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"The Parent of Health and Long Life". Food and the Popularization of Learned Medicine in Late-seventeenth-century England

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Abstract

Although newer approaches, including the Paracelsian one, also started to gain more prominence, late-seventeenth-century medicine was still largely based upon the Hippocratic-Galenic system, where the relationship between nutrition, health and well-being occupied a prominent position. Indeed, food was included among Galen's six "non-naturals", that is, the activities that need to be regulated to balance the humors in the body and, consequently, to preserve (and in some cases also restore) health. Moreover, the distinction between food and drug was only pragmatic, as, because of their therapeutic properties, several kinds of foodstuff also appear among the simples and in the ingredients lists of compound remedies in all *materia medica* and *receptaria*. Following the methodology of Historical Discourse Analysis, the paper investigates how the relationship between food and well-being was presented and represented in a corpus of general medical handbooks that were translated from Latin into English in the late seventeenth century with the purpose of rendering learned medical notions accessible to a wider English-speaking audience, thus shedding light on dominant discourses on food and nutrition and their role in the promotion of well-being in early modern medicine.

Keywords: food and nutrition, health and well-being, classical medicine, late-seventeenth-century medicine, vernacularization, Historical Discourse Analysis

1. Introduction

Although newer approaches, including the Paracelsian one (Debus, 1965, 1998), were beginning to gain more prominence, late-seventeenth-century medicine in England, and more generally in Europe, was still largely based upon the Galenic system, itself mostly derived from the Hippocratic Regime (Wilkins, 2015, p. 59; 2023, p. 159). Galenism, whose origins can be traced back to the writings of the second-century physician Claudius Galenus, had become hegemonic throughout Europe during the Middle Ages and Renaissance (Kudlien, 2008) as a consequence of the rise of Scholasticism. The Scholastic epistemological method was based on the study and commentary of the works of antiquity, whose achievements were considered unparalleled and unattainable (Banks, 2008, pp. 28–29), and was dominated by logocentric thought (Taavitsainen & Pahta, 1998).

Nutrition played an important role in the Galenic medical system, where the natural state of health was to be preserved by balancing the humors in the body (i.e., blood, phlegm, yellow bile, black bile) through the regulation of the six "non-naturals" or "necessary activities": air, food and drink, rest and exercise, sleep and waking, excretions and retentions, and affections of the mind (Jarcho, 1970; Wilkins, 2015). Food and drink were particularly significant as, according to Galenic physiology, after being digested in the stomach, they were transformed into blood—the natural spirit—in the liver and sent through the veins to the whole body, where it was assimilated by the tissues (Aird, 2011).

Food, however, also had another important application in traditional medicine: therapeutics, or the restoration of health. As stated by Stannard (1961), the distinction between food and drug was only pragmatic at the time, since, because of their properties (heat, coldness, wetness and dryness), several kinds of foodstuff were exploited to contrast the imbalance of humors causing disease and thus restore health. As a consequence, many different types of food, of both herbal and animal origin, also appear among the simples and in the ingredients lists of compound remedies in all *materia medica* and *receptaria* produced in the Hippocratic tradition.

This Hippocratic-Galenic system was transmitted without any substantial modifications through the Middle Ages

and Early Modern Period to the late seventeenth century, which, in England, was characterized by an unprecedented output of vernacular medical publications, which were intended to disseminate specialized knowledge to a wider audience (Fissell, 2007). Although some of these works were original publications, albeit certainly derivative, many were direct translations from Latin (Rovelli, 2023), a language which at the time still functioned as the international lingua franca of knowledge and as the language of academic endeavor, but which was also starting to be perceived as an instrument that could be purposefully used to preclude access to certain domains of knowledge to anyone who had not had the privilege of a university education (Burke, 2004, p. 51; Crespo, 2015, p. 61). Because of this, such publications have been described as a fundamental move towards the popularization of learned medicine (Porter, 1992; Wear, 2000; Fissell, 2007; Rovelli, 2023). Indeed, although vernacular medical texts survive from Anglo-Saxon times (Voigts, 1979; Pahta & Taavitsainen, 2004, p. 1), vernacularization proper, that is, the extension of English to the domain of learned medicine through direct translations, adaptations and also original compositions, started in earnest only in the last quarter of the fourteenth century (Pahta & Taavitsainen, 2004, p. 1; Taavitsainen, 2011, p. 78), but may be thought of as reaching its apex at the end of the seventeenth century, when specialized books published in English outnumbered for the first time those in Latin (Furdell, 2002, p. 38; Johns, 2002, p. 283). Several concurrent factors have been shown to have contributed to this: growing levels of literacy, a greater demand for books in the vernacular, a renewed emphasis on the Ciceronian ideal of serving the common good, and also the nationalistic desire to increase the prestige of the English language (Miller, 1994; Wear, 2000; Furdell, 2002).

