Communities of Learned Experience: Epistolary Medicine in the Renaissance by Nancy G. Siraisi


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In this pithy volume, Nancy Siraisi reminds us how far the history of science has come from early 20th-century models of geniuses working in isolation. Communities of Learned Experience puts the theme of networks center stage, making useful connections to current research on communities of knowledge and republics of letters both humanistic and scientific even as it contributes more particularly to the history of medicine. Through this book, readers gain vicarious enjoyment of the three inaugural lectures that Siraisi recently delivered at John Hopkins University’s new Singleton Center for the Study of Premodern Europe. In 87 pages, she offers a distillation of the encyclopedic learning, rigorously forensic analysis, elegant argumentation, and wry humor that are the hallmarks of her career of research and teaching in the history of medicine, especially but not exclusively within the context of 15th-century Italy. So, too, readers get a taste of Siraisi’s recent interest in 16th-century physicians’ humanistic predilections for history, antiquarianism, and other forms of literary and archaeological study well outside their occupational remit [Siraisi 2007]. Rather than a targeted argumentative intervention, then, this book is an expert introduction to the world of early modern medical inquiry. Siraisi surveys the macro-historical fields of science, medicine, anatomy, and botany even as she analyzes individual practitioners, circumstances, and networks micro-historically.

At the heart of this book, we find minute scrutiny of the epistolae medicales of two 16th-century physicians. The letters of Siraisi’s first protagonist, Johann Lange (1485–1565), reveal predominantly courtly and humanistic cultural priorities. Lange was personal physician to the Elector Palatine of Heidelberg and lived during the early decades of the 16th century, when the expansive tendencies of literary humanism had not yet confronted the
conservative climate of the Counter-Reformation. The epistles of her second protagonist, Orazio Augenio (1527–1603), take us into the medical marketplace of Italy’s urban centers during the more fraught decades spanning the late 16th and early 17th centuries. Beyond telling us about two interesting and comparatively understudied physicians, Siraisi issues an amiable manifesto for historians of medicine to attend as carefully to physicians’ collections of letters as they have traditionally done to their consilia (compilations of medical advice) and treatises. Indeed, Communities of Learned Experience demonstrates throughout the rewards of epistolary evidence, from which Siraisi recovers and connects her protagonists’ broadly intellectual, specifically scientific, and densely social worlds.

The organization of this volume maximizes its utility for specialists and non-specialists alike. A brief introduction welcomes readers into the Republic of Letters at large—embodied by luminaries such as Erasmus—and the republic of medicine as a suburb of that larger literary polity. Thereafter, an initial chapter charts medical ‘contexts and communication’ across Europe, rooting interpretive paradigms that might otherwise be quite abstract in the lives and careers of a few paradigmatic physician-networkers. Scholars interested in Venetian medicine and fans of historian Richard Palmer’s oeuvre will be cheered to see Nicolò Massa used as a model in this first chapter alongside the more famous cases of Girolemo Mercuriale and Conrad Gesner.1 The first chapter having established the basic state of play in European medical theory, practice and epistolary conventions, the two following chapters then focus, respectively, on Lange and Augenio.

Both of the epistolary collections that Siraisi examines in detail offer portraits of physicians who were learned and well-connected beneficiaries of the cultural ferment associated with so-called ‘medical humanism’. The recovery and emendation of the ancient medical canon has been well documented by historians of medicine, with Siraisi herself at the vanguard.2 Yet Siraisi emphasizes that Lange and Augenio shared more than merely their training. Both physicians, like so many of their profession, were members of families with considerable track records in the world of medicine. (Albeit it does become important for Lange’s rather smoother career path that his progenitors included more university-trained men than Augenio’s had.) So, too,

1 On Massa, see Palmer 1981.
2 Wear, French, and Loni 1985 is a compendium on the topic.
these physicians shared some career strategies, above all the cunning use of epistles to form and navigate social, cultural, and professional networks and to enhance their reputations. Accordingly, while Siraisi emphasizes that an important part of Augenio’s self-promotional repertoire was his insistence on being more ‘modern’ than colleagues such as Lange—that is, more inclined to dispense with the ancients and risk new methods of healing and new interpretive models, even Paracelsus (to a point)—she does not ultimately see Augenio as decisively more cutting-edge than the ostensibly more traditional Lange. Rather than being antipodal or even starkly contrasting, these two physicians appear more as points not too terribly distant from each other on a continuum of intellectual and professional possibilities. The distinctions between these two men seem more matters of degree than kind.

