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Marta Sylwanowicz

 <https://orcid.org/0000-0001-5547-4551>

University of Social Sciences, Warsaw

## Middle and Early Modern English Medical Recipes: Some Notes on Specialised Terminology\*

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### Abstract

One of the text-type features of a recipe is a certain degree of technical lexicon (cf. Görlach 2004). The aim of the present study is to compare the use and distribution of selected group of terms, here references to medical preparations, in Middle and Early Modern English recipe collections. Particular attention will be given to the factors responsible for the choice of terms. Also, we will concentrate on the rivalry between native and foreign lexical units.

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### 1. Introduction

Early English medical recipes are commonly described as a “well-defined procedural genre with a clear writing purpose” (Taavitsainen 2001a, 86). Their main function is to provide instructions both on “how to make things” and “how to do things” (Carroll 2004, 188). Thus, apart from passages telling how to prepare a medicament there are also examples which concentrate solely on how to use some ingredients in order to cure a given ailment. These instructional writings are also characterised by language external and language internal features. The former involve, for instance, a step by step organisation of the text, e.g.: (1) the heading (statement of purpose and/or title), (2) procedure (list of ingredients, preparation and application), (3) additional comments (e.g. efficacy phrases, storage information)<sup>1</sup>. Language internal structure, on the other hand, is usually signaled by the following text-type features: (i) the frequent use of imperative verb forms, (ii) object deletion, (iii) temporal sequence, (iv) lack of complex sentences, (v) marked use of loan words or (vi) technical vocabulary (cf. Carroll 1999; Taavitsainen 2001b; Görlach 2004).

In the present study we will concentrate on the last text-type feature of the recipe, i.e. the specialised terminology, which can be divided into a number of

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lexical groups. The first group involves verbs that specify various ways of treating the ingredients, e.g. verbs of cooking (*boil, parboil, seethe, stew*, etc.), verbs of cutting (*carve, chop, hew, mince*, etc.), verbs of preparing (*blanch, season, strain*, etc.). Although these verbs are mostly found in culinary recipes (cf. Marttila 2009 and Bator 2014), they are also well represented in medical writings, especially in the collections of recipes found in remedy books (cf. Taavitsainen 2001a, 100). The second group of technical lexis refers to weights and measures which can be further divided into specific terms: *drachm, ounce, pound, scruple*, etc., non-specific terms: *plenty, little, a quantity*, etc., and container-related terms (usually with the suffix *-ful*): *dishful, egg-shelfful, handful, potful*, etc. (cf. Bator and Sylwanowicz 2017b). Other specialised terms refer to ingredients, usually plants or parts of animals, combined with various spices and/or liquids, various utensils (e.g. *limbecks, mortars, plates, pans, pots*), and the end products of the recipe, i.e. dishes or medical preparations.

The main aim of this paper is to examine only one group of specialised terminology, i.e. lexical items used with reference to medical preparations in Middle and Early Modern English medical recipes. The following questions will be taken into consideration: (i) do the recipes representing two different historical periods differ in the use and distribution of the terms under study? (ii) was there any rivalry between native forms and forms of Romance origin?

## 2. Corpus material

The material examined for the present paper consists of the recipes found in two large medical corpora: *Middle English Medical Texts (MEMT)* and *Early Modern English Medical Texts (EMEMT)*. The first corpus is a collection of the 14<sup>th</sup> and 15<sup>th</sup> century medical works, whereas the second consists of works produced in the 16<sup>th</sup> and 17<sup>th</sup> centuries. The two corpora include texts representing various genres, e.g. academic treatises, surgical texts or remedy and/or recipe collections<sup>2</sup>. Since the proposed study concentrates on recipes, the material found in the last collection has been selected<sup>3</sup>. The texts used in the analysis consist of 3,220 recipes, with a total of about 297,213 words. Table 1 below shows the exact number of recipes in Middle and Early Modern English collections examined for the present study.