While medical recipes, which represented the more utilitarian side of medicine, had been written in the vernacular since Anglo-Saxon times, vernacularization introduced all kinds of medical genres into English, from the more practical *materia medica*, to the more learned *commentaria* and *compilationes*, from which the vernacular general medical handbooks derive (Wear, 2000; Taavitsainen, 2006; Rovelli, 2023). These texts provided a comprehensive and detailed description of the 'institutions' of classical medicine (physiology, pathology, semiotics, prognostics and therapeutics), thus offering vernacular readers access to the highest echelons of medical knowledge in a language they could understand.

2. Aims and Methods

The paper aims to uncover dominant discourses on the role of food and nutrition in the preservation of health and well-being, by analyzing how these were presented and represented in late-seventeenth-century vernacular general medical handbooks. As, by their nature, these texts 'diluted' learned medicine for a wider English readership, the analysis intends to shed light, on the one hand, on the role that learned classical notions have had on the development of popular vernacular medicine and, on the other, on how such notions contributed to the promotion of health and well-being in society.

To do so, it investigates, following the methodology of Historical Discourse Analysis (Brinton, 2001), how the topic is treated in a corpus of ten general medical handbooks that were translated from Latin into English in the late seventeenth century with the purpose of rendering learned medical notions accessible to a wider English-speaking audience (see Section 3; Rovelli, 2023). The study moves from some lexical, terminological and semantic considerations (Section 4.1), to concentrate specifically on some more pragmatic aspects connected to the presentation and discussion of the topic (Sections 4.1 and 4.2). Since the limited length of the sections dedicated to food and nutrition would have made corpus linguistic investigations ineffectual, the texts were analyzed manually through close reading, making the analysis mostly qualitative in nature. Notwithstanding this, some quantitative observations are provided, especially with regard to the terminological aspects. Specifically, the terms' raw frequency, that is, how many times they appeared in the texts, and their dispersion, that is, in how many of the texts under consideration they appeared, were counted manually. When possible, the Latin source text was also checked to better understand how its learned medical content was rendered into English, with particular regard to instances of accommodation.

3. The Texts

To analyze the role played by food and nutrition in the popularization of learned medicine, the texts, which were retrieved from the *Early English Books Online* (EEBO) database, were selected in order to include only those texts that (a) may be described as belonging to the general medical handbook genre, (b) had been translated from Latin into English and (c) had been published in England (d) in the second half of the seventeenth century (cf. Rovelli, 2023). The texts thus retrieved include the following ten books (in chronological order):

(1) *Galens art of physick* (1652), Nicholas Culpeper's (Note 1) translation of Galen's (Note 2) *De methodo medendi* (1st c. AD);

(2) *A new method of physick* (1654), Nicholas Culpeper's translation of Simeon Partlitz's (Note 3) *Medici*

systematis harmonici (1625);

(3) *Hermetical physick or, the right way to preserve, and restore health* (1655), Henry Vaughan's (Note 4) translation of Heinrich Nolle's (Note 5) *Systemae medicinae hermeticæ generale* (1613);

(4) *The institutions or fundamentals of* […] *physick and chirurgery* (1656), N. D. B. P.'s translation of Daniel Sennert's (Note 6) *Institutionum medicinæ* (1611);

(5) *The idea of practical physick* (1657), Nicholas Culpeper's translation of John Jonston's (Note 7) *Idea universæ medicinæ practicæ* (1644);

(6) *The universal body of physick* (1657), William Carr's (Note 8) translation of Lazare Rivière's (Note 9) *Insitvtiones medicæ* (1656);

(7) *The secret miracles of nature* (1658), the anonymous translation of Levine Lemnie's (Note 10) *De miracvlis occvltis naturæ* (1571);

(8) *Oriatrike or, physick refined* (1662), John Chandler's (Note 11) translation of Jan Baptist Van Helmont's (Note 12) *Ortvs medicinæ* (1648);

(9) *The eight sections of Hippocrates aphorisms* (1665), the anonymous translation of Anuce Foës's (Note 13) *Oeconomia Hippocratis* (1588);

(10) *The art of physick made plain and easie* (1684), J.P.'s translation of Nicolas Abraham de La Framboisière's (Note 14) *Scholæ medicæ* (1628).

The texts (and their translations) differ in length and scope, but all are presented as comprehensive medical handbooks. Although none of the authors of the source texts has stood the test of time, when the translations were published some of them were still considered among the leading medical authorities of their time. As medicine then was still based on the classical Hippocratic-Galenic theory, these mostly include very traditional authorities, such as Daniel Sennert, John Jonston, Nicolas Abraham de La Framboisière and Anuce Foës.

