treatises, short letters and longer books, some became widely accepted in Western universities, especially the *Kitāb al-Mansūrī* (Book for Manṣūr) and *Kitāb al-Hāwī* (Book of Medicine).

The Casebook presents nine hundred cases of sickness experienced in the Middle-East and suggests the type of daily conditions experienced by a physician. Most cases described only the apparent symptoms, suggesting various diseases, accidents, skin disorders and fevers, as well as eye problems. In Jerusalem the Hospital recognized the importance of medical knowledge and practice for various needs. It paid doctors who knew the illnesses and the treatments necessary for their patients. The presence of doctors was mentioned in a number of early sources.

Edgington draws attention to a set of Old French regulations which described the daily routine and yearly programming of the Hospital and what

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<sup>6</sup> Alvarez-Millan, "Practice versus theory", pp. 297-302; citing Abū Bakr Muhammad ibn Zakarīyā' al-Rāzī, *Kitāb al-Tajārib* (Istanbul, Topkapi Saray, Ahmed III, MS. 1975). See also Ullmann, *Islamic medicine*, pp. 43-4 and Hamarneh, "Ecology and Therapeutics", pp. 170-171.

<sup>7</sup> Alvarez-Millan, "Practice versus theory", p. 293.

appears to have been a version of the statutes of Roger des Moulins of 1182.<sup>8</sup> In this version the doctors, *mièges*, were to consider carefully or diagnose the illnesses of the sick, inspect their urine, forbid anything harmful, and provide helpful things. The more ill patients were the more attention they were to given in order to restore health.<sup>9</sup> The serving brothers were to employ one specialist doctor, *fisicien*, to care for the very ill patients. He was required to vow that he would do everything in his power to care for his patients without cost to them.<sup>10</sup>

Doctors understood and administered electuaries (powders) and other medicines, which were mixed with honey and vinegar. Assisted by two sergeants or assistants they visited the patients twice a day, diagnosed urine and checked pulses.<sup>11</sup> It was the assistant's responsibility to clean the urine flasks and record dietary instructions and those for the bloodletter.<sup>12</sup>

The statutes of Roger des Moulins mentioned four *medici*,<sup>13</sup> while in *Quanto per gratiam dei*, (1184-1185) Lucius III mentioned five *medici* and three *chiurgici*. However, this bull was issued at least two years later than the Hospitaller statutes and there may have been changes. It suggests that the numbers of doctors working in the Hospital varied according to need.<sup>14</sup> Variation in numbers aside, this confirms that doctors were well established in the Hospital by 1182. It had begun to provide medical treatments similar to those of the East

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<sup>8</sup> Edgington, "Administrative regulations for the Hospital", pp. 21-57; Delaville le Roulx, *Cartulaire*, vol. 1, no. 627; Kedar, "The Jerusalem Hospital", 136v (pp. 20-1).

<sup>9</sup> Edgington, "Administrative Regulations for the Hospital", pp. 24-5.

<sup>10</sup> Edgington, "Administrative Regulations for the Hospital", pp. 32-3.

<sup>11</sup> Kedar, "Jerusalem Hospital", fols 136v-137r (pp. 20-2).

<sup>12</sup> Kedar, "Jerusalem Hospital", fol. 136v (pp. 20-1); Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>13</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

<sup>14</sup> Lucius III, *Quanto per gratiam dei*, 1184-1185, in Pflugk-Harttung, *Acta pontificum*, vol. 2, no. 441 (p. 389).



by the late twelfth century but, even though it had moved ahead of most Western *hospitalia*, it may not have been exactly similar to all Eastern hospitals.<sup>15</sup>

There is no evidence for the origin of Hospitaller doctors. Since medicine was studied and well established in the Byzantine and Islamic worlds of the Middle East the Hospital would not have found it difficult to find doctors from different cultural groupings and could have employed whoever was suitable.<sup>16</sup>

Although Western doctors joined various Crusades they were usually part of the retinue of a noble and not likely to remain permanently in the East, although some did settle there.<sup>17</sup> The earliest one recorded was Geoffroi of Nantes, who in 1102 witnessed a will for Count Herbert of Thouars at Jaffa.<sup>18</sup> As he witnessed the will of a French lord, it seems likely that he was part of the Crusade troops that arrived in 1100-1102 and he may not have settled permanently.

*Robertus medicus* was one Western doctor who was recorded as buying a house in Jerusalem in 1137.<sup>19</sup> He seems to have been the only known Western doctor who was well placed to have been available to the Hospital at that early stage. His house was situated near the *Balnei* or bath house, and in 1167 it passed into the possession of the Hospitallers.<sup>20</sup> Since it is not recorded as being sold to them it is possible that he had a close connection with them and left his house to the Hospital.

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<sup>15</sup> Mitchell, *Medicine in the Crusades*, p. 85.

<sup>16</sup> Bennett, "Medical practice", p. 291; Ullmann, *Islamic medicine*, p. xi; Mitchell, *Medicine in the Crusades*, p. 45.

<sup>17</sup> Mitchell, *Medicine in the Crusades*, pp. 17-40.

<sup>18</sup> Mitchell, *Medicine in the Crusades*, p. 17.

<sup>19</sup> Delaville le Roulx, *Les archives de Saint-Jean*, pp. 73-4; Mitchell, *Medicine in the Crusades*, p. 30.

<sup>20</sup> Delaville le Roulx, *Les Archives de Saint-Jean*, p. 73.

Others who may have been connected with the Hospital would more likely to have been in Acre after 1192. Mitchell has not been able to find sufficient evidence to claim that European doctors in the Middle East were “technically any better or worse at treating a patient than one of their Jacobite, Jewish, or Muslim colleagues”.<sup>21</sup>

Eastern doctors available in the Frankish states prior to 1187 were not hindered from moving into different areas of religion and culture.<sup>22</sup> Some could have come from various denominations of Christians, who had migrated into Frankish states. The Old French version of the statutes of Roger des Moulins required doctors who cared for the weaker patients to swear by the saints that they would be conscientious in their work and not seek anything in return.<sup>23</sup> However, this requirement was not included in the statutes of William de Villaret in 1300.<sup>24</sup> This suggests that perhaps by that period in Cyprus the Order did not employ non-Christian doctors whereas in the Holy Land they may have made non Christian ones make this promise.

In Sicily, William II preferred visiting Muslim physicians and astrologers and encouraged them to remain in Palermo by offering to pay them to settle in the city.<sup>25</sup> Muslim doctors were popular in Sicily during the twelfth century despite the closeness of Salerno and there was interaction between Christians and

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<sup>21</sup> Mitchell, *Medicine in the Crusades*, p. 239.

<sup>22</sup> Mitchell, *Medicine in the Crusades*, pp. 31, 33.

<sup>23</sup> Edgington, “Medical care”, pp. 27- 28; Mitchell, *Medicine in the Crusades*, p. 215.

<sup>24</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 4515, §5; King, *The rule statutes and customs*, no. 5 (p. 103).

<sup>25</sup> Ibn Jubayr, *Travels*, p. 341.

Muslims. This may also have been the case in the Holy Land, at least in Acre since Ibn Jubayr mentioned a quarter where Muslim traders lived.<sup>26</sup>

William of Tyre inveighed against some Franks using Eastern physicians and blamed one of them for poisoning Baldwin III on 10 February 1162. Baldwin became ill in Antioch and was treated by a local physician who would have been versed in contemporary Byzantine medical practices. William claimed that Frankish lords preferred Jewish, Samaritan, Syrian and Saracen physicians to Latin ones, adding that they trusted their lives to the ignorant.<sup>27</sup>

There were many doctors in the East. Usāmah ibn Munqidh described how an Eastern Christian doctor called Thābit treated some Franks. He wrote that Thābit used a poultice on an abscess and recommended a dietary method to balance humours in a case of mental illness.<sup>28</sup> William of Tyre reported that another physician Barac, the doctor of the count of Tripoli around 1161, on one occasion provided Baldwin III with pills when the king was in Antioch.<sup>29</sup> A Jewish doctor, Rabbi Nehorai, who was recorded in a pilgrim work of 1174-1184, lived in Tiberias as a *medicus* and sold medical herbs.<sup>30</sup>

Doctors also practised in Jerusalem during the second half of the twelfth century. Muwaffaq al-Dīn Ya'qūb ibn Siqlab (1165-6-1228) was a Melkite from East of the Jordan who studied and worked in Jerusalem and also practised in Damascus. He learned his profession from a doctor known as the Antioch

<sup>26</sup> Ibn Jubayr, *Travels*, pp. 316-318, 323.

<sup>27</sup> William of Tyre, *Chronicon*, 18, 34, 1-10 (vol. 63A, p. 859).

<sup>28</sup> Usāmah ibn Munqidh, *Memoira*, pp. 237-8; Mitchell, *Medicine in the Crusades*, p. 35.

<sup>29</sup> William of Tyre, *Chronicon*, 18, 34, 1-5 (vol. 63A, p. 859); Mitchell, *Medicine in the Crusades*, p. 36.

<sup>30</sup> Mitchell, *Medicine in the Crusades*, p. 40, Petahyah of Regensburg, *Itinerarium*, col. MCCIV.

Philosopher (d. 1184-5), who was highly regarded for the accuracy of his diagnosis and his curing abilities. His student, Ibn Abt Usaybi'a, said he had medical books, including Galen, whom he quoted regularly.<sup>31</sup>

Shaykh Abu-Mansūr was an Eastern Christian physician who practised in Frankish Jerusalem at the same time as ibn Siqlab and who was also known to him.<sup>32</sup> Bulfarage, probably Abu 'l-Faradj in Arabic, was a *medicus* who lived in Jerusalem and was mentioned in a document of 1160-87. Since he was a resident in Jerusalem in that period,<sup>33</sup> he was most likely an Eastern Christian. Abu Sulayman Dawud was another Eastern Christian and a native of Jerusalem who worked as a doctor for King Amalric in the 1160s, he lived for a time in Egypt and became known for his knowledge of medicine and astrology and returned to Jerusalem where he attended Prince Baldwin, who had contracted leprosy.<sup>34</sup>

There is no doubt that medicine was well-established in Jerusalem and that doctors would have been available to staff the Hospital well before 1187. After the Hospital became established in Acre after 1191,<sup>35</sup> there were still doctors available who may have worked in it. Magister Bertrandus and Magister Petrus Maurinus were *physici* there in 1221. When Count Henry I of Rodez (1214-1227) was sick in the house of the Hospitallers both doctors witnessed his will on 18 October 1221.<sup>36</sup> Both may have been in the service of

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<sup>31</sup> Mitchell, *Medicine in the Crusades*, pp. 36-7.

<sup>32</sup> Kohlberg and Kedar, "A Melkite physician", p. 123; Mitchell, *Medicine in the Crusades*, p. 37.

<sup>33</sup> Mitchell, *Medicine in the Crusades*, p. 37.

<sup>34</sup> Cahen, "Indigènes et croisés", pp. 353; Mitchell, *Medicine in the Crusades*, p. 35.

<sup>35</sup> King, *Rule, Statutes, Customs*, p. 6.

<sup>36</sup> Mitchell, *Medicine in the Crusades*, p. 18.

the count, but most probably they lived and practised in Acre and were employed by the Hospital.

Examples of Eastern doctors practising in the East in the thirteenth century were Theodore of Antioch, a Jacobite Christian who studied medicine in Baghdad until about 1220 and later moved to Germany,<sup>37</sup> and Gregorius Barhebraeus (Ibn al-'Ibri, Grigor Abu 'l-Faradj), another Jacobite doctor (b.1225-26) moved to Antioch around 1243-1246 to study medicine and in 1253 became Metropolitan of Aleppo. He wrote widely on a number of subjects and among his thirty works were some on medicine.<sup>38</sup>

Two other Jacobite doctors were Saliba Barjacobi Vagii (Salibha Bar Ya'Kub Wagih) who practised medicine in the mid-thirteenth century,<sup>39</sup> and Patriarch Ignatius II, who became bishop of Aleppo and later taught medicine in Tripoli.<sup>40</sup> Benvenutus Grapheus/Crassus is thought to have lived in the second half of the thirteenth century and practised as an eye specialist. His only extant work was his *De probatissima arte oculorum*, which described many prevalent eye diseases which existed around the Mediterranean.<sup>41</sup> Finally, Samuel the *miege*, who was in Tyre in 1283, seems to have been an honorable member of the Jewish community.<sup>42</sup> Another Jewish doctor called Eli lived in Famagusta in Cyprus and worked as a *medicus physicus*.<sup>43</sup>

<sup>37</sup> Kedar and Kohlberg, *Theodore of Antioch* pp. 165-7.

<sup>38</sup> Budge, *The Chronography of Gregorius Abu 'l-Faraj*, pp. xvii, xix, xxxii- xxxvi; Mitchell, *Medicine in the Crusades*, p. 38.

<sup>39</sup> Barhebraeus, *Chronicon Ecclesiasticum*, I-II, col. 668; Mitchell, *Medicine in the Crusades*, p. 38.

<sup>40</sup> Barhebraeus, *Chronicon Ecclesiasticum*, I-II, cols, 728-30; Mitchell, *Medicine in the Crusades*, p. 38.

<sup>41</sup> Eldredge, *Benvenutus Grassus*, p. 4; Mitchell, *Medicine in the Crusades*, p. 37; Wood, *Benevenutus Grassus of Jerusalem*, pp. 3-24.

<sup>42</sup> Templar of Tyre, *Cronaca*, 162; owed to Mitchell, *Medicine in the Crusades*, p. 40.

<sup>43</sup> Lamberto de Sambucerto, *Atti*, pp. 456-457; Mitchell, *Medicine in the Crusades*, p. 40.

In the eleventh, twelfth and thirteenth centuries the Middle East had a wealth of contemporary medical knowledge available to doctors.<sup>44</sup> Since doctors in the Hospital of St John had access to the medical knowledge of the most important Byzantine and Islamic medical theorists, these should be examined. It is appreciated that consideration which is given to knowledge and practice between the early ninth and tenth centuries may not necessarily be applicable to the situation some three hundred years later.

Some two thousand five hundred extant Byzantium medical texts from the early centuries up to the eleventh provide an understanding of Byzantine medicine. The important ones which would have influenced the Hospitallers are those which were valued and used during the centuries immediately prior to the twelfth. They include some very long books containing excerpts from earlier writers, which discuss such subjects as fevers or stomach and kidney complaints. Other texts are brief manuals based on diagnosis by uroscopy and pulse, and include such topics as drugs (simple or compound), plasters, poultices, ointments, vapour baths, fumigating, bleeding and purging.<sup>45</sup>

The basis of tenth- to eleventh-centuries knowledge was taken from earlier Greek writers such as Aetios of Amida, Paul of Aegina, and Alexander of Tralles. Their books were used and copied for compilations and handbooks in well developed hospitals particularly in Constantinople.<sup>46</sup> Theophilus Protospatharios, a Byzantine physician and author, was a leading authority on

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<sup>44</sup> Mitchell, *Medicine in the Crusades*, p. 45.