**Table 1.** The number of recipes in the analysed material

Text	Number of recipes	Number of words
Middle English (in <i>MEMT</i> )	1,487	109,573
Early Modern English (in <i>EMEMT</i> )	1,733	187,640

Due to the fact that there is some disproportion between the material found in the two collections, whenever the data are compared, next to the absolute number of occurrences relative normalised frequencies (RNF per 1,000 words) will also be given.

### 3. Names of medical preparations

The study of medieval and early modern English medical texts reveals that there was not one established principle for the classification of medical preparations. One such classification divided medicines into: cold, hot, dry and moist preparations (cf. Getz 1991; Anderson 2005; Sylwanowicz 2009; 2013). This was in accordance with a humoral theory which prevailed in early medical practice. According to this theory, all diseases were identified as hot or cold, moist or dry, and it was advised to treat them with medicines having the opposite effect. For instance, a pain in the eyes (being a hot disease) should be treated with cold medicines (Getz 1991; Sylwanowicz 2009, 350). Medicines were also classified as applied internally or externally (1) and as simple or compound (2):

- (1) For thyes maner of diseasys may not be curid oonly by medycyns, neyther **ynward or outwarde** nor princypally, but by thys craft that ys callyd “ars acuaria,” that ys to saye the craft of nedyl. (*MEMT, Benvenutus Grassus*)  
[‘These diseases may not be cured with the medicaments applied internally or externally, but with the craft of “ars acuaria”, that is to say the craft of a needle.’]
- (2) But þou muste vndirstonde **þat of þes medycyns, sum ben simple and sum ben componed**. Simple medycyns ben, as of oon herbe by himsilf, or of oon watir þat is y-made of oon herbe, (...). **Componed medicens ben made of two þingis**, or þre, or of meny þingis y-medlid togederis. (*MEMT, Gilbertus Anglicus*)  
[‘But you must understand that of these medicines some are simple and some are compound. Simple medicines are composed of one herb, or of water made of one herb, or of honey, (...). Compound medicines are composed of two or three ingredients, or of many things mixed together.’]

According to Getz (1991) medicines were also recognized as general, all purpose remedies, and as specifics that were used to treat particular illnesses. In the present study we propose a slightly modified division of the references to medical preparations<sup>4</sup>, i.e.: (i) general terms denoting medicaments (*boot, help, helping, medicine, remedy*, etc.), (ii) terms denoting dosage forms (*drink, ointment, pill, plaster, powder, water*, etc.), and (iii) terms denoting specifics, i.e. ‘preparations (solid, semi-solid, or liquid) intended for treating a particular ailment and/

or part of the body' (cf. *OED*, *specific*, a. and n.). The last group is represented by, for instance, *agrippa* 'ointment for dropsy and swollen parts of the body', *diamarciaton* 'ointment for stomach or breast coldness', *pillule arthetice* 'a pill to purge phlegm', *pouder for festre* 'pouder for fistula', *rubea trociscata* 'a pill/pellet for tertian fever', etc.

Although this alternative division is not free of shortcomings, the proposed classification of the terms allows one to observe within each category the rivalry between terms related by meaning. For instance, in the group of terms denoting dosage forms we can distinguish synonymous nouns referring to semi-solid preparations, e.g. *oin(t)ement* – *salve* – *unguent*; liquids, e.g. *drink* – *potion* or *water* – *aqua*; or solid preparations, e.g. *poudre* – *pulvis* – *pulver* or *bal* – *pelot(e)* – *pille* – *pilule* – *trociske* (Sylwanowicz 2014a).

#### 4. Analysis of data

The analysis will start with a brief discussion of the findings concerning the distribution of the terms referring to medical preparations. Special attention will be paid to the choice of lexical items (general terms or names of specifics) and possible conditioning factors. Finally, we shall concentrate on the general tendencies concerning the use of foreign forms in the analysed material.