However, since iatrochemistry, a branch of alchemy that sought to apply chemistry to the preparation of remedies, was becoming increasingly more significant at the time, mostly through the diffusion of the works and ideas of Paracelsus (Note 15), even though its philosophical basis may be traced to late antiquity in Pythagorean, neo-Platonic and Hermetic currents of thought (Debus, 1965, 1998), the authors also include some exponents of this branch, such as Heinrich Nolle, Lazare Rivière, and, more famously, Jan Baptist Van Helmont. As a consequence, some of these texts, most notably Vaughan's *Hermetical physick*, Chandler's *Oriatrike* and Carr's *Universal body of physick*, incorporate a number of elements and notions from this less orthodox tradition, even though all are, at least to a certain extent, imbued with traditional Hippocratic-Galenic medicine, which still dominated the medical landscape.

4. Results and Discussion

Quite predictably given the context, food and nutrition were shown to play a significant role in the texts. The following subsections discuss the results, concentrating on different aspects connected to the topic.

4.1 Terminological Considerations

Table 1. Frequency and dispersion of food-related terms

TERM	FREQUENCY	DISPERSION
Meat(e)	342	9
Diet	185	10
Nourishment	119	6
Food	61	8
Aliment	60	4
Nutriment	11	4
Victual	8	4
Cibation	1	1

As shown in Table 1, the most frequent and dispersed term in the texts is "meat(e)", which in early modern times still also meant food in general, especially as opposed to drink (cf. OED, s.v. *meat*). It is used to render a variety of Latin words, the most frequent of which is "*cibus*" (Note 16), but which include also "*alimentum*" (Note 17), "*cibaria*" (Note 18), "*edulium*" (Note 19), "*pastus*" (Note 20) and "*victus*" (Note 21). While its most frequent

translation is "flesh", "meat" is also used, albeit sparingly (six times in Carr 1657 and twice in N. D. B. P. 1656), to render Latin "*carnis*" (Note 22). In comparison, today's non-marked term, "food", is much less frequent, though still very widely dispersed among the texts, thus confirming its increase in both frequency and use. It is mostly used as a translation of Latin "*cibus*", even though, not unlike "meat(e)", it sometimes also translates "*alimentum*" and "*victus*". The second most frequent term in the texts is "diet", which is used to translate Latin "*alimentum*", "*cibus*", "*edulium*" and "*alimonia*" (Note 23). In most cases, however, the meaning of this particular term is more restricted, as it is used to render Latin "*diæta*" (Note 24), "*victus*", "*diaeteticus*" (Note 25), and "*regula* (*ciborum*)" (Note 26) into English, thus indicating not food in general, but a prescribed course of food to be followed. "Nourishment", which most frequently translates Latin "*alimentum*", "*nutrimentum*" (Note 27) and "*cibus*", is also both very frequent and widely dispersed, even though it is sometimes used specifically to refer to the nourishing effect that food has on the body. Less popular alternatives to "meat(e)" and "food", judging by their more restricted dispersion, include, in order of frequency, "aliment", which renders Latin "*alimentum*" and "*cibus*"; "nutriment", which translates "*alimentum*" and "*nutrimentum*"; "victual", for Latin "*victus*" and "*obsonium*" (Note 28); and "cibation", for "*nutrimentum*".

The translations thus display a certain degree of adherence to the source texts, as reflected in the wide array of terms used. However, they also show a tendency towards simplification, since a more restricted set of English terms is selected and extended throughout (e.g., "meat" or "diet"). While this certainly results in the erosion of some semantic distinctions, however slight, it may have been dictated by popularizing intents, although it could also depend on the language's greater tolerance for repetition.

Although the word "well(-)being" had been introduced a century before (precisely, in Thomas Hoby's 1561 translation of Baldassarre Castiglione's *Il Cortegiano*, cf. OED, s.v. *well-being*), it never appears in the texts under scrutiny, whose sources prefer Latin "*sanitas*" to "*salus*" as well (Note 29). While both terms refer to health, their meaning and applications are slightly different, as "*salus*" seems to cover a wider spectrum, which also includes material and political aspects. Notwithstanding this, the concept itself is certainly hinted at, as shown in examples 1 and 2 below, by what in this context appears to be its closest synonym—"health":

> (1) "What things appertaine to the Doctrine of the *preservation of Health*, and how many kinds there are of necessary causes for *the preservation and defence thereof*" (N. D. B. P., 1656, p. 227, Note 30);
>
> (2) "Let them eat, not indeed to the filling up of the hollowness of the stomack, neither at the dictate of pleasure and taste; but as much as easily sufficeth *for the defending of a healthy life*" (Chandler, 1662, p. 453).