<sup>45</sup> Bennett, "Medical practice", pp. 279, 281.

<sup>46</sup> Bennett, "Medical practice", p. 280.

the Hippocratic corpus and wrote handbooks and textbooks used in Byzantine hospitals. His identity is uncertain, although in manuscript traditions he was recorded as having an imperial title, a *protospatharios*. He may have lived at any time from the seventh to the tenth centuries. He wrote widely and medical texts appeared under his name on subjects such as *Excrements, Pulses, and Urines*. The work on *Urines* was considered to be the most thorough study of the subject, becoming the origin of many tracts and because of it he was known as an *auctoritas maxima*.<sup>47</sup>

His observations on urine in disease and the application of heat to urine were a result of diagnostic tests. He wrote that when urine contained an oily sediment during a fever it was a prognostication of death. It was believed that tar-like urine indicated a melting of the flesh. If urine contained small substances during febrile diseases it indicated a general disorder of the system, though otherwise it pointed to an affliction of the bladder.<sup>48</sup>

A certain Romanos held a supervisory medical post in the Myrelaion Hospital in Constantinople early in the tenth century and composed a helpful digest for doctors derived from the Byzantine scholar-physicians which was in common use in hospitals as part of a medical manual, *The Apotherapeutic of Theophilos*, which was itself collected from other Hospital Books. Romanos's digest reveals, that in practice simple and compound drugs were the primary medicines.<sup>49</sup>

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<sup>47</sup> Angeletti and Gazzaniga, *Theophilos' Auctoritas*, pp. 169,170.

<sup>48</sup> Wershab, *Urology*, p. 54.

<sup>49</sup> Bennett, "Medical practice, pp. 283-4.

Theophanes Chrysobalantes, who has previously been called erroneously Theophanes Nonnes, also lived in the tenth century and was commissioned to write three medical treatises by Emperor Constantine VII Porphyrogenetos (905-959). His *Epitome* is therapeutic in nature and at least fifty manuscripts are extant. It was in print up to 1568 containing two hundred and ninety seven chapters, and is made up of abstracts from earlier writers, though it has the stamp of Theophanes on it.<sup>50</sup>

In content the *Epitome* chapters dealt with prescribed drugs, plasters, and emetics to treat the “heating of the kidneys”. It contained references to magic, charms, and medicines for treating epilepsy, as well as the use of a green jasper amulet. There is no mention of surgery although by the tenth century Bennett surmises that it had become used for non-invasive, or minimally invasive, procedures such as cautery, phlebotomy, and pathologies of the eye needing surgery.<sup>51</sup>

Four extant texts accredited to Theophanes which were apparently used in hospitals seem rudimentary in content. The first is for therapeutic medical treatments. The second has prescriptions and regimes of great hospital doctors are outlined. A third describes hospital pharmacopeia experience, and the fourth gives remedies from the Mangana Hospital in Constantinople. According to Bennett, Galen’s texts were available for doctors, and many of the later texts in the eleventh-century show signs of Muslim influence. He believes that Byzantine medicine was practical and a craft medicine, handed on from

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<sup>50</sup> Bennett, “Medical practice”, pp. 283.

<sup>51</sup> Bennett, “Medical practice”, pp. 283, 285-6.



doctor to apprentice and depended a great deal on the knowledge and experience of doctors.<sup>52</sup>

The Muslims derived their medical knowledge from the classical medical knowledge of the Greeks as well as Indian, Persian, Coptic, Jewish and Syriac medicine. It built up an extensive resource system with many reference books available.<sup>53</sup> Muslim doctors learned their medicine from Hippocrates' and Galen's works which had been copied, interpreted and expanded by Muslim authors. Under the protection of Harūn al-Rashīd (786-809) and al-Ma'mūn (813-833) an unprecedented translation movement took place. Large libraries, including medical dictionaries, were translated from Greek to Syriac and then Arabic. Physicians became able to follow a rich tradition of medical knowledge which had been codified in the works of Galen.<sup>54</sup>

A revival of humoral medicine was the basis of the profound changes which took place within the Muslim medical world, from the sixth to the eighth centuries. Medical learning acquired from the translations of the Greek medical manuscripts into Arabic during the ninth and tenth centuries, was disseminated quickly because of the vast scale of copying the medical texts. The Promoters of this scholarship circulated it as widely as possible and the books retained their interest for study and use.<sup>55</sup>

The number of doctors and medical works in medieval Islam was very extensive and it is possible only to give a few examples of those whose theories

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<sup>52</sup> Bennett, "Medical practice", pp. 287-8.

<sup>53</sup> Shahine, "Arab contribution", pp. 7-14.

<sup>54</sup> Sabra, "Greek Science", pp. 224-5, 228, 235.

<sup>55</sup> Conrad, "Arab-Islamic medical tradition", pp. 99-125.

were disseminated in the Middle East and also influenced European medicine. According to Conrad, “over five thousand medical manuscripts in Arabic, Turkish and Persian survive in both public and private libraries in modern Turkey, and include in them about one thousand works by more than four hundred authors. There are more than fifty complete or partial copies of Ibn Sina's *Qanun*, and manuscripts of the many later commentaries are even more numerous”.<sup>56</sup>

‘Alī ibn al-Abbās al-Majūsī (d. 994), the most important Muslim medical writer between al-Rāzī and Ibn Sīnā,<sup>57</sup> wrote the *al-Kunnāsh al-Malikī* (*Liber Regius*), or *Kitāb Kāmil as-sina‘a at-tibbiya*, (*The complete book of the medical art*) a medical encyclopedia in one volume,<sup>58</sup> which was later translated into Latin by Constantine the African. He lived all his life in Iran and dedicated his encyclopedia to the Buwayhid prince ‘Adud ad-Dawla Fanā’ Khusrau (949-982). By the twelfth century his book and reputation had spread to Syria.<sup>59</sup> The book contained two parts, each of ten tracts, which in turn had many chapters. The first part was given over to theology and the second to practical medical applications. It was nearly free of magical and astrological ideas and was basically a systematizing of the Galenism of Arabic medicine.<sup>60</sup> Galen’s theories on dietary regulation also were followed by al-Majūsī. As an encyclopaedia it covered such subjects as health, surgery, drugs and diets. It was very popular and was used throughout the Middle Ages.

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<sup>56</sup> Conrad, “Arab-Islamic medical tradition”, p. 122.

<sup>57</sup> Graziani, *Arabic medicine*, p. 20; Hamarneh, “Ecology and therapeutics”, p. 171; Ullmann, *Islamic medicine*, p. 44.

<sup>58</sup> Richter-Bernburg, “Alī B., ‘Abbās Mājūsi Arrajānī ”, vol. 1, pp. 837-838; Edgington, “Medical care”, pp. 30-31.

<sup>59</sup> Conrad, “Usama ibn Munqidh and Other Witnesses”, p. XLIII.

<sup>60</sup> Mitchell, *Medicine in the Crusades*, p. 99.

'Isā ibn Jazlah of Baghdad-Iraq, (d. 1100) was best known for his medical works *Taqwīm al-Abdān* and *Minhāj al-Bayān*, which were dedicated to the library of Caliph al-Muqtadī (1075-1094). He also bequeathed his books to the mausoleum-library of the imām Abū Hanīfah in Baghdad.<sup>61</sup> In these two books he emphasized the four Aristotelian elements in humoral pathology believing in the treatment of the imbalance of humours by medical treatments including, exercises, dieting, and drugs made from plants, animals or minerals. He read widely and consulted the works of the most eminent medical scholars, including Hippocrates, Dioscorides, Rufus, Galen, Oribasius, Paul of Aegina, Tiadhūq, Yuhanna ibn Masawayh, Sarak al-Hindī, Hunayn ibn Ishāq, Masarjawayh, Ishāq al-Isra'ī al-Rāzī, and al-Mājūsī.<sup>62</sup>

By the eleventh century, Baghdad doctors had learnt the use of many drugs as Muslim medicine had absorbed a great deal of knowledge from Greek, Indian, Persian, Coptic, and Syriac backgrounds. Ibn Jazlah mentioned poisons in his first book and in his second discussed simple and compound drugs and diets used for various diseases, which he claimed had been omitted by earlier Muslim authors. He listed drugs and associated diets, describing each and giving their physical properties in form and dosage, as well as their therapeutic qualities including their warming and cooling effects. In addition to this information he gave substitutes for unavailable prescribed drugs.<sup>63</sup>

Abū 'Alī al-Husayn ibn 'Abdallāh ibn Sīnā, or Avicenna, (b. 980-d. 1037),

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<sup>61</sup> Graziani, *Arabic medicine*, p. ii.

<sup>62</sup> Graziani, *Arabic medicine*, pp. 51,110.

<sup>63</sup> Graziani, *Arabic medicine*, pp. iv-vi.

was born in Central Asia and because of his approximately 270 works became highly regarded and placed alongside Galen. His greatest volume the *Kitāb al-Qānūn fī l-tibb* or *Canon of medicine*, containing five books, is considered to rival or surpass al-Majūsī's encyclopaedia.

The first book had four sections. In the first, the humours of the body were covered, and this is considered to be the general part of the work. The second dealt with such things as the symptoms of disease, diagnosis by using the pulse, urine and stools. The third dealt with hygiene, health rules for children, adults and the aged, as well as advice for travellers. Finally, methods of therapy were covered, including cautery, pain relief (various analgesics including opium) and some surgery. The second book was written about simple drugs and their properties. The third was about diseases of the whole body and their treatments and special pathology. In the fourth book, Ibn Sīnā dealt with cosmetics and in the fifth he gave recipes for compound drugs and their dispensing.<sup>64</sup>

Some European scholars spent time in the East to access available local manuscripts. One such was Stephen of Pisa who worked on manuscripts at Antioch between 1126 and 1130 and in particular began translating the *Kitāb al-Malikī* by al-Majūsī. Acre was among a number of places in the Middle East where medical works were studied by Arabic-speaking Latins. Abū Sahl al-Masū (d. 1010), an Eastern Christian physician who is believed to have been the teacher of Avicenna,<sup>65</sup> wrote a work called *The hundred books on the medical art*. A manuscript of his book dated to 1196 was apparently written to

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<sup>64</sup> Rashed, *Arabic Science*, vol. 3, pp. 921-5; Ullmann, *Islamic medicine*, pp. 45-6.

<sup>65</sup> Mitchell, *Medicine in the Crusades*, pp. 208-9.

accommodate a non Arabic-speaking clientele as it contains Latin elucidating in various places. Its style of writing suggests that the additions were of French or Italian origin and were seemingly added in Acre between 1196 and 1291.<sup>66</sup>

Eastern medical knowledge during the time of the Hospital in the Holy Land meant that its doctors would have known most primary concepts. They would have known that there were many misappropriated ideas surrounding the use of urine in diagnosis. Al-Rāzī knew of some who made exaggerated claims regarding prognosis by urine examination and rejected such claims as charlatanical.<sup>67</sup> Doctors had to be assured of their knowledge and needed to be well trained and educated before practising

Byzantine doctors could acquire practical skills and medical experience in Constantinople, Antioch, or Tripoli.<sup>68</sup> However, it seems likely that most Eastern Christian practitioners learnt their trade through apprenticeships to local scholars, doctor trainers, or in nearby Islamic countries.<sup>69</sup> Because there were no medical universities in the Muslim world, Muslim students of medicine also attached themselves to practising doctors in order to qualify as physicians.<sup>70</sup>

Christian, Jewish, and Muslim physicians practised alongside each other and hospital doctors were frequently required to provide evidence of good conduct from a city official.<sup>71</sup> Some of the most prominent Arab doctors joined

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<sup>66</sup> Mitchell, *Medicine in the Crusades*, p. 209, citing Savage-Smith's work in press.

<sup>67</sup> Wershub, *Urology*, p. 77.

<sup>68</sup> Usāmah ibn Munqidh, *Memoirs*, pp. 237-8; Miller, *Birth of the Hospital*, pp. 12-14; Mitchell, *Medicine in the Crusades*, p. 35.

<sup>69</sup> Leiser, "Medical education in Islamic lands", pp. 48-75, discusses the various ways medicine was learnt by Christians and Muslims together, pp. 48-75.; Mitchell, *Medicine in the Crusades*, p. 35.

<sup>70</sup> Leiser, "Medical education in Islamic lands", pp. 49 ff.

<sup>71</sup> Richards, "Doctor's Petition", pp. 297-306.

the staffs of the *himaristans*, such as al-Rāzī.<sup>72</sup> This leads to the question of whether Eastern doctors actually followed closely the various medical theories propounded by the many authors.<sup>73</sup> Savage-Smith has argued that in medical theory, pharmaceuticals, and surgical care complications challenge the concept of a linear “transfer and assimilation of ideas through written texts”.<sup>74</sup> Of surgery she writes; “The inclusion in formal Arabic medical treatises of complex or invasive surgical procedures is compared with the lack of evidence for their actual performance, as well as with statements to the effect that such techniques were unknown at the time or should be avoided”.<sup>75</sup>

Alvarez-Millan has compared al-Rāzī’s *Casebook* with the theoretical textbooks regarding ophthalmic treatments and has concluded that medical knowledge and therapeutic advice were not actually carried out in physicians’ medical performance.<sup>76</sup> On the other hand, Bennett believes that in Byzantine medical practice physicians were “the keepers of tradition, the educators of each new generation of doctors and the channel for the transmission of their medicine”. In giving examples of the use of theory in practical ways, he maintains that the “manuscript was the life-blood of Byzantine medicine” and that Byzantine doctors used both theory and practice in their work. He quotes an unknown versifier who sought to express gratitude to a certain Nicetas for a medical text composed in the eleventh-century.

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<sup>72</sup> Risse, *Mending bodies*, p. 127.

<sup>73</sup> Alvarez-Millan, “Practice versus theory”, p. 293; Savage-Smith, “Surgery in Islamic Lands”, p. 307; Mitchell, *Medicine in the Crusades*, p. 138.

<sup>74</sup> Savage-Smith, “Exchange of medical and surgical ideas”, p. 27.

<sup>75</sup> Savage-Smith, “Surgery in Islamic lands”, p. 308.

<sup>76</sup> Alvarez-Milan, “Practice versus theory”, p. 293.