Figure 1 shows the total number of occurrences of the collected examples in medieval and early modern English recipes. The results reveal that terms were evenly distributed in the collections of recipes representing the two different periods. These findings seem a bit surprising as one would expect that with the development of medical knowledge there should be a gradual increase in the use of medical nomenclature.

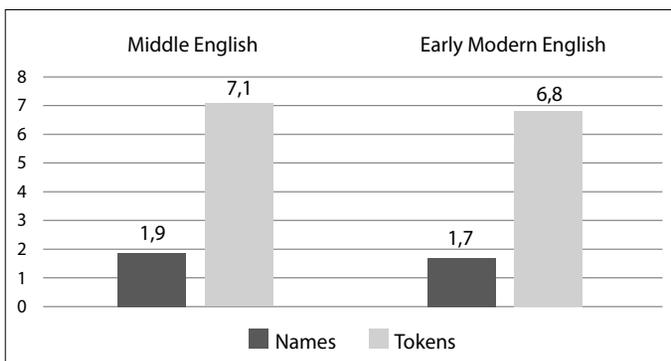


Fig. 1. The distribution of terms referring to medical preparations in ME and EMode recipes (RNF per 1,000 words)

Another observation is that the number of references to medical preparations is, contrary to expectations, relatively low in both Middle and Early Modern English collections<sup>5</sup>. For instance, in medieval instructions on how to prepare a curative substance, references to medicaments are present in only about 34% of all the recipes. Similarly, in the EModE collections the references constitute about 43%. In most recipes, there is hardly any reference to pharmaceuticals, e.g. in the ME collection labelled as *Leechbook I*, out of 136 recipes only 41 include names of medicaments. Similarly, in the EModE collection labelled as *Treasure of pore men* references to medical preparations are found in 40 recipes out of 152 instructions. This picture supports, to some extent, the already mentioned view that the authors and compilers of the recipes were not primarily concerned with how to make things (i.e. medicaments) but how to do (i.e. heal) things (cf. Carroll 2004), cf. also the following examples:

- (3) **Ach of shuldur joynt** Take v dragmes of gall of an ox and a dragme of hony and seith hem as thikke and enoynt þ=e= joynt that akyth ther with til it be hole. (*MEMT, Leechbook I*)

[‘Ache of the shoulder joint. Take five drachms of the gall of ox and a drachm of honey and seethe them and anoint the joint that hurts until the pain goes away.’]

- (4) **For all maner of heed ache.** Take Ueruayne Betayne wormwode Celydony walworte Rewe & the barke of the Elder Hony and Peper & all hole stampe them togyder/ & sethe them in water/ & drynke it erly & late. (*EMEMT, Treasure of pore men*)

[‘For all types of the headache. Take vervain, betony, wormwood, celandine, danewort and the bark of elder honey and pepper and stamp them all together and seethe them in water and drink it early and late.’]

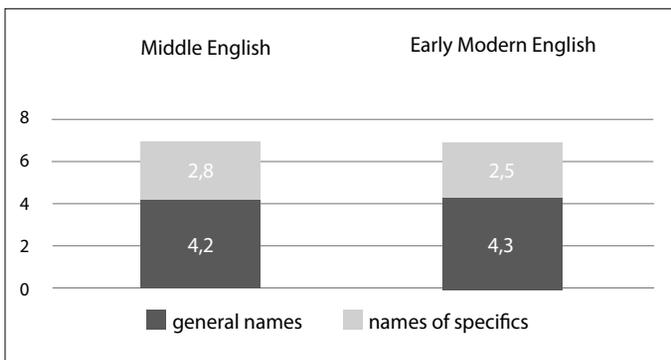


Fig. 2. Distribution of types of references to medicaments in ME and EModE recipes (RNF per 1,000 words)

As we can see in the above examples, most recipes concentrate on the medical problem (here aches in the shoulders and headaches) and on how to make a preparation. The name of the preparation seems to have been irrelevant, at least in the collections of recipes. This assumption is additionally supported by the distribution of types of references to medical preparations, i.e. general terms (including general references to dosage forms) and names of specifics.