Health emerges as the ultimate goal of the texts and is described as something precious and valuable that needs to be "defended", "preserved", "conserved", and, in the worst cases, "recovered" and "restored".

As shown in example 3, the concept of well-being may also have been expressed through that of physical "strength", which is sometimes associated to, and almost used as a synonym of, health:

> (3) "The *Strength* in whatsoever state of the body indicate [sic] their own *preservation*. But that *conservation* is perfected by diet" (Carr, 1657, p. 340).

As it functions as an indication of the state of the body, strength is inextricably linked to health. Moreover, just like health, it is portrayed as something that needs preserving and conserving, through the wise adjustment of the six non-naturals, food *in primis*.

Health, moreover, as shown in examples 4 through 6, is sometimes associated through juxtaposition to longevity, which suggests a strong semantic relationship between the two concepts:

> (4) "soberness and sparing diet is called *the parent of health and long life*" (Carr, 1657, p. 219 [p. 222]);
>
> (5) "a sparing diet, which is vulgarly called soberness and frugality, serves to prevent and cure many diseases, and *makes life long*" (Carr, 1657, p. 219 [p. 222]);
>
> (6) "for the *preservation and lengthening of life*" (Culpeper, 1657, p. 7).

Although "longevity" does not appear among the synonyms of "well-being" in the *Historical Thesaurus* of the OED since the two concepts, while certainly related, refer to different aspects, quality and duration of life, the texts do appear to draw a connection between the two. While a long life does not necessarily imply well-being, given general life expectancy rates (Davenport & Oeppen, 2024) and considering that the period saw the height of alchemical experimentation, one of whose main objectives was precisely the production of the elixir of life (Debus, 1965), the association between the two concepts may have been quite substantial.

4.2 The Place of Food in Popularized Medicine

As shown in Table 2, food occupies a prominent position in vernacularized medicine, although there is substantial variation in how much space each text considered dedicates to it.

Table 2. Sections dedicated to food in the texts

TEXT	SECTIONS DEDICATED TO FOOD	PAGES
Culpeper (1652)	Chapter 85, "How many waies our bodies may be altered"	7/120
	Chapter 100, "Of that part of the art which refresheth old age"	
Culpeper (1654)	Tome II, Part I, "Of hygiene"	4/548
	− Chapter 2, "Nourishment"	
	− "The use of things not natural in preserving health"	
	− "The use of things not natural in diseases"	
Vaughan (1655)	Chapter 2, "Of the preservation of health"	6/130
	− III, "Eat not greedily, and drink not immoderately"	
	− IV, "Let thy meat be simple and unarted"	
	− V, "Accustome not thy selfe suddainly to meats and drinks"	
	Chapter 7, "Of the excesse and the defect of necessaries"	
N. D. B. P. (1656)	Book I, Chapter [Part] I	41/472
	− Chapter IX, "Of the natural faculty; and first of nutrition, and augmentation"	
	Book IV, Part I, "Of the things necessary for the preservation of health"	
	− Chapter I, "What things are appropriate to the doctrine of the preservation of health"	
	− Chapter III, "Of meate"	
	− Chapter IV, "Of drinke"	
	Book IV, Part II, "Of the method of the preservation of health"	
	− "Of those things which are to be observed by all for the preservation of health"	
	− Chapter II, "Of the cure of little ones not yet borne, and of the dyet of women with child"	
	− Chapter III, "Of the diet of infants, and thence forward untill 21 years of age"	
	− Chapter IV, "Of the diet of middle age"	
	− Chapter V, "Of the diet of old men"	
	− Chapter VI, "Of the diet of such as are out of temper and of neuters"	
Carr (1657)	Book IV, "The hygiastick part or treatise of the conservation of health"	51/418
	− Chapter I, "Of meat, drink, or of the matter of our nourishment"	
	− Chapter II, "Of the quantity of aliments"	
	− Chapter IV, "Of the quality of meats"	
	− Chapter V, "Of the order of aliments"	
	− Chapter VI, "Of the time and hour of eating"	
	− Chapter VII, "Of the preparation of the nourishment"	
	− Chapter VIII, "Of custome, and delight in the use of meats"	
	− Chapter IX, "Of meats convenient for every age"	
	− Chapter X, "Of diet convenient for every season of the year"	
	− Chapter XI, "Of bread"	
	− Chapter XII, "Of Barly, rice, oats, beans, pease, vetches, and lentiles"	
	− Chapter XIII, "Of pot-herbs most in use, and their faculties"	
	− Chapter XIV, "Of roots fit to eat"	
	− Chapter XV, "Of fruits fit to eat"	
	− Chapter XVI, "Of animals fit for nourishment, and first of flesh in general"	
	− Chapter XVII, "Of the flesh of four-footed beasts"	
	− Chapter XVIII, "Of the entrails and extreme parts of beasts"	
	− Chapter XIX, "Of the nourishment contained in the parts of four-footed beasts"	
	− Chapter XX, "Of nourishment from birds"	
	− Chapter XXI, "Of fish"	
	− Chapter XXII, "Of sauces"	
	− Chapter XXIII, "Of hony"	
	− Chapter XXIV, "Of drink, and the matter fit for drink"	
	Book V, Section IV, "Of indications from the strength"	
	− Chapter I, "What it is that indicates and coindicates diet in sick people"	
	− Chapter II, "What those things are that concern diet"	
	− Chapter III, "What are the kinds of diet, and which are most suitable in diseases"	
	− Chapter IV, "Of the quantity of diet"	
	− Chapter V, "Of the time of giving victuals"	