His skill depicts how human limb  
 Though broken may be mended.  
 Their proper setting is by him  
 In words and pictures blended.  
 All theory here is wed to practice  
 By best of teachers, Nicetas.<sup>77</sup>

Nicetas lived in Constantinople around the eleventh century and wrote a well known medical encyclopedia, which he illustrated both for reference and teaching in the city's *xenones*.<sup>78</sup> His work included the ideas of previous authors and his chapters on surgery were based on Paul of Aegina.<sup>79</sup>

Criticisms of doctors' performances should be kept in perspective because of the great volume of information available and the comparatively limited number of cases they had to handle. In the modern world most medical practitioners use only a fraction of the medical knowledge available to them in textbooks and dictionaries on medicine.

In the Muslim near East doctors were tested and registered. By the tenth century efforts had been made to control the practice of medicine.<sup>80</sup> The *hisba* was the government office which oversaw the moral and commercial standards of the state. A *muhtasib* was in charge of the department and his duties embraced all aspects of public life, including control of medicine as well as other areas of concern including the supervision of market places. He made rulings regarding, medical practice and pharmacy and relations between patients, doctors and pharmacists. Some Muslim doctors were accused of practicing

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<sup>77</sup> Bennett, "Medical practice", p. 291.

<sup>78</sup> Miller, "Byzantine hospitals", p. 61.

<sup>79</sup> Bliquez, "Greek urgical instruments", pp. xii, 193.

<sup>80</sup> Edgington, "Livre des Assises", p. 91.

medicine to make money and retire in comfort while others were sincere practitioners.<sup>81</sup> The *muhtasib* was expected to protect society from independent physicians who practiced as charlatans. The *hisba* manuals often contained a medical section used to assess practitioners which included the medical standards expected from physicians, surgeons, ophthalmologists, bonesetters and pharmacists.<sup>82</sup> *Hisba* manuals from Syria and Egypt, dated around 1193,<sup>83</sup> record the *muhtasib*'s duties including detailed regulation of physicians and surgeons. Karmi believes "that such standards had not been seen anywhere else prior to Islam".<sup>84</sup>

It is possible that even prior to 1240 doctors were required to be licensed in the Kingdom of Jerusalem. In the *Assises de la Cour des Bourgeois* there were sections on "medical licensing, clinical practice and negligence" of doctors.<sup>85</sup> Prawer estimates that the *Assises* was composed as a private treatise around 1240-44 in Acre by a burgess and not an academic lawyer,<sup>86</sup> and, it has been reckoned that some sections dated from earlier times. There had been courts convened in Acre, Caesarea, Tyre and Jerusalem.<sup>87</sup> There are 278 chapters in the *Assises*, and that numbered 238, governed who could practice medicine in the Kingdom of Jerusalem. This applied to both Franks coming from overseas and Near Eastern doctors, including those from Muslim areas. Once

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<sup>81</sup> Karmi, "Physicians", p. 72.

<sup>82</sup> Leiser, "Medical education in Islamic lands", pp. 48-50; Mitchell, *Medicine in the Crusades*, p. 223.

<sup>83</sup> Edgington, "Livre des Assises", p. 91, Quoting al Shayzarī, *The Book of the Islamic Market Inspector*.

<sup>84</sup> Karmi, "Physicians", pp. 63-4,

<sup>85</sup> Kausler, *Assises de Jérusalem*, docs 231, 233; Grandclaude, *E'tude Critique*, docs 231, 233; Mitchell, *Medicine in the Crusades*, p. 15.

<sup>86</sup> Edgington, "Livre des Assises", p. 87.

<sup>87</sup> Conrad, "Usama ibn Munqidh and other witnesses", p. xlvi.



admitted, a doctor was compelled to remain in his chosen town or be punished.<sup>88</sup> If he moved he had to sit an exam in that new place.

Chapter 236 of the *Assises* dealt with the physicians' and surgeons' civil liability if they gave substandard treatment to a patient, which caused any permanent damage or financial problems. If a servant died because of a doctor's mistreatment or negligence, punishment was applied, and if a Frank died the death came under severe criminal law.<sup>89</sup> The *Assises* described some of the operations carried out by surgeons, which could have gone wrong and the punishments which they would incur.<sup>90</sup>

The list of practices included; the treatment of wounds, the use of cold and hot applications, the problem of swellings, head and other putrefied wounds, and various broken limbs. Humoural theory is behind some surgical operations and also is part of the work of the physicians.<sup>91</sup> Although there is no list of ailments faced by the Hospital doctors, it would be expected that the ones listed in the *Assises* would be similar.

The Frankish medical legislation in the *Assises de la Cour des Bourgeois* in the thirteenth century was probably influenced partly by the Muslim *hisba* and the role of the *muhtasibs* in its Frankish form, the *mathessep*.<sup>92</sup> A *Mathessep* was a transliteration of *muhtasib* and was an officer of the court who reported

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<sup>88</sup> Conrad, "Usama ibn Munqidh and other witnesses", p. xlix; Beugnot, "Abrégé du livre des assises", in vol. 2, pp. 167-169.

<sup>89</sup> Conrad, "Usama ibn Munqidh and other witnesses", p. xlix; Beugnot, "Abrégé du livre des assises", in vol. 2, pp. 165-6.

<sup>90</sup> Kausler, *Assises de Jérusalem*, docs. 231, 233; Mitchell, *Medicine in the Crusades*, pp. 232-4; Wickersheimer, "Organisation et legislation", pp. 694-8.

<sup>91</sup> Edgington, "Livre des Assises", p. 89.

<sup>92</sup> Praver, *Crusader Institutions*, p. 368; Conrad, "Usama ibn Munqidh and other witnesses", pp. XLIX-L; Mitchell, *Medicine in the Crusades*, p. 221.

and advised on public business.<sup>93</sup> Mitchell argues that the medical parts of the *Assises* reflected Syrian customary practice since they are not found in European legal sources. However, the first known regulations in the West were in Sicily, from 1140 and in 1243 by Frederick II (1194-1250). In the Holy Land it may be assumed that the Franks would have known of *hisba* manuals and the *Assises* reveal that general medical knowledge was expected of practitioners in the thirteenth century.<sup>94</sup> They reveal the best practice of doctors in the thirteenth-century in the Kingdom of Jerusalem and it may be assumed that the Hospital doctors in Acre were chosen under the conditions of the *Assises*.<sup>95</sup>

Situated in Palestine and exposed to the influence of both Byzantine and Muslim medicine suggests that the Hospital's first doctors were probably Oriental. Praver argues that the jurist who wrote the *Assises* in the thirteenth century appeared to reflect what would have been laws of the Kingdom in the late twelfth century.<sup>96</sup> If this was the case, Middle Eastern doctors who served in the Hospital prior to 1187 would have known of both Muslim and Frankish requirements. In the thirteenth century some doctors may have been trained in the West in such places as Salerno.<sup>97</sup>

Were there similarities between Eastern medical practices and those of the Hospital and the requirements of Roger des Moulins? When Roger described the work of the Hospital doctors as being with the sick and the poor,<sup>98</sup> the

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<sup>93</sup> Conrad, "Usama ibn Munqidh and other witnesses", p. XLIX ; Beugnot, "Abrégé du livre des assises", in vol. 2, chs 237-8, 243-4.

<sup>94</sup> Woodings, "Medical resources and practice", p. 269.

<sup>95</sup> Edgington, *Livre des Assises*, p. 92.

<sup>96</sup> Praver, *Crusader Institutions*, pp. 388-90.

<sup>97</sup> Edgington, "Medical Care", pp. 31-2.

<sup>98</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

reversal of the normal order of the words sick and poor may have indicated a change of emphasis within the Hospital. In earlier documents the poor were always placed before the sick which suggests that not only had the emphasis changed but that doctors had been introduced.

Prognosis, diagnosis, urine testing, bleeding and the use of medicines were common practices in both the *Assises* and the Hospital. However, the *Assises* give a more detailed list of sicknesses and medicines, mentioning fevers, dropsy, measles and bowel problems, as well as syrups, drugs, electuaries, laxatives, heating and cold substances, and piercing to relieve dropsy and cautery.<sup>99</sup> Hospital doctors were no doubt required to address similar conditions and deal with similar problems in both the twelfth and thirteenth centuries as did practitioners within the communities of the Kingdom of Jerusalem.

Both Roger des Moulins and the *Assises* mentioned the use of urine in diagnosis. If medical care was possible, a doctor would examine the patient's urine to make a prognosis and if possible a diagnosis. If it was thought that the problem could be treated by the theory of humours, there followed a prescribed diet followed by drug treatment, baths, bloodletting if required, and surgery as a last resort, unless the patient was at risk on or off the battlefield.<sup>100</sup>

Classical Hippocratic theory of the humours lay behind a prognosis by urine. This had been systematized by Galen, and subsequently summarized by Byzantine and Islamic encyclopaedists, and it guided healing practices in the

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<sup>99</sup> Mitchell, *Medicine in the Crusades*, pp. 234-6.

<sup>100</sup> Mitchell, *Medicine in the Crusades*, p. 57.

East in the twelfth century.<sup>101</sup> What became known as the Hippocratic theory of medicine was contained in a collection of sixty-three treatises gathered together under his name. They had taught that humans' health or illness could be assessed from bodily secretions.<sup>102</sup> Although there was no one single humoral theory to which all Hippocratic physicians subscribed, the fundamental theory was based on the premise that if the humours were not in balance, the person was ill and needed treatment.<sup>103</sup>

The Hippocratic treatise on the *Nature of man* taught that the four humours were blood, phlegm, yellow bile and black bile.<sup>104</sup> Galen's study of the body and its structures in the third century produced the most complete ancient physiological analysis of the structure of the human body. He taught that if the four humours were not in balance, treatment was necessary to bring them into balance. He was particularly interested in the secretion of urine and in the function of the kidneys, urethra and bladder.<sup>105</sup>

According to the Hippocratic treatise called *Aphorisms* or *Pithy sayings*, it was thought necessary to evacuate some humours in order to achieve good health. The thesis entitled *Prognosis* advocated that by examining body sweats, fevers, stools, pains and urines a physician could see the cause of sickness and administer a remedy.<sup>106</sup> Among the common treatments used were various medicines, bleeding, evacuants, cauterising and baths.<sup>107</sup>

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<sup>101</sup> Edgington, "Medical care", p. 30.

<sup>102</sup> Wershub, *Urology*, pp. 52-4.

<sup>103</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 18, Aphorisms, pp. 376-7.

<sup>104</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 39, Nature of man, pp. 399-400.

<sup>105</sup> Wershub, *Urology*, p. 59.

<sup>106</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 6, Aphorisms, pp. 376-7.

<sup>107</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 48, Prognostic, p. 406.

The theories of Ibn Sīnā were widely held and used by Islamic physicians at the time when the Hospital began to use doctors in Jerusalem. His first book concentrated on the theory of humours and he made extensive observations on the qualities of urine and their use in prognosis and on the conservation of health through diet and drugs.<sup>108</sup> He described in detail the various colours and the reasons for their variations, and he wrote of the density of urine and gave some suggested reasons for its state. He explained how the sediment in urine indicated the health of a patient. White sediment indicated recovery, yellow meant acuteness of bile, red pointed to a disease in the blood or liver, while black prognosticated a coming death through what was called an excess of “humoral combustion”.<sup>109</sup> However, if the urine was black, and was accompanied by some improvement in the patient, there was a suggestion of a recovery.

He also wrote about suspended sediment in urine, as well as its colour and behaviour when examined, and described the consistency of sediment, its possible and various contents, and his prognosis. Regarding the odour of urine, if there was no odour it meant that food had not been digested or had been digested raw. He concluded that the degree of decomposition of food in the stomach was proportional to the intensity of the odour of the urine. If the odour was very strong and repulsive it indicated that the illness was in the bladder.<sup>110</sup>

The *Assises* and Roger des Moulins agreed that following the examination of urine by the doctors it became their responsibility to diagnose the illness of the

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<sup>108</sup> Wershshub, *Urology*, pp. 84-8.

<sup>109</sup> Wershshub, *Urology*, p. 86.

<sup>110</sup> Wershshub, *Urology*, pp. 85-8.

patient and recommend the medicine or treatment necessary. In the Hippocratic theory the concept identifying the symptoms and understanding the correct illness for treatment was of great importance. Prognosis was considered to include knowledge of the past, present and future of a sickness and by this a physician could give confidence to a patient by giving a complete picture of an illness.<sup>111</sup>

At the beginning of the treatise on *Prognosis*, the physician was to assure patients that their illnesses were curable. Since every disease was caused by natural elements it could be recognized as such and it was thus possible to heal and rectify the problem. A physician was to recognize that a description of an illness was not enough and that there had to be an interpretation of the causes. He had to observe all the evidence present in the patient's body. A patient's facial expression might exhibit the approach of death and this became known as the "Hippocratic *facies*", the first observation to be made in any diagnosis.<sup>112</sup>

*Aphorisms*, the most widely read Hippocratic thesis, was a general outline of prognosis therapy and Hospital doctors would surely have known it. It emphasized the need to recognize unusual human behaviour, habit or diet which could affect the health of patients. Prognosis should take into consideration the fact that good health followed a cycle, where food was due to be evacuated the second day after being taken. When this cycle was disturbed, it

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<sup>111</sup> Jouanna and de Bevoise, *Hippocrates*, p. 101.

<sup>112</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 48, Prognostic, p. 406.

indicated that disease would follow and the humours causing illness needed to be evacuated.<sup>113</sup>

In any diagnosis the physician was taught to observe carefully the usual geographical location of the patient,<sup>114</sup> because the weather or surroundings could have affected him. This would have been necessary in Palestine, where heat, mosquitoes, contaminated water and dust provided the potential for illness.

A physician's observation of a patient included examination of the hands and fingers and assessment of signs of abnormality. In addition, pulse beat, touch, smell and taste were to be taken into account. Prognosis of an illness may also have included previous case studies or animal dissection. After all observations and assessments had been made and it was thought that the cause of the illness was inside the patient, the physician was required to make a mental reconstruction of the possible internal situation. Only then could he make a prognosis of the treatment necessary and the further progress of the disease.<sup>115</sup>

The third reason given by Roger des Moulins for the Hospital's need to use doctors, which agrees with the practice expected in the *Assises*, was in order to administer appropriate medicines to the patients. Contemporary medical practice arranged the various remedies under the three headings of, medicines, incisions and cauterizations. Medicines were used to create vomiting and bowel clearances and as preventative or curative measures. In the Hippocratic treatise

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<sup>113</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 6, Aphorisms, pp. 376-7.

<sup>114</sup> Jouanna and de Bevoise, *Hippocrates*, p. 67.

<sup>115</sup> Jouanna and de Bevoise, *Hippocrates*, pp. 292-332.