As seen in Figure 2, in both Middle and Early Modern English writings the compilers of medical recipes relied on more descriptive ways of referring to medicaments by using general terms (*medicine, remedy*) or names of dosage forms (*drink, ointment, plaster, syrup, water, etc.*) followed by a statement of purpose, cf. examples (5a–c) for ME and (6a–c) for EModE recipes.

- (5a) An **emplastre** for þe maladye of þe brest and of þe reynes, Take (...) (*MEMT, Cophon Experimentes*)  
 [‘A plaster for the malady of the breast and kidneys. Take (...)’]
- (5b) A **medycyn** þat voydyth meselry. (*MEMT, John of Burgundy, Practica Phisicalia*)  
 [‘A medicine against leprosy.’]
- (5c) A **gude oynment** for kyles, woundes, broken banes, (...) and for the gout: tak (...) (*MEMT, Recipes I*)  
 [‘A good ointment for ulcers, wounds, broken bones, (...) and for the gout: take (...)’]
- (6a) A treue **medycyne** for defnesse of eeres. (*EMEMT, Treasure of pore men*)  
 [‘A true medicine for hearing loss.’]
- (6b) For to make a **powder** whiche stoppeth blode. (*EMEMT, Antidotarius*)  
 [‘How to make a powder that stops bleeding.’]
- (6c) A perfect and proued **remedye** for them that be weake of stomacke, and can not kepe theyr meate, wythout vomityng it vp agayne. (*EMEMT, Secretes of Alexis of Piemovnt*)  
 [‘A perfect and proved remedy for a weak stomach, and when one keeps vomiting.’]

This tendency might be accounted for by the fact that the main role of the recipes was to serve as a quick reference for both specialists or lay readers. Therefore, compiler(s) of such texts avoided the use of the specific names of pharmaceuticals. For instance, *diamoron* ‘an electuary used in gargles for the throat’ or *mithridate* ‘medicine thought to be panacea or antidote against poison or against pestilence’ (Norri 2016, 290, 684) might have been not well known among unexperienced users of the collections of recipes. Hence, such statements as *For greuance of þe moop* or *Medicine agaynst pestilence*, seemed a better solution.

Thus, in medieval and early modern England medical practice was not limited to experienced practitioners but there were tendencies to disseminate this

medical knowledge to the wider community. Hence, it should be of no surprise that medical recipes were produced in various dialectal areas, and these texts also avoided sophisticated medical nomenclature. For instance, two collections from *MEMT: Killeen medical texts* and *Crophill's books*, which represent two different dialects: Northern (examples 7ab) and East Anglian (examples 8ab), respectively, copy the pattern described above. In both collections, there is hardly any reference to medical preparations, and if there occurs a name of the medicament it is not the name of a specific but a general term such as *medicine*, *plaster* or *ointment* followed by a statement of purpose:

- (7a) **a gode playster for a kankyr'** & wyse helyng Take wete & bern yt & make poudyr þer of & putt þat (...) (*MEMT, Killeen medical texts*)  
 ['A good plaster for a cancer (ulcer) and a way of healing. Take wheat and burn it and make powder of it and put that (...).']
- (7b) **An vnement for þe hede** Take walwort & freche grese of a swyne & bray yt thurgch a canuas & a noynt þe temples of þe seke þer' wyth. (*MEMT, Killeen medical texts*)  
 ['An ointment for the head. Take danewort and fresh grease of swine and bray it through a piece of canvas and use it to anoint the temples of the sick.']
- (8a) **medysynys fore þe cotodyan fefere**  
 Take (...) & hete it wen it streynynd thoro a clothe & drynk (...) (*MEMT, Crophill's book*)  
 ['Medicines for the quotidian fever.  
 Take (...) and heat them and strain through a piece of cloth and drink (...).']
- (8b) **anontment fore þe gowte**  
 Take þe galle of a nox & grece of a fat capon & meng hem to togeder (...). (*MEMT, Crophill's book*)  
 ['An ointment for the gout.  
 Take the gall of an ox and grease of a fat capon and mix them (...).']