Culpeper (1657)	Book I, Title I, "Of that part thereof which we call Hygieine, Of things not natural, in general" − Chapter I, "Touching thing not natural, that are assumed, or taken into the body": Article II, "Of meat"; Article III, "Of drink" Book I, Title II, "Of the method of preserving health" − Chapter I, "Of the preservation of health in general" − Chapter II, "Of preservation of health, in special, and first of the good habit": Article I, "Of preserving the health of wel habited persons"; Article II, "Of preserving the health of intemperate persons"	22/400
Anon (1658)	Book I, Chapter XVI, "The humours and food do change the habit of the body, and state of mind"	8/398
Chandler (1662)	Chapter LVIII, "A reason or consideration of food or diet"	6/1261
Anon (1665)	Distinction II, "Aphorisms treating of diet" − Chapter I, "Of a convenient dyet in diseases − Chapter II, "Of dyet convenient according to the ages" − Chapter III, "Of dyet for the seasons of the year" − Chapter IV, "Of the quality, manner, quantity, and other conditions, required in dyet" − Chapter V, "Of milk" − Chapter VI, "Of wine" − Chapter VII, "Of water"	9/167
J.P. (1684)	Second disputation, "Of things not natural; in the use of which, that part of physick which concerns the method of preserving health, consists" − "Of meat and drink"	4/137

The fact that food is treated by all ten general medical handbooks under scrutiny is a testament to the central role it had in seventeenth-century medicine, as a means to both preserve and, in the case of the so-called "medicinal aliments", also restore health. This position is, however, firmly rejected in Chandler's translation of Van Helmont (1662, p. 450), where, according to the author and contrary to common beliefs, "curing" is explicitly described as not belonging to the "dietary part of Medicine", which is only preventive, as food cannot cure, medicines do. Accordingly, food is generally included in the sections dedicated to the preservation of health, where it figures among the six non-naturals and in connection with regimen. Notwithstanding this, food also appears in the section dedicated to the natural faculties of the body in N. D. B. P. (1656) and, in the slightly unorthodox Anon (1658), which deals with the "secret miracles of nature", in the chapter dedicated to the transformative effect that food can have on the body and on the mind. Finally, although all texts may be categorized as general medical handbooks, N. D. B. P. (1656), Carr (1657) and Culpeper (1657) also contain some herbal-like sections which, as shown in examples 7 through 9, list all different types of food, ranging from fruit and vegetables to meat, fish, condiments and drinks as well, with their characteristics and medicinal applications:

(7) "Rice is hot and dry, or rather temperate, it nourisheth much, especially being boiled with milke it *increaseth seed*, it *doth not easily putrefy*, *stops the Looseness*, it is *hardly concoted*, and *yeelds nourishment somewhat thicker*, and *the frequent use of it may easily occasion obstructions*" (N. D. B. P., 1656, p. 246);

(8) "Quinces are of an earthy nature, they binde, cool and dry in the second degree, they *cure vomiting and loosenesse*, they *cheer the heart and give it strength*, they *resist poyson*, and *help concoction* eaten at the end of a meal, because they shut the mouths of the stomach" (Carr, 1657, p. 265);

(9) "Butter, helps the breast and Lungs, *bring up flegm*, and is *good for cold and dry Coughs*: taken in great Quantity, it *loosens the Belly*, and is endued with *a strong faculty to digest*, *discuss, concoct, and lightly bring up*. When it is old, it attains *an Acrimonious Quality*" (Culpeper, 1657, p. 14).