*Nature of man*, vomiting was to be induced in winter and bowel clearances in summer.<sup>116</sup>

The physician's dispensary stocked medicines and instruments since most doctors were their own pharmacists and from the evidence of the Unknown Pilgrim, the Hospital doctors mixed their own medicines.<sup>117</sup> Doctors arranged their medicines and ointments by type and among those used most frequently were purgatives.<sup>118</sup> The treatise *Decorum* taught that medicines from suitable localities should be put in proper order according to kinds and sizes in order to separate those which were not used frequently, from those which were used more commonly.<sup>119</sup>

The work of Dioscorides, a Greek physician who lived in the first century C.E., was available in the East at the time when the Hospital was in Jerusalem.<sup>120</sup> He gathered information from many countries during his time as a military doctor and composed a work on herbs, aromatics, oils, ointments, trees, small creatures, insects, reptiles, dairy produce, cereals, crushed stones, roots and juices.<sup>121</sup> Herbal preparations made from medicinal herbs supplemented by other plants from folk and practical healing uses, had been used in Europe since the eighth century, and no doubt before that. Cinnamon, sugar, ginger, nutmeg, anise and licorice were used to sweeten medicines and were also used in ointments, lotions and poultices in monasteries during the middle ages.<sup>122</sup>

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<sup>116</sup> Jouanna and de Bevoise, *Hippocrates*, Treatise 39, Nature of man, pp. 399-400.

<sup>117</sup> Edgington, "Medical care", p. 29.

<sup>118</sup> Jouanna and de Bevoise, *Hippocrates*, p. 87.

<sup>119</sup> Jouanna and de Bevoise, *Hippocrates*, p. 87.

<sup>120</sup> Edgington, "Medical care", p. 29; Riddle, "Commentaries on Dioscorides", p. 102.

<sup>121</sup> Gunther, *Dioscorides*, p. 123.

<sup>122</sup> Stannard, "Greco-Roman materia", pp. 455-468.



On the one hand, knowledge of some Western medicines may have found its way to the Jerusalem Hospital through pilgrim monks or European practitioners. On the other, however, there were many Dioscorides commentaries with added *scholia* available in the Middle East which suggests a quite different medicinal tradition to that of Western monasteries.<sup>123</sup>

Dioscorides had described 345 plants as well as aromatics, oils and trees and their use in medical practice. In Book III he included the use of such common plants as rhubarb, which he claimed to be a medicine for many illnesses. Other medicines he included were dried grapes or raisins, which were recommended for treating the windpipe, coughs, kidneys, bladder and dysentery. If mixed with pepper, raisins were to be used to draw phlegm from the head. Iron rust was said to bind the bowels and *mandragora*, or mandrake, was taken as a pain-killer, either orally or by enema.<sup>124</sup>

The Unknown Pilgrim reported that syrups, oxymel, electuaries, and other things necessary for the sick, were administered by doctors in the Hospital, and that patients were denied harmful foods.<sup>125</sup> This suggests that the Hospital also grew plants so that doctors could mix their own medicines. Sugar was supplied by some priors in the Middle East.<sup>126</sup> In the late twelfth century oxymel was highly regarded by al-Samarqandi, a physician from Samarkand who was killed

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<sup>123</sup> Riddle, "Commentaries on Dioscorides", p. 97.

<sup>124</sup> Gunther, *Dioscorides*, pp. 123, 233, 473-4, 602, 631.

<sup>125</sup> Kedar, "Jerusalem Hospital", fol. 136v (pp. 21-22).

<sup>126</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627.

by the Monguls in 1222-1223,<sup>127</sup> as a syrup made from vinegar and sugar syrup.

In his

book on pharmacy he claimed that oxymel had beneficial qualities which helped calm the heat of acute fevers, prevented putrefaction, stopped the confusion of humours and opened obstructions.<sup>128</sup>

Savage-Smith has pointed out that problems occurred in many of the early translations of the names of medicines from Greek into Aramaic. Sometimes the translators left Greek names in their translations into Arabic which meant that another literature sprang up which explained Greek terms and provided lists in Syriac, Persian, Greek, Arabic, Afghan, Kurdish, Indian dialects, Berber, and Old Spanish. Mistakes were made when the names of local plants, which appeared similar to those recommended, were used in the translations. This occurred when plants named by Dioscorides and Galen would not have been found or known in other areas. Climates helped vary species and local plants were mistakenly said to be similar to ones given by Dioscorides and Galen. Some substances meant little to Arab practitioners.<sup>129</sup>

Some Middle Eastern doctors trained and skilled in clinical practice and observations and having knowledge of tried and proven remedies and human nature, would have been able to apply their own expertise to various medicines.<sup>130</sup> In his praise of the Jerusalem Hospital, the Unknown Pilgrim

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<sup>127</sup> Sarton, *History of science*, vol. 2, p. 661.

<sup>128</sup> Al-Samarqandi, *Medical Formulary*, p. 62. Idebted to Mitchell, *Medicine in the Crusades*, p. 69.

<sup>129</sup> Savage-Smith, "Exchange of medical and surgical ideas", p. 34.

<sup>130</sup> Bennett, "Medical practice", p. 291.

mentioned the power of stones in the context of doctors and healing: “*O quam beata domus, quod beate considerans lapidibus virtutes, herbis vires...*”.<sup>131</sup>

Lithotherapy, or the use of stones, was considered effective because it was thought that each had a humoral quality, such as hot, cold, moist or dry and could be used to overcome an excessive humour. Stones were worn as amulets and when crushed were given as medicine or by simple application as an ointment.<sup>132</sup> Hildegard of Bingen included a lapidary in her *Physica* of ca 1151-1158.<sup>133</sup> Doctors of the Hospital would have used such treatments when they thought it was necessary.

Apart from the requirements outlined by Roger des Moulins in his statutes, as well as general practitioners (*practicantes theoricī*), the Hospital employed and used surgeons (*cirurgici*), barbers (*barbae*) and bloodletters (*minutores*).<sup>134</sup> *Cirurgici* were usually less educated than *physici* and tended to be looked down upon by them. In the twelfth and thirteenth centuries they were generally apprenticed in their trade and mainly bandaged wounds, manipulated fractures, and operated with surgical instruments.<sup>135</sup> As well, they treated dislocations, cleaned and dressed cuts, and used a wide variety of medications for relieving bleeding, easing pain and treating infection. Surface injuries may have required some kind of incision or excision, suturing, or cauterization while internal injuries

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<sup>131</sup> Edgington, “Medical care”, p. 29; Riddle, “Lithotherapy in the Middle Ages”, pp. 39-50; Kedar, “Jerusalem Hospital”, fol. 137r (p. 22).

<sup>132</sup> Riddle, “Lithotherapy in the Middle Ages”, p. 40.

<sup>133</sup> Hildegard of Bingen, “De Lapidibus”, vol. 197, Lib. IV, cols 1247-1266.

<sup>134</sup> Kedar, “Jerusalem Hospital”, fol. 137r (p. 22).

<sup>135</sup> Mitchell, *Medicine in the Crusades*, p. 12.

perhaps needed venesection.<sup>136</sup> Such practical medical procedures would have been the necessary work of the Hospital's surgeons work.<sup>137</sup>

In many places surgical operations were limited during the twelfth century. Savage-Smith has maintained that surgery was absent from Latin and Anglo-Saxon medical writings up to that time and even though surgical instruments and operations were mentioned in Byzantine manuscripts, no details were described and it appears that for the most part bloodletting and bonesetting were carried out.<sup>138</sup>

By way of contrast, Muslim medical literature during the tenth and early eleventh centuries provided a great deal of surgical information, mainly derived from Paul of Aegina. The first innovative attempt to deal with surgery was made in the thirteenth-century by Ibn al-Quff (d. 1286) in *The basics in the art of surgery*.<sup>139</sup>

Although there were numerous Muslim discourses on surgery, Savage-Smith has argued that they are not reliable guides to the actual practice of that period. As an example, the case histories of al-Rāzī lack any complete surgical procedures, pointing to the general absence of surgical operations. During the tenth and eleventh centuries, Islamic medicine largely avoided surgery and this would suggest that the Hospital doctors also would probably not have practised complicated operations.

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<sup>136</sup> Karmi, "Physicians", p. 74.

<sup>137</sup> Mitchell, *Medicine in the Crusades*, pp. 137-183.

<sup>138</sup> Savage-Smith, "Surgery in Islamic Lands", p. 307.

<sup>139</sup> Savage Smith, "Surgery in Islamic Lands", p. 310.

In addition to the surgeons the Hospital employed barbers, including at least one brother who was trained in this practice. The barber bled patients under the doctors' direction as well as shaving them and cutting their hair. He performed minor surgical operations, tended the wounded and pulled teeth.<sup>140</sup> Under the barber was an even less educated bloodletter who concentrated on this practice. He also followed the doctors' instructions or operated at the request of a patient.<sup>141</sup>

Bleeding was permitted to the Hospitallers for health reasons and in Chapter 9 of the Statutes of Alfonso of 1206, it stated that every Saturday they had permission to be bled if necessary.<sup>142</sup> Bloodletting was administered under febrile conditions especially or when a patient's symptoms were violent. According to most medical authors any unhealthy person or anyone under the age of fourteen or over seventy years of age ought not to be bled.<sup>143</sup> The actual bleeding was usually achieved by lancing a full vein, preferably near the elbow and after a meal so that the liver would contain ample blood.<sup>144</sup> It was considered to be a universal purge in order to cleanse the body of old blood which may have caused illness.

The plan of St Gall had a separate place for bloodletting. Monks and visitors could spend up to three days recuperating after a cleansing regimen of purges, bleeding and rest.<sup>145</sup> As well as texts by Galen, Dioscorides and

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<sup>140</sup> Kedar, "Jerusalem Hospital", fol. 138v (p. 23).

<sup>141</sup> Kedar, "Jerusalem Hospital", fol. 137r (p. 22).

<sup>142</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, ch. 9.

<sup>143</sup> Mitchell, *Medicine in the Crusades*, pp. 193-8.

<sup>144</sup> Risse, *Mending bodies*, p. 132.

<sup>145</sup> Price, *St Gall in brief*, p. 34.

Hippocrates, St Gall's library contained a copy of the *Epistula de phlebotomia*, a guide to therapeutic and prophylactic bleeding, dating from the early 800s, which designated the various bodily places suitable for bleeding.<sup>146</sup>

Although cautery was not included by Roger des Moulins in his list of requirements of a doctor, it was mentioned in the *Assises*. It is not mentioned in any Hospitaller document but nevertheless would have been a treatment known to Hospital doctors. Cauterization with a heated metal rod was a very old technique carried out to stop bleeding or as a treatment on its own and was indigenous to the pre-Islamic world as well as to ancient Greece. Although well known and practiced in Islamic times there are few references to it in Islamic medical literature, suggesting that it did not need to be described because of its common use.<sup>147</sup>

Because Hospital doctors or barbers would have faced wounds treatable by cautery, they would have used this treatment in battlefield situations.<sup>148</sup> According to William of Tyre, in 1103 Baldwin I was ambushed and speared at Petra Incisa, near Tyre, and was treated by doctors who saved his life by using incisions and cautery: "*sed tandem medicorum adhibita sollicitudine post incisiones et cauteria*". The origin of the doctors is not mentioned by William of Tyre.<sup>149</sup> Albert of Aachen, in describing the same incident, reports that the king was taken to Jerusalem where skilful local doctors brought about his recovery.

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<sup>146</sup> Voigts and McVaugh, *Phlebotomy*, pp. 1-2.

<sup>147</sup> Savage-Smith, "Surgery in Islamic lands", p. 37; Mitchell, *Medicine in the Crusades*, pp. 181-2.

<sup>148</sup> Mitchell, *Medicine in the Crusades*, p. 150.

<sup>149</sup> William of Tyre, *Chronicon*, 10. 26. 37-38 (vol. 63A, p. 485).

Described as “most skilled doctors”, “*medicos peritissimos*”, suggests they were of Eastern origin.<sup>150</sup>

Al-Zahrawi Abū'l-Qasim Khalaf ibn Abbas, or Albucasis, who wrote in Spain during the tenth and eleventh centuries, believed that cautery had universal application for most ills. As a cautious doctor he believed that only surgeons who had ample experience should attempt cautery. He taught that it was important to diagnose correctly and realise the advantage of it over burning by means of chemical caustics. Even though the ancients differed over the dates and days of using burning throughout the year, Albucasis thought it was suitable at all times.<sup>151</sup>

Hospital doctors would have attended to patients suffering illnesses similar to those encountered in the Templar hospital and a comparison may be made to the Hierarchical Statutes of the Templars, considered to have been composed during the second half of the twelfth century. Within the chapters which come under the heading of “The *retrais* (revision) of the infirmarer”, there is information regarding the diseases, treatments and the general practices found in the infirmary. As with the Hospitallers, a doctor was required to visit the patients and to advise on any necessary treatments. Sickesses such as dysentery, vomiting and delirium were mentioned, together with serious wounds. Malaria or quartain fever was also mentioned.<sup>152</sup>

Templar doctors had to give medicines and syrup, operate on mortal wounds, and perform blood letting on the well and ill alike, although only with the

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<sup>150</sup> Albert of Aachen, *Historia*, IX. 22 (pp. 664-7).

<sup>151</sup> Abulcasis, *On surgery*, pp. vii, 16-18; Mitchell, *Medicine in the Crusades*, p. 116.

permission of the Master. The infirmarian was to have the use of the cellar, the large kitchen, the oven, pigsty, henhouse and gardens, and to be supplied with money for the patients' medicines. The patients' food was carefully watched and controlled for the sake of dietary modification.

The dietary practice of the Hospital, according to the Unknown Pilgrim played an important part in the healing process.<sup>153</sup> In addition to the statutes of Roger des Moulins of 1182, which stipulated that the hospital needed doctors to examine urine, diagnose diseases, and administer appropriate medication,<sup>154</sup> the Old French version of the "Administrative regulations for the Hospital" emphasized the need to control the diet of patients.<sup>155</sup> The preparation and presentation of food was an important aspect of hospital care in Byzantine, Muslim, and some Western hospitals. As with the Templars, the Hospitallers and Teutonic orders also used and followed dietaries.

The *typikon* of the Pantocrator Hospital in Constantinople gave details regarding its food and meals for the patients and directed that they were to be given two meals a day. Since the normal Byzantine diet for the very sick in hospital was meatless, the bread was served with vegetables and wine.<sup>156</sup> By comparison, in the Jerusalem Hospital the sick had fresh meat two days a week. Beef or mutton was to be served while the sicker patients were to be served

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<sup>152</sup> Upton-Ward, *Rule of the Templars*, pp. 65-6.

<sup>153</sup> Kedar, "The Jerusalem Hospital", fol. 136r (pp. 19-20)

<sup>154</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627; Mitchell, *Medicine in the Crusades*, p. 57.