If we look at the terms from an etymological viewpoint, we can also observe some tendencies in their choice and distribution in the examined recipes. For practical reasons, the material has been divided into two large categories: (i) simple terms and derivatives (e.g. *apostolicon*, *comforter*, *diamargariton*, *drink*, *fomentation*, *powder*, etc.) and (ii) compounds and phrases (e.g. *aqua conseruativa*, *grene entret*, *hierapigra*, *oleum rosarum*, *white ointment*, etc.)<sup>6</sup>. The first group includes simple forms together with derivatives due to the fact that it is not always easy to determine if the examined words were direct loans from French or Latin and treated as simplex forms, or English formations "on a Neo-Latin basis" (Marchand 1963, 216) in which it would be possible to identify allomorphs of English morphemes<sup>7</sup>. Likewise, compounds and phrases are discussed together as there is no clear distinction between the two formations, at least in Middle English texts. Although

there exist criteria, among others, stress pattern or spelling that might be helpful in identifying compounds (e.g. Marchand 1963; Adams 1982; Lipka 1992; Bauer 2002; Sylwanowicz 2018), “all of them are of limited value and neither singly nor in combination are they sufficient to decide all doubtful cases.” (Sauer 1992, 714). Therefore, it was found appropriate to discuss compounds together with phrases, i.e. “word-groups used as words” (Leisi and Mair 1999, §16) that were used as names of medicaments (cf. also Marchand 1963, 122–127; Koziol 1972, 69ff.; Sauer and Scott-Macnab 2017, 188; Sylwanowicz 2018). Within each category, the examples are divided into those of Germanic and Romance (Latin and/or French) origin. In addition, in the second category we can also identify hybrid formations, cf. Table 2 below.

**Table 2.** Native and foreign forms in ME and EModE recipes

	Simple forms and derivatives		Compounds and phrases		
	Germanic	Romance	Germanic	Romance	Hybrids
ME	3 [0.03]	75 [0.7]	1 [0.01]	125 [1.1]	13 [0.1]
EModE	3 [0.02]	54 [0.3]	15 [0.08]	177 [0.9]	72 [0.4]

The data presented in Table 2 show that in medieval and later recipes there was a clear preference for terms from Romance languages. In the group of simple forms, nouns of Germanic origin are represented by only three terms (*drink*, *salve*, *water*), all being general references to dosage forms. These forms had to compete with their foreign equivalents, i.e. *potion*, *ointment* or *unguent* and *aqua*. The remaining terms, mostly names of specifics (e.g. *diacuminum*, *gargarisme*, *nerval*, *popilion*), are adoptions of French or Latin forms. As regards compounds and phrases, Germanic forms are also underrepresented, including only one example in Middle English material (*rede salve*) and fifteen examples in Early Modern English recipes, mostly references to liquid preparations (e.g. *white salve*, *mouth water*, *eye water*, *horseradish drink*, *wormwood water*, etc.). The terms of Romance origin prevail and these, again, include references to specific preparations (*aqua potabilis*, *gracia dei*, *unguentum aragon*, *unguentum defensivum*, *venice treacle*, etc.). Hybrid formations are also well represented, especially in Early Modern English recipes, and these usually function as explanations of Latinate forms, e.g. *white ointment* for *unguentum albumum*, *red ointment* for *unguentum rubeum*, or *drawynge plaster* for *emplastrum attractivum*.

## 5. Conclusions

The examination of the use of references to medical preparations in medieval and early modern English recipe collections has revealed that various factors might have conditioned the choice of specialised terminology.