Early modern historians working in many different patches of the field will be interested in Siraisi’s analysis of the effects of the Counter-Reformation, especially the years of the Council of Trent (1545–1563) on both physicians’ range of intellectual and socio-professional motion. While by no means stopping the cross-pollination of medical ideas north and south of the Alps that was so notable a feature of Lange’s early career, the greater geographic and confessional restrictions were certainly much in evidence in his later letters. Augenio came to his professional peak when letters to or from Protestant lands were at best career liabilities (at worst, invitations of denunciation for heresy). Nor surprisingly, then, Augenio’s letters evince throughout a greater weight toward Italian circles than international networks, and toward considerations of immediate practical healing rather than abstract theories of body and spirit that could so quickly tip into heterodoxy. Still, even here Siraisi resists categorical statements. Counter-Reformation constraints surely hampered the sharing of information between Catholic and Protestant practitioners but Siraisi also shows evidence of continued exchange, for instance, the post-Tridentine letters between Girolemo Mercuriale and the Calvinist Theodore Swinger of Basel. And she makes the intriguing point that group solidarity in the medical world may in any case have coalesced not around confessional allegiances but instead around the major ‘camps’ of Galenists versus Paracelsians [27–36].

Historians of science have long debated the periodization of different branches of knowledge and practice. While not putting too fine a point on it, Siraisi situates Augenio (late 16th century) as possible evidence of a new
phase in the professionalization of medicine. Augenio’s evident concern for tangible and logistical problems of treatment contrasts with Lange’s generally greater emphasis on philosophical or theoretical problems relating to medical ‘truth’ or ideals and thus hints at the waning of medical humanism and the concomitant rise of something closer to medical empiricism.

Given the breadth of the topics and problems it engages, Communities of Learned Experience should have diverse audiences. In addition to its utility for historians of medicine, this book will serve intellectual historians (and their graduate students) very well. Naturally, those focused on the fortunes of the ancient medical canon will be the most obvious beneficiaries but those interested in any form of early science or for that matter the production and circulation of any sort of ‘learned’ knowledge will benefit from watching Siraisi interrogate her epistolary sources. The circles that she brings to life also offer interesting parallels to other scholars’ recent studies of ostensibly very different intellectual communities [inter alia Campbell 2006, Grafton 2009, Pal 2012]. Readers will also find this book’s critical apparatus phenomenally helpful. Even within the space constraints, Siraisi surveys essential scholarship in several subfields and languages—in fact, the endnotes form almost a second short book, running 65 pages in their own right and include (mirabile dictu, in these lean times) original language quotations, predominantly in Latin.

Embedded within this volume are also useful spurs to further research. Augenio’s case, for instance, raises questions in my mind about the ways in which a medical career served as an avenue for social or cultural advancement—or, perhaps even more than a medical career specifically, a facility with literary epistles that formed part of physicians’ training. Lacking any famous or even especially well-connected family at the start, Augenio managed by the end of his life to achieve a prominence (at least in Italy) roughly equivalent to that achieved by the initially better-positioned Lange. According to Siraisi, Augenio managed this, ‘chiefly through his carefully maintained personal correspondence networks’ [83]. Were letters themselves, then, the primary engine of mobility for other categories of cultural aspirant? Along the same lines, the connections between ‘medical humanism’ and what I suppose we should call ‘literary’ humanism are drawn loosely. It is taken as given that physicians participated in the broader literary cultures of their time but we might have heard something more about why this participation was so im-
important, even in the later 16th century. Siraisi mentions the cachet attached to humanism [44 esp.] but this might be connected more closely to the difficulties that physicians still confronted in asserting their membership in ‘high culture’. After all, contemporary writers may not have been as acerbic as Petrarch or Dante but they still lampooned the profession as a haven for mercenary quacks and social climbers. We may see in physicians’ use of ‘the literary’, then, at least a measure of professional anxiety and vulnerability.

At all events, Siraisi’s latest contribution draws two finely etched portraits of medical men navigating their sometimes similar, sometimes distinctive careers at a moment of profound epistemological shifts. For its wealth of information and important call for more attention to medical epistles, Communities of Learned Experience takes a more than worthy place in Siraisi’s oeuvre and should occupy an important space in the history of science section of early modernists’ collections.

**BIBLIOGRAPHY**