<sup>155</sup> Edgington, "Administrative regulations for the Hospital", pp. 24-5.

<sup>156</sup> Miller, *Birth of hospital*, p. 15.



chicken.<sup>157</sup> This comparison of diets suggests that culture played a part in the dietary regimes of each hospital.

In general, the Byzantines sweetened water with wine and boiled honey in their hospitals, thinking it to be more nutritious. Heavier food such as meat, poultry and fish were served to some convalescents with thick red wine mixed with honey or raisins. This was thought to build up the patient's blood. Any patient suffering from an acute disease was given barley water mixed with opium juice when he was not sleeping well.<sup>158</sup>

A comparison of the dietary regimes of the Hospitallers, Templars and Teutonic knights by Mitchell finds them to have been similar in that each agreed on the forbidden foods. In contrasting the three Frankish diets with the Eastern diets of Oribasius and Maimonides, he finds that the Frankish diets followed them closely. However, the Frankish diets of the Holy Land disagreed with the those of Theodorich and Salerno on a number of points. Allowing for the limitation of his survey he concludes that each may have drawn up its own diet, in the course of which doctors would have played their part. He also thinks that because of the similarities between the Frankish and Eastern authors it may mean that the Eastern influences dominated in other medical and surgical treatments as well.<sup>159</sup>

Even though the Jerusalem Hospital was established to accommodate visiting pilgrims, and as such offered caritative care, it also grew to include medical service for the sick. Because of its location in the East, Byzantine and Muslim medical cultures must have influenced it. As the twelfth century

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<sup>157</sup> Kedar, "Jerusalem Hospital", fol. 136r (pp. 19-20).

<sup>158</sup> Risse, *Mending bodies*, p. 131.

advanced, it introduced both physicians and surgeons similar to those who practised in the Middle East. The doctors applied the basic concepts of the prevalent Galenic school of medicine and worked according to the Hospital and *Assises* standards of the Kingdom of Jerusalem. Although nothing is directly known of them, or of their cultural backgrounds; the circumstantial evidence suggests they may have come from Byzantine, Islamic or Jewish cultures in the twelfth century or, perhaps European in the thirteenth.

In the introduction of doctors and Middle Eastern medical practices, as has been shown by the similarity of treatments offered in the Hospital and the *Assises de la Cour des Bourgeois*, the serving brothers may be said to have made their finest achievement. This standard of hospital medicine and nursing and the introduction of a medical staff into a hospital was the forerunner of future Western methods of caring for the sick. Perhaps the clearest example of admiration and respect for the work of the serving brothers in Jerusalem was given by Saladin, when he permitted ten serving brothers to remain in the city for twelve months after its fall, to complete their nursing responsibilities to their patients.<sup>160</sup>

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<sup>159</sup> Mitchell, *Medicine in the Crusades*, pp. 99-103.

<sup>160</sup> Benedict of Peterborough, *Gesta regis Henrici secundi*, p. 20.

## Chapter 12

### The Serving Brothers in Acre

The serving brothers were slow to recover their caritative work in Acre and yet after reassembling their organization, although subservient to the knights, they continued their conscientious endeavours under new conditions. They continued to receive support for their caritative service and found sympathy in Europe, especially from noble women and families. However, gifts to the Order were at a lower level than previously. The time spent in Acre was a foretaste of what was to be the position of the serving brothers in the Order of St John in the future.

When Saladin captured Acre on 9 July 1187, and then Jerusalem on 2 October 1187, the Order of St John lost its two main hospitals in the Holy Land. The Jerusalem Hospital had been the centre of its organisation and the chief reason for its existence and its loss resulted in a complete change of strategy for the Order. When the Third Crusade recaptured Acre in 1191 the Hospitallers were able to re-establish themselves in the city and the military brothers took on more of the character of European knights.<sup>1</sup> The serving brothers became subsidiary within the structure of the Order.

During the five years between the loss of Jerusalem and the recapture of Acre, the Hospitallers moved to Margat on the frontiers of Antioch and Tripoli, which had only come into their possession in February 1186, in order to secure their situation.<sup>2</sup> The caritative work of the serving brothers was

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<sup>1</sup> Statutes of Alfonso of Portugal, 1204-1206, Delaville le Roulx, *Cartulaire*, Tomb 2, no. 1192.

<sup>2</sup> King, *Rule, statutes, customs*, p. 5.

severely handicapped. The situation improved after the Third Crusade when Acre was recaptured because the Order again occupied its hospital there and the serving brothers re-established their caritative service to the poor and sick within the city.<sup>3</sup>

The years following 1187 were full of constant tension for the Order. Their knights were part of the attempt to re-establish Frankish rule and as part of Richard's army they took a leading part in the battle of Arsuf and the attempted capture of Jerusalem in 1192.<sup>4</sup> The Hospital and Temple were taken into King Richard's confidence on a number of occasions especially at Jaffa when the king was in poor health.<sup>5</sup> Because at that time the leadership of the Hospital was concerned with military activities there was little opportunity for the Order to be greatly involved in the ministry to the sick and pilgrims.

The change in the organisation of the Order was reflected in the statutes in instructions for the knights. Their equipment, their mounts and the procedure to follow in creating a knight were outlined in the statutes of Alfonso of Portugal when he became Master around 1204. Soon after, he summoned the Chapter General to a meeting at Margat. His statutes made only token reference to a ministry for the sick in paragraph two, decreeing that the sick were to be given all care as in the past and all services to the sick were to be maintained. This presumably referred to the Statutes of Jobert and Roger des Moulins and indicated a continuing, though reduced, service to the sick. The

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<sup>3</sup> *Itinerarium peregrinorum*, p. 234.

<sup>4</sup> *Itinerarium peregrinorum*, pp. 260, 266-70, 308, 381-2.

<sup>5</sup> *Itinerarium peregrinorum*, p. 426.

maintenance of children was also referred to, as well as distributing cloaks, boots and caps to the poor sick.<sup>6</sup>

In 1262 Hugh Revel tried to reorganise the Order and set down the responsibilities of the Master, bailiffs, priors and knights, as well as clarifying the discipline necessary for the brothers' way of life. During his Magistracy six groups of statutes, containing a total of one hundred and four statutes were issued. But of this number only six made any reference to the work of serving the sick.

Examination of the succeeding statutes, *esgarts*, *usances* and other documents shows that most of the thirteenth-century legislation of the Hospital gave little or no consideration to the medical or convalescent work of the Hospital or to the religious beliefs of the brothers. *Esgarts* were judgements made by the General Chapter, *esgarts des frères*, in special cases which concerned individual brothers, and which were then applied generally. *Usances* were written customs of the Order, which were composed by the *prud' hommes*, wise counsellors.

The tenor of the legislation illustrates that the Order had changed direction and had become centred on the military brothers, who were by this time knights. The Master was given special consideration in these matters, as were other officers down to the brother knights. The structure of command among the knights was detailed and the military brothers were positioned in order under the Bailiffs, who were in turn subject to the Marshall.<sup>7</sup>

In Raymond's Rule, as well as in the statutes of Jobert and of Roger

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<sup>6</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §2.

<sup>7</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §§16-17.

des Moulins, no specific military titles had been used. Jobert included a *preceptor*, teacher of the House, and a *hospitalarius*, hospitaller, while Roger used terms such as *prior*, prior, *baylivus*, bailiff, *elemosinarius*, almoner and *fratres armorum*, brothers of arms.<sup>8</sup> The Statutes of 1206, however, designated military ranks and titles, suggesting that they had come into use during the years immediately prior to Alfonso's magistracy. He introduced such titles as *marescallus*, marshall, *tricolorium*, turcopole, *vexilliferum*, standard bearer, *frater miles*, brother knight, and *fratres servientes qui serviunt de armis*, brother sergeants in arms.<sup>9</sup>

The emphasis on the military functions of the Order was superimposed over the caritative ministry of the serving brothers. The word sergeant (servant), became prefixed by the word brother (brother sergeant) to describe a brother sergeant in arms. A distinction was made between brothers who served in the hospital and those who formed part of a knight's entourage as military brothers.<sup>10</sup>

Alfonso stipulated that no one could become a knight in the Order, unless this had been promised to him before he received his habit. Nor could a brother become a knight unless he was old enough to become one in secular life. Exceptions were made for the sons of nobles educated within the Order and of age to receive knighthood. These rules were subject to the will of the Master or Commander, with the agreement of the brothers.<sup>11</sup> The new position of the knights meant that they were certain to dominate those brothers who remained humble servants of the sick. As the sons of nobility

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<sup>8</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos. 494, 504, 627.

<sup>9</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §§16-17.

<sup>10</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §17.

<sup>11</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193 Latin §22.

became members of the Order, their cultural outlook and superior social position undermined the position of the serving brothers.<sup>12</sup>

The deviation from the founding vocation of the Order was caused by circumstances beyond the control of the Order. The loss of Jerusalem and the shock of at losing Acre meant that the Order had to rethink its primary aim. Without its main Hospital there was no way of continuing its original purpose alone. The military brothers became the obvious means of fulfilling the need of the moment. An extra clause was added to the Rule of Raymond du Puy during Alfonso's magistracy, stating that: "Firstly, I ordain that all the brothers engaged in the service of the poor and the defence of the Catholic Faith shall keep with God's help the three promises that they have made". The words "the defence of the Catholic Faith" indicated that the Order's aims had taken a significant turn.<sup>13</sup>

The Order had possessed some place in Acre since 1110 although little is known about it.<sup>14</sup> As well as ministering to pilgrims and the sick there, the Order had carried out social welfare and educational work. In 1175 agreement was reached between the Hospital and the bishop, who said that he would not hinder the Order's education of children.<sup>15</sup> Just prior to the re-occupation of Acre, on 22<sup>nd</sup> August 1190, Pope Clement III again gave the Hospitallers permission to baptize babies or children left at the door of the Hospital.<sup>16</sup> Although given while the serving brothers were at Margat, it shows that they continued to care for abandoned children.

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<sup>12</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §§22,27.

<sup>13</sup> King, *Rule, statutes, customs* p. 20, n.1.

<sup>14</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 20.

<sup>15</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 471.

<sup>16</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 104, 898.

After Acre was retaken the Hospitallers were able to re-establish their hospital in the city and they took the opportunity to extend their compound.<sup>17</sup> Their first House in Jerusalem had been turned into a seminary for Muslim students.<sup>18</sup> The size, grandeur and importance of the Acre complex and Hospital came to compare more than favourably with its predecessor in Jerusalem. It became well known and widely appreciated by visitors returning to the West.<sup>19</sup>

A great deal of archaeological excavation has been carried out in recent years in Acre and the largest complex in the city has been identified as the area occupied by the Order of St John. In fact the identification of the entire Hospitaller fortress is one of the most important pieces of evidence for the extent of the Crusader City. The most imposing building was the *curia* or headquarters situated in the centre of the city.<sup>20</sup> A refectory, dormitory, cloister, reception hall, latrines, barracks and bath house have also been discovered.<sup>21</sup>

Four towers surrounded the area used by the Hospitallers, of which the highest and the best fortified was known as the *hospitale*.<sup>22</sup> Judging from contemporary illustrations of the complex as well as from archaeological evidence,<sup>23</sup> the first floor of the *hospitale* may have been pillared and this allowed a castle to be built above it, which became the residence of the Master.

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<sup>17</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 917.

<sup>18</sup> Dichter, *Orders and churches*, p. 50.

<sup>19</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1591.

<sup>20</sup> Kesten, *Acre*, p. 86; Stern, *New Encyclopaedia*, p. 26.

<sup>21</sup> Riley-Smith, "Layout of the Hospital in Acre, p. 758; Goldmann, *Convent of St John*, pp. 7-8; Goldmann, "Hospice of the Knights", pp. 188-9; Barber, "Charitable and Medical activities", p.153.

<sup>22</sup> Dichter, *Orders and churches*, p. 50.

<sup>23</sup> Dichter, *Orders and churches*, p. 51; King, *Rule, statutes, customs*, p. 152.



Recent excavations have located the positions of the church of St John, the courtyard, the latrine tower and the storehouses,<sup>24</sup> although the whereabouts of the infirmary and the hospital for the sick have not been confirmed. Despite this, the overall size of the Hospitaller compound suggests that the hospital would have been comparatively large. The most likely positions seem to be near the conventual church, which, of course, was important for the spiritual ministry to the sick.<sup>25</sup>

The latrines in the buildings of the Hospitallers in Acre have also been excavated and it has been shown that many “who used the latrines were infested with parasitic intestinal worms such as roundworm, whipworm and fish tapeworm”.<sup>26</sup> Infestations of any one of these would have weakened health and may have contributed to the death of any who were starving. These worms would have digested food eaten, resulting in loss of energy because less nutrients would have been available.<sup>27</sup> Mitchell and Stern believe that during times of famine such people would have been at greater risk of starvation than others. Patients in the Hospital would have been fed adequately of course.<sup>28</sup> Anyone infested with roundworm may have suffered inflammation of the lungs and parts of the intestinal tract which, again, could have produced malnutrition. Whipworms also contributed to malnutrition. Fish

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<sup>24</sup> Riley-Smith, “Layout of the Hospital in Acre”, Recent plan of the compound by the Israel antiquities authority, p. 754.

<sup>25</sup> Riley-Smith, “Layout of the Hospital in Acre”, pp. 760-1; Delaville le Roulx, *Cartulaire*, vol. 3, no. 3075.

<sup>26</sup> Mitchell, *Medicine in the Crusades*, p. 66; Mitchell and Stern, “Parasitic intestinal helminth ova”, pp. 209-212.

<sup>27</sup> Mitchell and Stern, “Parasitic intestinal helminth ova”, p. 210; Muller and Baker, *Medical parasitology*, pp. 76-100.

<sup>28</sup> Mitchell and Stern, “Parasitic intestinal helminth ova”, p. 210.

tapeworm could have caused anaemia, nerve damage and numbness in hands and feet.<sup>29</sup>

That the ministry of the serving brothers in Acre continued is shown by the nursing received by many who were patients in the Infirmary for the brothers and in the Hospital for the poor and pilgrims.<sup>30</sup> Physicians and surgeons continued to be employed and the previous standards of the Jerusalem Hospital were maintained.<sup>31</sup> When Prince Edward of England was in the Holy Land on Crusade and was negotiating with various groups, Baibars decided to eliminate him. On 16 June 1272 an assassin disguised as a native Christian entered his accommodation under the pretence of seeking counsel and stabbed him with a poisoned dagger. Although not fatal, the wound was serious enough to keep him in care until he left Palestine. The Master of the Hospital arranged for him to be cared for, by the serving brothers in Acre.<sup>32</sup>

The thirteenth-century Escorial manuscript of the *Cantigas de Santa Maria* provides evidence of the nursing carried out by the serving brothers. The decorations depicted on the arches drawn in this picture show both a large building and a separate tower. The drawings suggest that the scene is of the Hospital in Acre since it did have four towers, whereas the Jerusalem Hospital did not.<sup>33</sup>

The scene shows seven patients lying in beds, four of whom have

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<sup>29</sup> Mitchell and Stern, "Parasitic intestinal helminth ova", p. 210.