The overall distribution of the terms in the examined material shows that they were evenly represented in medieval and early modern English recipe collections (cf. Figure 1). This suggests that there might have been no significant increase in the use of specialised terminology concerning medical preparations, and that the writers/compilers of early modern English medical writings might have heavily relied on the medical nomenclature established in medieval times. Another observation derived from the study of the distribution of terms would be that Middle and Early Modern English lexicon was deficient in medical specialised terminology, at least in the domain of names of medicaments (only 217 and 321 terms in ME and EModE recipes respectively). These assumptions, however, would be too far-reaching generalizations.

The use or avoidance of specialised terminology might have been determined by the text's intended audience. The examined recipe collections, as noted earlier, were primarily intended as quick reference books used by both learned and lay readers. Thus, many users of these collections might not have been familiar with medical nomenclature. Therefore, most recipes start with a statement of purpose, specifying the medical problem to be cured, rather than with a name of the preparation. Similarly, within the main body of the recipe the references to medicaments are scarce or, if there are any, these are usually general terms (*medicine for...*, *ointment for...*) rather than names of specifics. These observations explain, at the same time, a relatively low number of terms in the examined material. However, recipes are only part of a large corpora including a variety of medical writings (e.g. academic or surgical texts). Hence, the results obtained only from this material might not be sufficient to give definite conclusions concerning all medical writings of early England. The studies of early English medical terminology have shown that Middle and Early Modern English lexicon was not deficient in specialised terminology. For instance, Norri (1992; 1998) identified 1,188 names of sicknesses and 1,176 names of body parts in English medieval medical writings. His dictionary of medical English medical vocabulary collected from writings dated back to 1375–1550 is another evidence for the fact that medieval English lexicon did not lack necessary terminologies (Norri 2016). Other studies, McConchie (1997) or Sylwanowicz (2013; 2014a; 2014b; 2015; 2018), have revealed that early English writings laid solid foundation for the development of English medical nomenclature.

As regards the etymology of the terms under study, there was an expected tendency to use the resources of the Romance languages. Middle English medical writings relied heavily on Latin and Anglo-Norman sources, which naturally lead to the adoption of foreign forms. The authors of early Modern English recipes, on

the other hand, did not solely depend on foreign originals but often produced their own compilations in the vernacular (McConchie 1997; Taavitsainen 2010). The forms of foreign origin are more common in the collections of recipes compiled by trained physicians who turned to Latin for reasons of prestige and to give the text the air of technicality. Native or anglicized items, although marginally represented, are more common in the writings of lay practitioners and often function as explanatory terms for foreign adoptions (cf. also Sylwanowicz 2013).

### Notes:

- 1 For more on the discussion of the structure of the ME and EModE recipes see, e.g. Stannard (1982); Jones (1998); Alonso-Almeida (1998-1999; 2013); Carroll (1999; 2004); Taavitsainen (2001ab); Mäkinen (2004; 2006); Bator and Sylwanowicz (2017a); de la Cruz Cabanillas (2017).
- 2 In addition to these three categories *EMEMT* includes additional groups of texts: treatises on specific topics, regimens of health, medical journals.
- 3 In *MEMT* this collection is referred to as *Remedies and materia medica*, and in *EMEMT* as *Recipes and materia medica*.
- 4 The division is based on Sylwanowicz (2018).
- 5 The absolute number of references to medical preparations in available early English medical texts is much higher. In her study, Sylwanowicz (2018) examines about 1,650 references to medicaments (general names, terms denoting dosage forms and names of specifics) in Middle English medical writings (cf. also Norri 2016). In later writings the number of names might be the same or even higher (cf. also McConchie's (1997) study of the medical vocabulary in medical works between 1547 and 1612).
- 6 The division is based on Sylwanowicz (2018).
- 7 A similar problem was noted by Norri (1992, 91) in his discussion of Middle English names of sicknesses.

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