As shown in the examples, the lengthy sections dedicated to the various types of food generally start with a description of the qualities of specific types of food, followed by their effects on the body—both positive and negative—, which, in a self-help manual way, may also be read as advice on what to consume and what to avoid in specific situations.

4.3 The Rules for a Healthy Life

Two main topoi concerning the relationship between food and health emerge from the corpus, namely, the need for moderation (examples 10 through 12) and the importance of custom (examples 13 through 15):

(10) "The quantity of aliments ought to be *very moderate*, onely as much as may suffice for the nourishment of the body, and refreshing the strength thereof. So that if the true limits be far exceeded, it produces various diseases, and shortens life. But as the multitude of meats begets many diseases, so *a sparing diet, which is vulgarly called soberness and frugality*, serves to prevent and cure many diseases, and makes life long" (Carr, 1657, p. 121 [p. 222]);

(11) "II. That we must alwaies aime at a *Mediocrity*. For too much of any thing is an enemy to nature, which Phocylides excellently expressed, Eate and drink and discourse *with moderation*. *Moderation* is the best thing in the world, and *Excess is destructive*" (Culpeper, 1657, pp. 23–24);

(12) "For they that are of a good bodily temper, and lead a *temperate life*, and *sober diet*, are lesse wont to be troubled with passions […]. As therefore *Temperance* abates all disorderly desires, and makes them submit to right reason, and preserves the judgement of the Mind entire; so *Intemperance* that is contrary thereunto, inflames and disturbs every condition of the Mind, and urgeth it" (Anon, 1658, p. 59);

(13) "As for *Custom* in eating and drinking, 1. It *must be well regarded*. 2. It is like another Nature. 3. It makes bad meats to some better than good meats. 4. Such meats as please the Pallats of the Eaters best are usually soonest digested, but not alwaies. 5. If Custom be bad and must be best, do it, 1. *By degrees*, 2. In time of health if possible" (Culpeper, 1652, p. 92);

(14) "*Accustome not thy selfe suddainly* to meats and drinks, which formerly thou hast not been used to feed upon, unlesse they be prescribed thee by some expert and learned Physician for thy healths sake. For *every Change is dangerous*. Nature is simple and alwayes the same" (Vaughan, 1655, p. 23);

(15) "[…] those things that we are *long accustomed* unto although they are worse, yet are they less troublesome to us, then those things that we are not accustomed to" (N. D. B. P., 1656, p. 270).

The need for moderation, also expressed through the semantically similar concepts of temperance, mediocrity, sparingness, abstinence, sobriety and frugality, is mentioned in all the general medical handbooks analyzed, suggesting the centrality of the notion in late-seventeenth-century popularized medicine. As shown in the examples, moderation or temperance does not refer exclusively, and not even primarily, to drinking, but rather to a general restraint in the use of food and the other five non-naturals. For instance, Culpeper (1657) mentions the need for moderation in exercise, while Vaughan (1655) discusses excess in rest and temperature. Notwithstanding this, moderation is also addressed in relation to the use and abuse of alcoholic beverages (mostly wine), sometimes in specifically dedicated sections.

References to custom and the importance of following it and not disrupting common habits emerges in seven of the ten general medical handbooks, a testament to its importance in medical practice. Custom, which is presented in contrast to its negative opposite—change—, is mentioned not only with regard to the quality and quantity of food that should be consumed, but also to the time and frequency of eating. Moreover, it is included among the things that a physician should take into consideration when prescribing a course of diet for either the preservation or the restoration of health.

As the texts, or at least the sections dedicated to food, are concerned with providing the rules for the preservation of health, prescriptive language prevails throughout, as illustrated by examples 16 through 21 below:

(16) "*Eat not* greedily, and *drink not* immoderately" (Vaughan, 1655, p. 20);

(17) "Meat before it be swallow'd, *ought to be* very well chew'd by the Teeth. And there is this order *to be observ'd* in feeding, that the liquid *must* precede the solid, the light the heavy, and the loosning the binding victuals" (J. P., 1684, p. 74);

(18) "Yong men, 1. *May eat* cool Herbs. 2. *Must eat* meats colder, moister, and of grosser substance. 3. *Drink* but little Wine. 4. *Use* all things in respect of Diet according to Complexion, Exercise and Custome" (Culpeper, 1652, p. 93);

(19) "The Quality of the Nourishment, *let it be* such as strengthens Nature, and opposeth the cause of the Disease" (Culpeper, 1654, p. 519);

(20) "When the Disease is very acute, it forthwith comes to its state and danger, and then *it is necessary to use* a most thin and slender course of dyet" (Anon, 1665, p. 33);

(21) "After we have explained those things which *are necessary for* the Preservation of health, now we must shew a Method how all those things *are to be used* for the safety thereof; but their [sic] are some certain common precepts which *are to be observed* by all; some peculiar precepts *to be observed* according to ages, sex, and other Circumstances" (N. D. B. P., 1656, p. 270).