<sup>30</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, §125; vol. 3, no. 3075, §5; no. 3039, §§37-39; no. 3075, §5 .

<sup>31</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3317, §1 (*medici phisici et chirurgici*).

<sup>32</sup> "Chronicon Hanoniense", vol. 25, p. 464.

<sup>33</sup> Cantiga LXVIII, Illustrated in Humphrey-Smith, *Hugh Revel*, p. 6; King, *Rule, statutes, customs*, p. 152.

bandages around their heads. Two nurses are feeding two patients and one nurse is arranging the bed of a patient. The nurse attending to the comfort of a patient is drawn as a sister or woman servant. Of the other two male nurses one is dressed as a monk, a serving brother, and the second is dressed more simply, evidently as assistant or servant.

John of Joinville's experience of sickness, fear of death, and its frequency in Acre in 1250, illustrates the type of situation which faced patients in the care of the serving brothers. While in Acre he became seriously ill and the bishop of Acre lent him the house of the priest of St Michael's church. He was confined to bed, as were many of his party who had contracted the same illness, and at times felt so sick that he feared death. There was a small door at the head of his bed which led into the church and he could hear voices raised in the building. As he lay there he claimed that he heard on twenty or more occasions each day brothers or pallbearers carrying dead patients into the church and to prepare them for burial.<sup>34</sup> As the processions entered the church, he heard the chant *Libera me, Domine* being sung. These words form part of a Responsory chant intoned at funerals which is sung in the first person and which pleads for mercy at the day of last judgement.

The work of serving sick pilgrims with the assistance of sisters continued in the Hospital as a house was provided for them in Acre.<sup>35</sup> One of Hugh's statutes claimed that no brother or bailiff was to appoint a sister without the permission of the Master "this side of the sea". This could be relaxed, however, to allow priors to accept sisters into a convent after due

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<sup>34</sup> Joinville, *The life of St Louis*, p. 129.

<sup>35</sup> Luttrell, Nicholson, *Hospital Women*, p. 8.

consideration, as long as the candidate was not young or of “suspicious age”. This applied to other convents as well as Acre.<sup>36</sup>

As well as sisters, the Acre Hospital appears to have had other women helpers. Don Juan Manuel, the grandson of Ferdinand III of Castile was reputed to be the most important prose writer of the fourteenth century in Spain. He accepted the legend of princess Scania, a daughter of James I of Aragon, who is purported to have lived the life of a servant in the Hospital for pilgrims in Acre during the thirteenth-century.<sup>37</sup>

Scania was a real person mentioned in her mother’s will in 1275.<sup>38</sup> She had been promised in marriage twice but refused and retired to Acre where it was said she lived as an unknown servant of the poor.<sup>39</sup> She died in 1275 and was interred in the Cistercian monastery of Vallbona where her mausoleum still exists.<sup>40</sup>

Don Juan Manuel also claimed that there was great sympathy and support for the Hospitallers among the nobles of Spain during the twelfth and thirteenth centuries. He quoted the example of Sancha, the great grandmother of Scania, who was queen of Castile. She and her husband, Alfonso II of Aragon-Catalonia, 1162-1196, founded a convent which she presented to the Order and of which for a time she was the superior.<sup>41</sup> Jaspert accepts the legend of Scania.<sup>42</sup>

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<sup>36</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3039, Latin §22.

<sup>37</sup> Mitchell, *Medicine in the Crusades*, pp. 82-83; Luttrell, “Hospitalier of Alguaire”, p. 219.

<sup>38</sup> Jaspert, “A Mediterranean dynasty”, pp. 105-135; Don Juan Manuel, *Obras completas*, pp. 117-41.

<sup>39</sup> Jaspert, “A Mediterranean dynasty”, pp. 111-112.

<sup>40</sup> Jaspert, “A Mediterranean dynasty”, pp. 111-112.

<sup>41</sup> Jaspert, “A Mediterranean dynasty”, p. 113; King, *Knights Hospitallers*, pp. 160-3.

<sup>42</sup> Jaspert, “A Mediterranean dynasty”, p. 112; Struckmeyer, *Female Hospitallers*, pp. 132-8.

The fact that brothers could be bled at certain times, presumably for their good health, suggests one aspect of the work of the doctors at Acre.<sup>43</sup> But as well as doctors there would have been need of servants as cooks, cleaners, general labourers, and in other roles not mentioned in the records. To organise the Hospital the serving brothers would have had authority over employees, or perhaps even slaves. Hugh Revel's statutes directed that a slave could only be baptised or enfranchised with the permission of the Master, except for those who wanted to buy their freedom or who were old or sickly.<sup>44</sup>

In 1270 Hugh declared that when the brothers were specifically engaged in deeds of arms they were under the authority of the Marshall.<sup>45</sup> The question then arises as to what they did in Acre when they had time on their hands for other work? Since knights, or in earlier times military brothers, were not engaged continually in warfare, they may have been available to perform other duties when required.

Brother sergeants also may have been available. In 1206 one brother sergeant was included, together with a priest and a knight, to make up the first committee for the selection of a new Master.<sup>46</sup> In the legislation up to 1291, there was no mention of the number of military sergeants used in Palestine, but in 1303 at Limassol in Cyprus the number was given as ten.<sup>47</sup> Although they were also employed in warfare they, and the knights would have had

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<sup>43</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, Latin §78, French §105.

<sup>44</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3039, French §12, Latin §§48-50.

<sup>45</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3396, French §3.

<sup>46</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, French §16.

<sup>47</sup> King, *Rule, statutes, customs*, p.12.

peaceful periods when they were stationed in the Hospital and may have been delegated other work.

As well as brother sergeants of the Order, there were sergeants who were servants. These were paid and served in the practical work of the House and Hospital. They were employed for a year and received their wage at the end of it. If they were unsatisfactory, they were paid off and dismissed. Arrangements for these servants, dealing with their treatment, behaviour, and discipline were outlined in the *Esgarts*.<sup>48</sup>

As well as serving the poor in the Hospital, in Acre the serving brothers continued to bury the dead.<sup>49</sup> In 1200 the Bishop gave the Order a cemetery alongside the city walls, where it could bury those who died in the Hospital.<sup>50</sup> Since John of Würzburg claimed that in Jerusalem the Hospitallers buried fifty dead a day, it is not surprising that John of Joinville wrote that he saw twenty dead a day buried in Acre.<sup>51</sup> Prior to 1200 the dead must have been buried in the public cemetery of the city.<sup>52</sup> In 1229 Hartmann IV and his nephew Hartmann V, counts of Kyborg in Swabia, gave a gift to the Order after it had conducted a funeral for Hartmann IV's brother Werner and later buried him as requested in Jerusalem.<sup>53</sup>

Between 1228 and 1244 the Holy City was in Western hands after Frederick II of Holstein gained an agreement with al-Nasir the Sultan of Damascus. Neither the Hospitallers nor the Templars were pleased with this peace treaty which had been gained by an Emperor who had been

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<sup>48</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 2213, Latin §§12-19.

<sup>49</sup> Barber, "Charitable and medical activities", p. 160.

<sup>50</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 1113.

<sup>51</sup> John of Würzburg, pp. 131-2, ll. 1276-1310; Joinville, *The Life of St Louis*, p. 204.

<sup>52</sup> Mitchell, *Medicine in the Crusades*, p. 80.

<sup>53</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1937; Barber, "Charitable and medical activities", p. 160.

excommunicated by the Pope. As well there is no record of any serving brothers again taking up residence within their old hospital, which had been used as the residence of the Emperor in the interim.<sup>54</sup>

Although on occasions the Hospitallers assisted in negotiating the release of Christian prisoners from the Muslims, there is no direct mention of serving brothers being involved. It may have been, however, that they were used as messengers or as assistants to nurse those who needed help, and certainly they were responsible for assisting financially those who were released.<sup>55</sup> In the case of Peter of Queivilliers, who was in prison in Syria, the Hospitaller Master, Garin of Montaigu, was asked to act to secure his freedom. In 1227 his son, William of Queivilliers, visited the East in an effort to have his father released, but while negotiations were proceeding his father died. However, William confirmed a previously arranged gift to the Order and admired the “immense charity” it had shown.<sup>56</sup>

The caritative work of the serving brothers continued to be acknowledged by those who had been assisted and by those who knew of their reputation.<sup>57</sup> However, there was a decline in Western and local support for the Hospital in Acre by comparison to what it had received in Jerusalem.<sup>58</sup> Documents included by Delaville le Roulx reveal this decline as well as a change in emphasis in the tone of gifts to the Order. Of over four thousand

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<sup>54</sup> Runciman, *History of the Crusades* 3, p. 188.

<sup>55</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627, Confirmation, §5.

<sup>56</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1861; Barber, “Charitable and medical activities”, pp. 159-60.

<sup>57</sup> Nicholson, *Templars, Hospitallers and Teutonic Knights*, pp. 63, 121.

<sup>58</sup> Riley-Smith, *Knights*, pp. 66, 334.

communications recorded between 1200 and 1291 only a small number praised the work of the serving brothers and their acts of mercy.<sup>59</sup>

During that time less than fifty gifts of finance, land, houses and other property were given to the Order,<sup>60</sup> but it did purchase land and property.<sup>61</sup> Most gifts were donated in a general sense to the Order or to local commanderies and did not include mention of the caritative work. No Papal bulls encouraged the charitable work of the serving brothers; although, Popes did support various aspects of the life of the Order by renewals of previous bulls,<sup>62</sup> support for chaplains and churches of the Order,<sup>63</sup> and Papal protection for the brothers.<sup>64</sup> The very different situation of the Order in the Holy Land was no doubt an important contributing factor in this development.<sup>65</sup>

Recognition of the caritative work of mercy was received from Andrew III, Lord of Vitré, in 1240,<sup>66</sup> Geoffrey IV, Lord of Preully, also in 1240,<sup>67</sup> and King Louis IX of France.<sup>68</sup> In praising the care given to the sick poor and the burial of the dead in 1217-18, Andrew of Hungary also mentioned the military activities of the Order. Bela IV of Hungary was another who supported the work of the Hospitallers in 1258.<sup>69</sup>

The Hospitallers' reputation for charity and generosity also found its

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<sup>59</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1131 to vol. 3, no. 4155.

<sup>60</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 938; vol. 2, nos 1145, 1276, 2015, 2033, 2483, 2607, 2661, 2662, 2714, 2721, 2949; vol. 3, nos 3051, 3213.

<sup>61</sup> Delaville le Roulx, *Cartulaire*, vol. 3, nos 3326, 3334, 3514.

<sup>62</sup> Delaville le Roulx, *Cartulaire*, vol. 1, nos 942, 943, 1946 and vol. 2, no. 1139.

<sup>63</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 1013.

<sup>64</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1136.

<sup>65</sup> Nicholson, *Templars, Hospitallers and Teutonic Knights*, pp. 60-61.

<sup>66</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2257.

<sup>67</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2258.

<sup>68</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3303.

<sup>69</sup> Delaville le Roulx, *Cartulaire*, vol. 2, nos 1590, 1591, 1602, 1603, 2896.



way into entertainment in the West. Around 1260 the Minstrel of Reims related a fictitious legend about Saladin's curiosity taking him to the Hospital in Acre. He had supposedly heard that no sick person was turned away from the Hospital and that no request was refused. To test this for himself, he went to Acre disguised as a sick and wretched pilgrim and asked for shelter. He was welcomed and given a bed. After a long sleep he was asked to take food but begged for the right foot of the Grand Master's horse, to which the Grand Master duly agreed. At the last moment the sultan changed his mind and eventually left for home. Because of his admiration of the way he was treated he gave in perpetuity to the Hospital, one thousand gold bezants for blankets and shrouds. This was supposedly recorded in a charter given to the Hospital of St John although, of course, no such charter survives.<sup>70</sup>

As well as receiving compliments, the Hospitallers were also criticised, both from within and without. At a meeting of conventual bailiffs in Limassol in 1296, the criticism was made that the Order had spent on the military the goods which should have been spent on the sick and the poor.<sup>71</sup>

A similar criticism had been made much earlier by Guiot de Povins, a French troubadour who later became a Cluniac monk, in *La Bible*, which was written around 1180 as a satire on contemporary morals.<sup>72</sup> He had travelled widely in the service of the Counts of Champagne, including in the Holy Land. In his poem he said that the Templars and Hospitallers had done both good and bad things, although later he emphasised what he considered to be the main fault of the Hospitallers. He claimed that they had moved away from

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<sup>70</sup> Levine *Minstrel's chronicle*, pp. 53-55; Nicholson, *Love, war, and the Grail*, p. 65.

<sup>71</sup> Riley-Smith, *Knights*, pp. 198, 331; Delaville le Roulx, vol. 3, no. 4310.

<sup>72</sup> Nicholson, *Knights Hospitaller*, p. 25.

their original purpose and that he had not seen any hospitality in their work. In this they were not acting as one would expect because they had forgotten their name.<sup>73</sup>

As well as the ministry to the poor and sick, Alfonso's Statutes included a statute describing an infirmary for sick brothers. These were allowed three days of treatment in their chambers before being transferred to the infirmary. Instructions were given that they were not to eat with the Convent but rather alongside the Infirmary and near the Convent church. They were to be provided with whatever they needed, if it was available in the House. If possible they were to be provided with two meat dishes a day, and if not, they were to be given one meat dish prepared in two ways. Bread of the Convent was to be provided, and if wine of the House was not suitable for ill patients it was to be changed accordingly.<sup>74</sup> This paralleled the treatment of sick pilgrims.

Since Jerusalem was now in Muslim hands, it would be expected that fewer pilgrims visited Acre and that a large number of those treated in the Hospital, would have been soldiers or civilians. However, as in most monasteries, the brothers would have had a separate infirmary.<sup>75</sup> In Hugh's statutes it was decreed that the brother in charge of the infirmary, and also the doctor, were to visit sick brothers each morning and evening. Any brother who became ill was to bring his bed into the infirmary together with his arms and if

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<sup>73</sup> Nicholson, *Knights Hospitaller*, p. 25; Guiot de Provins, *Œuvres*, p. 27, ll. 571-572 and p. 66, ll. 1801-1805.

<sup>74</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, Latin §7.

