

Discourses/ Speaking and Writing About the Plague (1347-1600): Authorities, Experience, Experimentation

The notion of authority and the authorities themselves (both authors and earlier discourses) are key to the treatises specifically on the plague in later medieval and Renaissance Europe, from the Black Death of 1347 to 1600. The intertextual practices in these treatises are visible in various ways. Rhetorically, they use authority/ authorities as the cornerstone of their argument (i.e., argument based on authority); this leads to a polyphonic discourse, either taking the form of 'polyphonic authority' or 'reasoning based on authority'. Structurally, this leads to the regular use of scholarly marginal notes to furnish a precise bibliographical reference. Linguistically, it is denoted by markers underlining the truth ascribed to reported statements and/or claims made by their authors. Additionally, this intertextuality is evident in the use of 'discourses by another', which use various forms of reported speech (indirect and direct speech, free indirect speech, modalized assertions and borrowed autonomous assertions).

The rediscovery of classical texts in the Renaissance led to a new reverence for classical authors, initially transmitted mainly via Arabic-Latin mediation at the end of the Middle Ages, and this reverence increased further during the Renaissance. But when the Black Death struck, a disease the western world had not encountered for many centuries, the writers of the texts at the start of our period had first to look to non-specialist writings, be they general medical works, literature, or even religious texts, including the Bible. Next, and quite rapidly, treatises on previous outbreaks of the plague were added to the first sources, constituting a new, specific genre which started to develop in the late Middle Ages and grew in importance in the 16th century. For example, Nicolas de Nancel's *Discours très ample de la peste* of 1581 describes the importance and the significance of all the discourses which have gone before his own in the following terms: 'All those who have written about the plague and which I have been able to see, read and listen to (and there are certainly a number of them) agree and maintain by common consent that the beginning and the first development of the plague takes place in the heart. And if I wished to contradict this, I would lose the argument totally, under the sheer weight of witnesses and authorities. However, I prefer to leave it rather than debate further.' (pp. 22-23) This process of cumulative knowledge is often expressed through the old 12th-century metaphor of the child on the giant's shoulders; it is repeated, with variations, by doctors from Guy de Chauliac onward. In the process, each writer adds a new stone to the pile (to use another metaphor), contributing to the construction of knowledge - in this case medical.

What is specific to the plague is the fact that the origin (or etiology) of the disease was still unknown. As a result, the lack of clarity over the causes of the plague made discourses on it more fragile because, from Antiquity, it was a given that knowledge of anything required first a knowledge of the causes. In this context, recourse to authorities is the secure foundation for a discussion. But there is another option, which may complement or undermine authorities, and which this conference wishes to study, namely the recourse to the notions of experience and experimentation, deriving from an empirical approach to pathological evidence. This medical approach does not dwell on knowing the causes, whether, as in Antiquity, because they are considered undiscoverable or useless – an empirical medical sect – or whether because the approach is based on the medical evidence confronting the observer, so a practical rather than academic approach, handed down from master to disciple, often within one family. Despite the

increasing control exercised by the Medical Faculties and the corporate power of physicians, the teachings of this second medical approach also survive in medical writings.

In this way, authors of treatises on the plague speak of their own experiences, whether as surgeons (because they, and barber surgeons, were more concerned with practice than with theoretical knowledge), or even as physicians. In either case, the authors suffer, even before writing, from an *ethos* which is largely negative about the efficacy of what they will say. In an article dating back to 2002, Gabriel-André Pérouse observed that it is inconceivable that medicine could have been believed to have any power over death, given the omnipresence of death in the daily violence of wars or epidemics. This distrust of medical practitioners is, moreover, evident in some of the treatises. Benoit Textor, writing *De la maniere de preserver de la pestilence* in 1551, highlights the justifiable fear of medical practitioners dealing with illness, or the suspicion of their greed. This leads to the concern with ethics – and the textual ethos – including in the respect for sources, but also the importance attributed to the personal statements of the author. Authors therefore underline their own experience of having caught the plague, as in the case of the surgeon Ambroise Paré, or the physician and lawyer Jean Suau, or the Bordeaux physician Guillaume Briet. Others write of having lived alongside the disease, like the physician and surgeon Nicolas de Nancel, or the surgeon and anatomist Nicolas Habicot, among others. Yet others believe they caught it, taking other illnesses for the classical or much-feared biblical plague, as is probably the case for the theologian Théodore de Beze (*De peste quaestiones duae explicatae*, 1579). This close proximity to the plague led to experimentation, notably in respect of cures and regimens, as with the physician and surgeon Jacques Guérin, the barber-surgeon Balthazar Du Huval, the physician Joseph du Chesne, or the apothecary Nicolas Houel.

The organisers of the conference wish to encourage discussion of the relative importance of theory, imitation, experience, and experimentation in the treatises on the plague listed below, or in others of this period. This will consider the opposition and exchanges between the humanist tradition and personal enquiry, i.e. the place of ‘he’, ‘she’, ‘one’ and ‘I’ in these writings, together with the implied importance for empirical and subjective approaches. Finally, they encourage reflections on the epistemological consequences of these choices by the authors of the treatises.