The rules of health are presented through the use of imperatives (e.g., "eat not", "drink", "use"), deontic modality (e.g., "ought to", "must", "it is necessary to"), and passive constructions (e.g., "is/are to be observ'd", "are to be used"), all of which serve to underline the necessary nature of the precepts presented. Some of these rules are clearly directed at professionals of medicine or people who are in charge of preparing food and tending to the sick and need directions as to what course of diet to provide in different cases, suggesting a more professional or

specialized target audience (examples 17, 19, 20 and 21). Other texts, however, seem to address the reader as a patient or, in any way, as the direct recipient of the advice given, thus functioning as a sort of self-help manual targeting a more general audience (examples 16 and, partly, 18).

5. Conclusions

The study highlighted the centrality that food had in both classical and early modern medicine, which substantially rested on the theories of the ancients. This is shown, first of all, in the inclusion of the topic in all the analyzed texts, some of which dedicate considerable space to its treatment. Secondly, the centrality of food is hinted at by the double role it played in medicine: as, on the one hand, one of the six non-naturals whose use needed to be regulated for the preservation of health, and on the other, as a source of treatment for the cure of disease and restoration of health, due to its pharmacological characteristics and therapeutic potential.

Although the word "well(-)being" never appears in the texts, which most certainly is connected to the sources' preference for "*sanitas*" over "*salus*", the concept may be thought to be covered by the semantically close terms "health", "strength" and "longevity" or "long life", which are used throughout the texts. Indeed, although the word existed in the English language, its use was still quite limited until the 1800s, when it started to gradually increase in frequency (cf. OED). Moreover, although it certainly had, and still has, medical applications, its reference scope is wider, more complex and multifaceted, touching not only the physical, but also the psychological and moral spheres, which, however, are not mentioned in the texts under scrutiny. Even though the texts thus seem to cover only one aspect of well-being, they certainly offer an interesting insight into its codification in both ancient and early modern medicine, when the main objective seems to have been the preservation of health for the lengthening of life.

Finally, as the texts are all examples of general medical handbooks, what emerged from the analysis is the rules of health, the general principles to be followed in order to preserve health through the careful provision of food, which are presented through a wide array of linguistic forms (imperatives, deontic modality, passives). Two fundamental principles emerge here: moderation and adherence to custom. The principle of moderation, whereby one should never exceed in anything, food included, appears to be the most pervasive, and is still very much relevant even in contemporary culture, as indicated by such idiomatic expressions as "too much of a good thing", "moderation in all things", "measure is treasure" or, more directly connected to medicine, "temperance is the best physic". Albeit slightly less frequent, the importance of following custom may, nonetheless, have resonated well with late-seventeenth century audiences. Indeed, after a particularly troubled political period that witnessed to a civil war, the beheading of a king and the destitution of another, and the rigor of the Commonwealth and of Puritanism, change had a particularly strong negative connotation: as stated a few decades later by Samuel Johnson in his *Plan of a Dictionary of the English Language* (1747), "all change is of itself an evil". Once again, even though or precisely because we live in a period of great technological innovations, the importance of following old habits is still very much entrenched in our culture and language, as suggested by such idiomatic expressions as "tried-and-true" and "better the devil you know (than the devil you don't)".

As these features emerged in texts that were ostensibly presented as English translations of some of the most important general medical works of the time, and not merely as popular medicine, the analysis thus offered an interesting insight into discourses concerning the role of food and nutrition in the preservation and restoration of health, which, precisely because of the authority and resonance bestowed on them by virtue of their having originated in the learned tradition, most certainly played a fundamental role in shaping hegemonic and all-pervasive discourses, which are still relevant to this day.

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Notes

Note 1. Nicholas Culpeper (1616–1654) was an unlicensed apothecary practicing as a general practitioner ante litteram. He is best remembered for his unauthorized translation of the *Pharmacopoeia Londinensis* originally published in Latin by the Royal College of Physicians, which gave a great impulse to the popularization of medicine; see Sanderson (1999).

Note 2. Claudius Galenus (129–216) was a Greek physician living in Rome, whose ideas, transmitted equally by his own writings and by summaries, compendia and commentaries, dominated the medicine of the Middle Ages and Renaissance; see Kudlien (2008).

Note 3. Simeon Partliz (1588–1640) was a Czech astronomer and physician; see Bavarian Academy of Sciences (1953-2020).