<sup>75</sup> Dichter, *Orders and churches*, p. 51.

he died his clothes and weapons were to be handed over to the *drapier* and Marshall respectively.<sup>76</sup>

There is another reference to the work in the Hospital in Hugh's Statutes in that the prior of Acre was permitted to have the use of four priest-vicars, one caravan priest, two deacons, four acolytes and one *mareglie*, lay assistant. He was also allowed to have one priest and an acolyte for the Hospital.<sup>77</sup>

Hugh's statutes also mentioned the poor sick specifically in decreeing in 1264 that if a deceased brother's various rugs and bed clothes were being divided up upon his death, all silken coverings, *soient couverts*, were to be given to "our lords the sick".<sup>78</sup> This was repeated in the following year (1265), when silken coverlets were to be given to the sick poor.<sup>79</sup> Hugh's final statute declared that legacies which had been left expressly for the sick were to be handed to the Hospitaller while those given generally to the Hospital were to go to the treasury.<sup>80</sup>

The *Esgarts* and *Usances* were not dated and yet they followed closely the same pattern set out by Hugh Revel in his statutes. They dealt mainly with the way of life and practice of the brethren, but failed to break new ground regarding policy or outward circumstances. Delaville le Roulx dated them to before the statutes, which meant they came shortly before Hugh's magistracy. They were most probably composed when the Order was in Acre as they dealt mainly with the new regime.

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<sup>76</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3039, Latin §37.

<sup>77</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3075, French §5.

<sup>78</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3075, French §8.

<sup>79</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3104, Latin §2.

<sup>80</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3396, Latin §6.

The *Esgarts* did not mention service to the sick or poor and the nearest thing to any caritative function of the Hospital mentioned, was food being served to brothers in the infirmary and another ruling on the bleeding of brothers.<sup>81</sup> Examination of the *Usances* does throw some light on the work for the sick in the Hospital in Acre. At a Chapter-General meeting, the leading officers were to present their reports. After the Master came the Grand Commander then the Marshall, followed by the *hospitalier*, who handed over his seal and purse as well as a list of provisions in the Hospital. Then the *drapier*, treasurer, and bailiffs were to present their reports. A priest and clerics accompanied by the *seneschal* or steward of the Hospital were to visit the Hospital for the Sick for evening prayers.<sup>82</sup>

Although the prayer used by the *seneschal* or another brother has not been recorded, Sinclair claims to have found the source of its inspiration in a French prayer offered in medieval parishes during Mass which was given the title *oratio*. It was said in the vernacular, to allow it to be comprehended easily by the congregation. As the Hospital prayer did not take place during Mass, it did not need a priest to recite it and a brother could say it in a ward.<sup>83</sup>

Sinclair believes that the Hospital did not copy an *Oratio* but rather adapted its style to suit the need. The fact that the Hospital prayer was in French rather than Latin suggests that it was indeed based upon an *Oratio*. If this is correct, then the prayer used by the Seneschal may have included petitions for peace, for the Pope, prelates and priests, lords temporal, toilers on land and sea, and protection of pilgrims. As well it would have included

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<sup>81</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, Latin §§72, 78.

<sup>82</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, Latin §§109, 125.

<sup>83</sup> Sinclair, "The French prayer", pp. 484-5.

benefactors, solace and comfort of the sick, Hospital brothers and servants, captives of the Saracens, and mercy for departed souls.<sup>84</sup>

The last two mentions of the sick in the *Usances* of the Hospital were contained in the receiving of a *frater* and a *confrater*. When a candidate for brotherhood was presented before the Chapter, he was asked certain questions by the Master, or by whoever was conducting the Chapter. After the candidate had explained to him the advantages and disadvantages of becoming a brother, he was asked if he was willing to endure the hardships required of him, to which question he answered, "Yes, if it please God". After further questions he placed his hand on a Missal and was asked to promise obedience, chastity, and to live without property of his own. Members of the Order then made another promise, which brothers in no other orders made, to be "the serf and slave of our lords the sick".<sup>85</sup>

A *confrater* was a layman who became an associate of the Order and who promised to help and to give a gift to the Order each year. In his admittance ceremony it was explained to him that the promises he was to make were to God, our Lady, our Lord St John the Baptist, and to our lords the sick. He was to realise that his commitment was made before God and that the real reason of him joining the Order was to contribute to the care of the sick.

The instructions for a man to become a *confrater* were introduced by the words that any *prud'homme* who wished to become a *confrater* was to be presented to an assembly of the appropriate House. *Prud'homme* meant

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<sup>84</sup> Meffert, *Caritas und Krankenwesen*, pp. 282-3.

<sup>85</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, Latin §122.

someone of sound repute from outside the Order. The applicant was asked to promise to be loyal, to defend the Order against malefactors, and to protect the goods of the House. He was to make the House aware of any anticipated trouble. If he wanted to join any religious order, it had to be the Hospital. After he had promised these things, he received permission to be buried in the Order's cemetery. He was then told that he would be included, with his parents and family, in the masses and prayers of the Order conducted throughout the world. These prayers were to continue until the Day of Judgement and it was hoped that he would then be given his just reward.<sup>86</sup>

The Statutes of Nicholas of 1278 and 1283 did not mention anything to do with the serving brothers or the poor or sick. In 1288 John de Villiers as Master enacted the last statutes of the Hospitallers in Acre and they also failed to deal with any caritative work of the Hospital. Nevertheless, the Master remained committed to maintain the work of caring for the poor and sick, with the advice of the brethren, and providing that service was obviously the responsibility of the serving brothers.<sup>87</sup>

Little caritative business needed to be discussed by the Chapter and Master in Acre and it appears that most of the caritative business of the Hospital was handled and decided upon by the hospitaller or infirmarian and his serving brothers. Thus, the part played by the hospitaller and the serving brothers in running the organisation of their Hospital was not recorded by documentation. Even the term "serving brother" does not appear in any of

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<sup>86</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 2213, Latin §122.

<sup>87</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, §1.

the statutes as a clearly expressed and essential functionary of the Hospital in the same way as the knights.

The legislation of the thirteenth century referred to all those in the Order as particular kinds of brothers or simply as a brother. The Statutes referred to brother bailiffs, brother priests, brother knights, brother sergeants in arms, brother sergeants,<sup>88</sup> and serving brothers, as well as some brothers who held particular titles. By general definition serving brothers were not involved with the military side of the Order and were subject to the hospitaller in charge of the management of the Convent. They also came under the infirmarian and served the poor, sick pilgrims and brothers.

It was stated that some brothers could not become knights because that required certain prerequisites. Hugh Revel stipulated that no prior, bailiff, or brother knight was permitted to make another brother into a knight unless there was authentic evidence that he was born of parents who bore noble names and arms.<sup>89</sup> This points to the serving brothers, not being considered important enough to be defined or mentioned, even though they were numerous in the Order during the twelfth and thirteenth centuries.<sup>90</sup>

The one obvious serving brother was the hospitaller, who was mentioned in the *Usances* and whose position was similar to that of the almoner. Their work was inter-connected. However the hospitaller also had responsibility for organising the medical and social work. As previously the almoner was to employ two sergeants who repaired robes for the poor. A brother shoemaker working alongside him had three sergeants to assist him

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<sup>88</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 226; vol. 2, no. 1193, §§7, 10, 11, 12 and no. 2213, §§89, 109.

<sup>89</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3039, Latin §19.

<sup>90</sup> Nicholson, *Knights Hospitaller*, p. 83.

repair the shoes of those in the Hospital.<sup>91</sup> All of these would have been serving brothers.

Serving brothers in Hospital service were also permitted to continue their previous trades,<sup>92</sup> provided that they were not given other positions of responsibility. The Order was comprised of serving brothers in various positions of work, as well as military brothers. Titles which applied to other serving brothers were brother of the *Parmentarie*, clothes storage, *drapier* and shoemaker and there were brother novices (*frere novice*).

There is no doubt of the existence of the Hospital's care and medical service to the brethren and the sick in Acre; however, because the term serving brother, or brother in service, was not used clearly in the legislation describing the work of the Hospital, one must have recourse to circumstantial evidence. In some situations in which they were not directly mentioned, they would have been included because of their essential work of organising and running the Hospital as a convent, nursing home, medical institution, and centre for other caritative ministries.

Serving brothers may have been present at the election of a new Master. After what became known as the Triumvirate was appointed, it fell to it, with the agreement of all brothers, to arrange for the election of a further ten brothers who were to assist in the election of the new Master. Since no record of the Triumvirate exists, King suggested that it was made up of three knights who were elected by each of the national groups of the

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<sup>91</sup> Delaville le Roulx, *Cartulaire*, vol. 1, no. 627, Confirmationes §4.

<sup>92</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193 Latin §21.



Order.<sup>93</sup> However, there is no mention that knights alone were eligible and it may have been possible for serving brothers to be included.<sup>94</sup>

The question arises as to whether or not serving brothers could attend the Chapter General. Because the Order continued to profess the care of the poor and sick, however, they must surely have been given a place or representation in the Chapter. The good customs of the house were clearly expressed in the statement that, the Order existed for the benefit of the poor and the House of the Hospital of the sick.

The section of Alfonso's statutes which covered the subject of calling the Chapter General together stated that the Master, the Convent, and the bailiffs were to attend. The Convent referred to the house of brothers living in the Hospital. King believes that the Bailiffs were the five Capitular Bailiffs who lived in the Convent. Certain conditions applied when the Convent as a whole was unable to attend a Chapter conducted in a place other than Acre. In that case the Master was to bring with him such brothers as the convent approved besides the Hospitaller, who was required to give his report. Again it would seem that on these occasions there was a strong possibility that serving brothers were present in Chapter.

If the Master was absent from the Hospital and unable to attend the Chapter General, again certain conditions were to prevail. The Marshall was to take counsel with the Convent and the bailiffs and take with him such brothers of the Convent in general as previously mentioned. This would mean those brothers who had been approved by the Convent.<sup>95</sup> In both of these

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<sup>93</sup> King, *Knights Hospitaller*, p. 10.

<sup>94</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, French §17.

<sup>95</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, §2.

situations the phrase “brothers of the convent” may have included some serving brothers since they were no doubt required to care for the practical needs of the travelling party.

Part of the business of the Chapter as described by Alfonso’s statutes was to handle problems faced by the bailiffs. If such a case came about, the wisest and most respected of the brothers were to advise the bailiffs. The decisions reached at a Chapter were to be discussed and considered by all brothers present. In reaching a decision the brothers were to do what seemed best to them. After a decision had been reached by the greater part of them it was to be maintained firmly in the future.<sup>96</sup> Again the phrase “the greater part of the brothers” implied inclusion of serving brothers.

When a Master was sick unto death he handed over his ring as a symbol of control to a trusted brother. After he died the business of the Order was to be handled by the Convent until a Chapter General had been assembled. The bailiffs and the most wise and discreet brothers were to be summoned and the Chapter was to choose a Master who was most suited to benefit the poor and the House of the Hospital.<sup>97</sup> It would have been unusual if the serving brothers, who were expected to be concerned for the poor and for the Hospital, had been excluded from the Chapter Meetings.

The years between 1187 and 1291 were full of challenge and uncertainty for the Order. The military brothers became more important to the kingdom than the work of caring for the poor and sick pilgrims and the character of the Order changed. This development was contrary to the origin

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<sup>96</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, §3.

<sup>97</sup> Delaville le Roulx, *Cartulaire*, vol. 2, no. 1193, §5.

intent of the Hospital and the caritative functions were forced to take second place. Although the statutes, *esgarts*, and *usances* did not attempt to justify this alteration in the balance of power, they did record its growth and effect.

Among the forces of change bearing on the Hospital were the politics of the kingdom, the situation of the frontier, and vigorous leadership by some of the Masters of the Order. However, despite the movement away from the serving brothers and their medical and social work, the Hospital did not totally ignore its earlier vocation. There remained a Hospital staff which was organized under the Hospitaller. Serving brothers continued to fulfil various positions within the Hospital supported by sergeants and other paid servants. It is also possible that knights, not engaged in warfare, assisted in some aspects of the running of the Hospital, or in the administration of the Order. Although not clearly defined in the Statutes, *esgarts*, or *usances* there is evidence that there were also sisters of St John or women servants working in the Hospital, as well as slaves.<sup>98</sup>

Despite the new situation of the serving brothers the reputation of the Hospital remained high in the opinion of many in the West, although support for their caritative functions became secondary to the needs of the knights and their military service. Nevertheless, the new emphasis did not go unnoticed and it provoked unsympathetic criticism from some in the West for the way in which the various caritative services had diminished and had been sidelined in favour of the military. The serving brothers had not only lost control of their Order, they had become secondary to the knights and their purposes.

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<sup>98</sup> Delaville le Roulx, *Cartulaire*, vol. 3, no. 3039, Latin §48.

## Conclusion

The caritative part played by the serving brothers of the Order of St John has long been neglected and even ridiculed by some authors and it has been necessary to address this oversight. The term "serving brothers" has been interpreted to apply to those monks of the Order who dedicated their lives as Hospitallers in order to care for the pilgrims, poor and sick. So as to give due credit to their full achievements it has been necessary to describe their caritative work within the general history of the Order between 1070 and 1292, when they left the Holy Land. In following this pattern it has been possible to fully understand the physical, spiritual and psychological demands which were made upon them.

No author has set out to address this neglect of the ministry of the serving brothers by examining the available primary sources and secondary sources which make reference to them. This has meant that every source available has needed to be read and studied in order to comprehend the knowledge available, as well as the various opinions and researches which have helped to shape the progress of the written history of the Order. Primary sources have centred on correspondence and gifts to the Order, while secondary authors have dealt with aspects of the life and service of the serving brothers, without attempting to describe their progress and contributions to the Order.

When the Amalfitan merchants founded a building in Jerusalem during the eleventh century they could not have imagined the ultimate result of their action. It was before the First Crusade, before the increase in the number of

pilgrims visiting the Holy Land, and before the West had caught up with the medical and hospital standards of the Middle East. The sole aim of the Amalfitans was to provide a place of care and security for their people visiting Jerusalem and in order to do this they staffed it with Benedictine monks who would offer shelter and hospitality according to their Rule.

Throughout the early chapters it has been important to emphasize that caritative service was the founding principle of the Order. It was because of this principle that the Order became highly regarded in the West and received from the Church and laity their wholehearted support. It was necessary to approach this subject in such a way in order to fully understand what the serving brothers had achieved and what was taken away from them by unfolding circumstances and the formation of the knights. William of Tyre and other Church leaders greatly appreciated this early work, though later criticized the Order from a Church point of view after the military side of the Order became predominant. The Miraculous myth endeavoured to foster the Order's divine foundation and promoted the importance of caritative ministry.

Up to this point no author has accepted that it was Benedictines who established St Mary of the Latins and has endeavoured to show how these monks were those most suitable to perform the type of work expected of Hospitallers. Benedict listed numerous good works in his Rule and his was the only rule which tried to cater for the needs of pilgrims, poor and sick. It has also been helpful to point out, that St Mary of the Latins also traced its source to the revival of the Benedictine Rule in Italy, because it had been established under the standards of Monte Cassino.

Another neglected aspect of the work of the serving brothers has been the way in which St Mary of the Latins handled the establishment and growth of its hostel. For instance, if the original intent by Benedict was to create a place where monks could further their spiritual learning and life, and not have outside responsibilities, how could a monastery dedicate itself to serving the needs of pilgrims, poor and sick. What reorganization was necessary to fulfil the two aims given to the monastery if it was to be successful in both ways. Hence it was necessary to describe the manner in which a hostel functioned, how an abbot administered it, who staffed it, and what would happen if it became too large for a monastery to manage.

The relationship between St Mary of the Latins and its hostel, or hospice, needed to change as it was an unusual situation within Benedictine traditions. As the hospice grew in size and reputation, it also had to respond to the needs of staff, accommodation and the various requirements of poor pilgrims. Because it had been formed from a Benedictine monastery, it carried over into its organisation the concept of a group of monks and servants who managed its internal workings. It needed to increase the size of its building and employ outside help in the form of doctors and increased staff as the number of pilgrims grew. The increase in the number of pilgrims visiting the Holy Land proved to be too much for St Mary of the Latins to accommodate and resulted in the building of a first and then a second separate building for the Hospital. This unique situation has needed to be explained as it has not previously been analysed.

At first the hostel was part of the monastery building and was under the control of the abbot of St Mary of the Latins. The hostel was organized and

run by the monks who were professed brethren and they continued to perform their caritative work in the new building. The monk in charge became known as the Infirmarian and his position became more important as the size of the hostel grew. In this expansion the first known monk in charge was called Gerard. He was assisted by the Hospitallers who were fully professed monks and not lay brothers. These were a lower type of worker monk who were introduced into some monasteries at that time.

The capture of Jerusalem meant an increase in the number of pilgrims staying in Jerusalem and development of the hospitality offered by the monks. It also presented the Hospice or later Hospital with added responsibility and problems to be overcome. At first this was difficult because of the conflict between the Patriarch Daimbert and King Baldwin, and it took time to heal the breach. When Arnulf became Patriarch of Jerusalem Pope Paschal II gave St Mary of the Latins its independence in 1112 and then the Hospital in 1113. The Pope's protection gave the Hospital an opportunity to develop apart from its mother-house and free from the control of the Patriarch.

The years between 1100 and 1113 were difficult for the peace of the kingdom, and the Hospitallers had to be content with the problems associated with their growing work. This situation has not been noted before and it was necessary to explain as the politics of the day denied the Hospitallers the chance to consider any way in which they could separate from their mother monastery. Also, at this point it was necessary to show that Dondi, Luttrell and others were mistaken in claiming that the Hospitallers were Augustinians and under the authority of the Holy Sepulchre.

Paschal's bull *Pie postulatio voluntatis* of 1113 was followed by the bulls of Innocent II in 1135, 1137, 1139 to 43 and Anastasius IV in 1154, which finally established the Hospital as an independent Order. These bulls created more difficulties for the Hospitallers when the Patriarchs and bishops objected to the freedoms given to the Order. At first it had to cope with the jealousy and annoyance of Patriarch Fulcher over its new building and its right to accept tithes, resulting in the Patriarch's failed appeal to Pope Hadrian IV.

Again it was important to emphasize, that the papal bulls which were given by Paschal II, Innocent II and Anastasius IV, as well as confirmed by Calixtus II and Honorius II, were entirely concerned with supporting the work of the serving brothers. There was at that time no mention of military brothers, if in fact the Popes knew they existed. It may be added that the military brothers did come into prominence after the 1130s. The bulls established the Hospital as an identity in its own right, freed it from the authority of bishops, and gave it control over its own finance. It was during the period of the Bulls that the military brothers began to annoy the bishops by their disrespectful attitude to Church authorities.

When the Hospital was separated from St Mary of the Latins it needed to gain an identity of its own and to do this it required a Rule which would give it direction and guidance. However, there is no hard evidence that a Rule was composed at an early date which suggests the new Order relied on its Benedictine background to provide its spirituality and way of life. Because the Hospital was not known for its scholarship but rather for its practical contribution to the care of pilgrims the brothers had little time to give to composing a detailed religious Rule of Life.



The Rule of Raymond du Puy has been divided into sections, which included kindred topics, in order to compare the Rule with the Cassian, Benedictine and Augustinian Rules. This method has not been used prior to this and it allowed Raymond's Rule to be analysed and compared to these earlier Rules. This method gave the opportunity to assess the influences which may have been brought to bear on Raymond's Rule. It also showed that the Hospitaller Rule was predominantly closer to the Benedictine than to others. It was significant to enforce the fact that Raymond's Rule did not refer to the military brothers, and also that his Rule was based on the Benedict and not Augustinian as claimed by Riley-Smith and others.

As the Rule of Raymond du Puy was written during the period when both the Templar and Cistercian Rules were formulated there is a possibility that the Hospitaller Rule was influenced either by both or by one of the other two. However the background and content of both the Templar and Cistercian Rules suggests no similarity to the Rule of Raymond du Puy. Whereas Raymond's Rule is short and deals with the practical organisation of the brethren, the complete Templar Rule and the Cistercian Rule are longer and more detailed in theoretical content. This suggests that the Hospital was carrying out its ministrations within the unwritten culture of the Benedictine Rule with which the brethren were imbued. Since there was no rule between 1113 and about 1154, the brothers needed to be committed and obedient to their way of life in the Hospital. The closest lead and guidance they had was

the Benedictine tradition that they had inherited from the monastery of St Mary of the Latins.

The introduction of military brethren by Raymond du Puy was to have a detrimental affect on the work and position of the serving brothers in the Order. Although it was over fifty years before the knights were officially mentioned in the Order's Statutes by that time they had become an important part of the King's army. This omission suggests that there was a deliberate attempt by the Masters to avoid the knights and their work becoming dominant in the Order's reputation. It would appear that the Order wanted to keep in favour with the Popes and the Western supporters of its caritative work.

When Roger de Moulins in 1182 included mention of the knights he cushioned the concept under the idea that they were part of the Order's "special charities". The Order found it was able to afford this new venture and no doubt by experience realised the need to protect pilgrims. There was no reason to imitate the Templars as the general need was an obvious factor in the Kingdom. The wide acceptance of the knights in the Holy Land meant that the importance of the caritative work slipped into second place in the Order. It divided finances, put extra pressures on the serving brothers because of warfare and placed the serving brothers on a lower social scale to the knights.

The growth of the importance of the knights was illustrated by Gilbert d'Assailly's leadership when he included the knights in the failed invasion of Egypt. This caused a financial crisis for the Order and the withdrawal of funds from caritative service. It also helped to cause a lessening of support for the Order from Western sources which affected the serving brothers. Although the

concept of war at that time had become accepted by the West there were some churchmen who kept up opposition to the idea of aggressive military activities. Archdeacon Map was one who criticized the morality of the Order, because of the practice of monkish knights involvement in fighting, though he praised the caritative work of the serving brothers.

Further embarrassment was experienced when the serving brothers challenged the leadership of Gilbert d'Assailly, and objected to his subsequent departure, together with the upheaval it caused. This resulted in Pope Alexander III's rebuke to the Order's leadership and his accusation that military involvement was not the basic purpose of the Hospitallers. In this way he denied the knights the right to take over from the serving brothers. Although these events appeared to encourage the serving brothers they soon afterwards had to suffer further humiliation when the Pope changed his mind and tried to support both themselves and the knights.

Lateran III was an opportunity for the disaffected bishops to criticize and try to remedy the faults of the Hospitallers as they saw them. The worst of the criticism was directed at the knights rather than the serving brothers. However, although the Council decided that the Templars, Hospitallers and other professed religious should follow the canonical rulings of the Church, the Pope did not enforce its decrees. Because of the situation in the Holy Land, the papacy was more concerned about the well being of the Kingdom than the social and medical work of the Hospital. Any attempt by the serving brothers to return to the fundamental reason for the Hospital's existence was futile.

Although Gerard's example had inspired the Hospital, it was required to follow a well proven routine which was the basic structure of its life and work. Under the Benedictine Rule, the Hospital was a group of monks living a life together with an outlook on life which committed them to service within an overall purpose and structure of belief. The routine of the brethren in the Hospital depended on obedience to their ideals and the inner strength which they gained through the Holy Scriptures, prayer and the sacraments. No author has tried to appreciate the religious life of service of the serving brothers or to describe as far as possible the pattern of its organization.

Although the religious life of the Hospitallers was the source of their aim and work they still needed to attend to the practical running of a Hospital. In order to maintain a ministry of caring medically and socially, the Hospital needed finance, staff and a network of support from the Church and laity. The Jerusalem Hospital had no prototype to copy, and this placed a huge responsibility on the Infirmarian and his staff, because this was the first endeavour of its kind by Western monks. The serving brothers also had to cope with the added pressures of criticism from Church authorities and the additional work caused by the military brethren.

The situation of the Hospital in Jerusalem placed tremendous pressures upon its staff and serving brothers. There was the convalescence of poor pilgrims as well as the medical care necessary for those suffering from various diseases and physical ailments. Military engagements meant that fractures, wounds and manipulation of limbs needed attention at various times. Since two of the basic medical treatments offered to patients were diet

and overall nursing care, suitable food and preparation was needed as well as a suitably trained staff under the Infirmarian and his serving brothers.

The passage of time imposed greater responsibilities on the Hospital and it became necessary to provide medical care based on the prevailing Hippocratic theories of medical practice and knowledge. The medical theories, use of drugs and tonics, and practices of both Byzantine and Muslim surgeons, greatly influenced the medical care given by the Hospital. Since the Franks were influenced by the culture of the East, and this included a preference for Eastern medicine, it was to be expected the Hospital would make use of local doctors. Servicing the women's hospital involved complications of childbirth and illnesses associated with babies and young children would have added to the burdens of the nursing care and medication. It was helpful to describe the routine of the serving brothers and to comprehend their responsibilities and caritative ministry.

The most remarkable contribution of the serving brothers during their service in the Holy Land was the creation of a Hospital which reached an equal standard to that of the Byzantine and Muslim cultures. To fully understand this achievement it was necessary to explain the comparative standard of hospitals in Europe with those which existed in the Middle East. It was found that the Jerusalem Hospital began as a hostel and moved through the various stages until it was able to employ doctors and reach a standard the equal of the East.

European hospitals did not follow theoretical Hippocratic medicine nor did they employ doctors who were trained at that standard. At first it was the European standard followed in the Jerusalem Hospital until local doctors

trained in Hippocratic medical knowledge and practice became staff members. It has been shown that there were many doctors available in the East close to and in Jerusalem, which indicated the availability of doctors to the Hospitallers. Although it is not known what nationality or religion those employed in the Hospital may have been the medical practice of the Hospital did reach the standard of the surrounding cultures. It was the creativity and willingness of the Hospitallers to try and improve their service to their patients as well as the effort required to organize such changes that ought to be fully appreciated and this has not been done until now. This whole achievement was able to produce the largest free hospital in the world of that time which provided the highest standard of care to both those who needed to recuperate and those who required more serious medical attention.

In order to appreciate the problems which faced the Hospital it was necessary to mention the sicknesses which were prevalent in the East at that time. To cope with these the Hospital doctors began to visit its patients until it became necessary to employ doctors full time who were not Europeans. At that time they did not usually follow theoretical surgery and only performed basic surgery such as accidents and war injuries.

The standard of medical treatment offered by the Hospital needed to be compared with the knowledge and practice of Eastern medicine. In order to do this Byzantine and Muslim medical scholars, who were contemporary with the Hospitallers and widely used in the Middle East and even later in Europe, were considered. As well, the standards expected by the various communities were examined, and especially those practiced in the Hospital. This was done by contrasting the Hospital medical standards with the *Assises de la Cour des*

*Bourgeois*. It showed that the medicine practiced in the Hospital was equal to the standards of the East. By using this method it was possible for the first time to have a clearer understanding of the type of Hippocratic medicine used by the doctors who were included full time on the staff of the Hospital.

When Saladin captured Jerusalem in 1187 it presented the Order with huge problems, especially since Acre had fallen before Jerusalem. Margat may have been in a sense a staging post though it was not a suitable place for the headquarters of the Order or for a hospital. However, when Acre was retaken in 1191 it gave the Order the chance to re-open its Hospital in that city and enlarge its compound. They had to rebuild their medical team and Hospital to the previous standards in Jerusalem.

One result of Saladin's aggression was that military brothers assumed a more important role in the defence of the Christian lands as part of Frankish armies. The role of knights was to become dominant in the future history of the Order and was recorded in the Statutes, Esgarts and Usances of the thirteenth century. The impressive Hospital of St John in Acre under the serving brothers was however, able to continue the important social and medical service that had been provided in Jerusalem.

Despite the fact that the Statutes of the Order in the thirteenth century seemed to have ignored the caritative ministry of the serving brothers their work and presence was hinted at throughout their time in Acre. It is also known that Sisters of St John and employed women worked alongside the male nurses. The seriousness of the illnesses and the frequency of death did not help to make the task of the serving brothers any easier and yet they

continued to administer a school and carry out humanitarian activities which helped to alleviate the suffering of the pilgrims, poor and sick.

To comprehend fully the situation which developed for the serving brothers, and their caritative services to poor and sick pilgrims visiting the Holy Land, is difficult due to the few references to their work recorded in the Rule of Raymond du Puy, the Statutes, Esgarts, Usances, and the Cartulary of the Order. This was because the main priority of the Order developed into the need to contribute to a strong military shield for the Franks in Palestine. However this development of the Hospitallers could not have occurred without the original and continued support given to the Order by the charitable deeds of the serving brothers which had grown out of the concepts of hospitality and care that the Hospitallers had inherited from the Benedictines.

There is no doubt about the contribution of the social and medical services given by the serving brothers of the Order in Jerusalem and Acre in difficult circumstances. In retrospect, the extent of their caring, dedication and efficiency is impressive and was appreciated at the time and for long after. Perhaps the greatest contribution to the history of compassionate acts made by the serving brothers was the selfless caritative attitude they displayed to the West as well as the new approach they presented in their social and medical work through their Hospital. These facts resulted in the Order of St John and its example of hospitalization becoming a pattern for future European hospitals and deserve to be acknowledged and appreciated.



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