Note 4. Henry Vaughan (1621–1695); see Rudrum (2014).

Note 5. Heinrich Nolle (d. 1626) was a German hermetic physician; see Heß (1885).

Note 6. Daniel Sennert (1572–1637) was a German physician and Professor of Medicine at the University of Wittenberg. He was considered to be one of the most important thinkers of his time and had a great influence over medical practice until the beginning of the nineteenth century; see Kangro (2008).

Note 7. John Jonston (1603–1675) was a Polish physician practicing in Leiden, and Professor of Medicine at Frankfurt. His work profoundly contributed to seventeenth-century medical thought; see Crellin (2008).

Note 8. William Carr. Although he styles himself as "Practitioner in Physic" on the title page of his translation, the lack of records of any kind about his life and career points to him being an unlicensed practitioner of medicine.

Note 9. Lazare Rivière (1589–1655) was a French Paracelsian physician and anatomist, and Professor of Pharmacology and Surgery at the University of Montpellier. His *Praxis Medica* (1640, Paris) became one of the standard textbooks of seventeenth-century practical medicine; see Sgantzos et al. (2015).

Note 10. Levine Lemnie (1505–1568) was a Dutch physician who studied in Padua under Vesling; see Klaniczay, Kushner & Chavy (2000).

Note 11. John Chandler. Judging by the lack of records of any kind about his life and career, he probably was an unlicensed practitioner of medicine.

Note 12. Jan Baptist van Helmont (1577–1644) was a Belgian physician and one of the most influential supporters of iatrochemistry of the seventeenth century; see Ducheyne (2008).

Note 13. Anuce Foës (1528–1595) was a French physician, best known for his translation of Hippocrates; see Masius (1960).

Note 14. Nicolas Abraham de La Framboisière (1560–1636) was a French physician and pharmacologist. He was physician to King Henry IV of France, Professor of Medicine at the College Royale and at the University of Reims, and Chief Medical Officer in the army; see Giacomotto-Charra (2017).

Note 15. Philippus Aureolus Theophrastus Bobastus von Hohenheim, also known as Paracelsus, was a Swiss-German physician and surgeon who believed, contrary to the traditional system, that diseases were due to external causes and that they could be cured using chemically prepared remedies; see Debus (1965).

Note 16. *Cĭbus*, (1) food; (2) fare, rations; (3) nutriment, sustenance, fuel; (4) eating, a meal; (5) bait (cf. Olivetti Media Communication. (2023-2028). *Online Latin Dictionary*, https://www.online-latin-dictionary.com/).

Note 17. *Ălĭmentum*, (1) food, nourishment, provisions; (2) sustenance, maintenance, livelihood; (3) alms; (4) fuel (ibid).

Note 18. *Cĭbārĭa*, food supplies, food (ibid).

Note 19. *Ĕdūlĭum*, (1) edibles, eatables; (2) foodstuffs; (3) food (ibid).

Note 20. *Pastŭs*, (1) pasture, food, pasturage; (2) food, human food (also spiritual) (ibid).

Note 21. *Victŭs*, (1) living, way of life; (2) that which sustains life; (3) nourishment; (4) provisions; (5) diet (ibid).

Note 22. *Cărnis*, (1) meat or flesh; (2) the body; (3) pulp or flesh of plants, sapwood; (4) soft part; (5) low passions (ibid).

Note 23. *Ălĭmōnĭa*, (1) food, nourishment; (2) feeding, nurture, upbringing; (3) cost of maintenance (ibid).

Note 24. *Dĭaeta*, (1) (house) room; (2) (ship) cabin; (3) out building, annex; (4) out house; (5) diet, regimen; (6) course of treatment, way or mode of living prescribed by physician (ibid).

Note 25. *Dĭaetētĭcus*, (1) of diet; (2) treating through diet (ibid).

Note 26. *Rēgŭla*, (1) (drawing) ruler, straight edge; (2) basic principle, rule, standard; (3) rod, bar and rail (ibid).

Note 27. *Nūtrīmentum*, (1) nourishment, sustenance, nutrition, food; (2) (in the plural) breeding, education (ibid).

Note 28. *Obsōnĭum*, (1) food; (2) provisions, shopping; (3) food with bread; (4) victuals especially fish (ibid.)

Note 29. *Sānĭtās*, (1) good health; (2) healing; (3) reason, good sense; (4) (of style and of the orator) correctness, purity, good taste, simplicity. *Sălūs*, (1) health; (2) salvation, a means of salvation; (3) well-being, prosperity; (4) (of a state or nation) public safety, preservation of civil rights; (5) greeting; (6) life (ibid).

Note 30. Emphasis added in all examples.

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