

Demons and Illness from Antiquity to the Early-Modern Period

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The Melancholy of the Necromancer in Arnau de Vilanova's Epistle against Demonic Magic

Sebastià Giralt

Arnau de Vilanova's Reprobation of Necromancy

For centuries, the name of physician and spiritual reformer Arnau de Vilanova (c. 1240–1311) has been linked to many occult arts, such as magic, necromancy, astrology, alchemy and oneiromancy. In fact, he became an archetypal master of occult arts, and many works in those fields were spuriously attributed to him. However, Arnau's true interest in the occult went no further beyond the oscillating boundaries drawn by the intellectual elite of his time. Certainly, Arnau was one of the physicians who led the process to incorporate and rationalize therapeutics from natural magic and astrology into Galenist medicine.¹ But, of course, this is not contradictory to the fact that one of his earliest preserved writings is a systematic attack on the intellectual foundations of necromancy. Its title is *Epistola de reprobacione nigromantice fictionis* (*Epistle on the reprobation of the deception of necromancy*), but it was improperly known in the past as *De improbatione maleficiorum*.² Naturally, the author understands

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1 On natural magic and astrology in Arnau's medicine, see Sebastià Giralt, “*Arnaldus Astrologus?*: la astrología en la Medicina de Arnau de Vilanova”, *Medicina & Historia* 18 (2003), 1–15; idem, “Medicina i astrologia en el corpus arnaldià”, *Dynamis* 26 (2006), 15–38; idem, “*Proprietas*: las propiedades ocultas según Arnau de Vilanova”, *Traditio* 63 (2008), 327–360; idem, “Arnau de Vilanova, un medico medievale davanti alle arti occulte”, in *Farmacopea antica e medievale* (Salerno, 2008), pp. 136–152. Concerning Arnau's fame as a prophet, alchemist, necromancer and magician, see Sebastià Giralt, “The Legend of Arnau de Vilanova, from the Middle Ages to the Early Modern Times”, *Micrologus: Natura, Scienze e Società Medievali* 21 (2013), 411–444.

2 The first critical edition of this epistle is *Epistola de reprobacione nigromantice fictionis* (*De improbatione maleficiorum*), ed. Sebastià Giralt, *Arnaldi de Villanova Opera Medica Omnia* (AVOMO), 7.1 (Barcelona 2005), whose text I am citing here by line (l.). On its

necromancy in the broad medieval sense of magic directed at supernatural beings (i.e. demons, angels and spirits, all of which were indistinctly considered demons in Christian orthodoxy), which is why Nicolas Weill-Parot recently called it ‘addressative’ magic.³ Arnau’s short text reaches us in form of an epistle addressed to the Bishop of Valencia, in all probability Jaspert de Botonac. The dedication to Jaspert, which constitutes the first part of the work (ll. 5–24), is the clue that dates the letter to the period when this person was bishop of Valencia, from 1276 until his death in 1288. An early dating, prior to 1281, seems more likely within this period, since in that year Arnau moved from Valencia to Barcelona. So, this is Arnau’s earliest surviving text with the sole exception of *De amore heroico*, which is cited in the epistle against necromancy, as we will see. It appears from the dedication that Arnau had written *De reprobacione* shortly before sending it to the bishop, by request of the members of a religious community that gave him lodgings while he was waiting for good sailing conditions. The last sentence of the text suggests that it originated from a discussion in which he attacked the “vulgar opinions” of undetermined opponents, who we can suppose were in favor of necromancy (ll. 289–292). The debate may have been held with some monks from that community, if we consider that the main milieu in which ritual magic was cultivated was the clerical underworld.

The core of the epistle is a scholastic *questio* in which Arnau denounces necromancy by denying its fundamental principle: the necromancer’s ability to summon and compel a spirit or demon to do his bidding in order to find out

composition, contents and sources see the introduction and Sebastià Giralt, “La epístola contra la nigromancia de Arnau de Vilanova”, *La coronica*, 36/1 (2007), 173–187. Previously the text had been published twice on the basis of fewer manuscripts: Paul Diepgen, “Arnaldus de Villanova *De improbatione maleficiorum*”, *Archiv für Kulturgeschichte* 9 (1912), 385–403; Mirko D. Grmek, “Rasprava Arnalda iz Villanova o crnoj magiji”, *Starine* 48 (1958), 217–229.

³ Nicolas Weill-Parot, *Astral Magic and Intellectual Changes (Twelfth-Fifteenth Centuries): Astrological Images and the Concept of Addressative Magic*, in *The Metamorphosis of Magic from Late Antiquity to the Early Modern Period*, Leuven, 2002, eds. J. N. Bremmer and J. R. Veenstra, pp. 167–187. Regarding the characterization of medieval necromancy see also: Sebastià Giralt, “Magia y ciencia en la Baja Edad Media: la construcción de los límites entre la magia natural y la nigromancia (c. 1230–c. 1310)”, *Clío & Crimen* 8 (2011), 15–72; idem, “The manuscript of a medieval necromancer: Magic in Occitan and Latin in MS Vaticano BAV, Barb. Lat. 3589”, *Revue d’histoire des textes* 9 (2014), 221–272; Richard Kieckhefer, *Magic in the Middle Ages* (Cambridge, 2000), pp. 8–17, 151–175, 181–201; idem, *Forbidden Rites: A Necromancer’s Manual of the Fifteenth Century* (University Park, Pennsylvania, 1998), pp. 1–198; Jean-Patrice Boudet, *Entre science et nigromance. Astrologie, divination et magie dans l’Occident médiéval (XII^e–XV^e siècle)* (Paris, 2006), pp. 205–278. On the evolution of the meaning of the word ‘necromancy’ from ancient Greece until the Late Middle Ages see my introduction to *De reprobacione*, pp. 59–66.

hidden or future facts or to perform his wishes. Within a natural-philosophical framework, the author's argumentation intends to show that there is no natural or supernatural power available to human beings in general, and especially to necromancers, to master spirits. With this purpose in mind, he reviews all the possible natural and supernatural resources used to subjugate demons and gives reasons to discard them one by one. The conclusion is that necromancers are deceived by demons, who simulate that they are being dominated by their invokers, in order to make them lose themselves and be led away from the correct path. The epistle ends by considering how the necromancers' belief that they can master demons is a symptom of the melancholic disease from which they suffer.

Throughout the above, Arnau shows that he has firsthand knowledge of the magical tradition, because he quotes two necromantic books: *Liber de fantasmatibus* (l. 106) and *Libri centre et circumferencie* (l. 128). He claims to have read the latter in Arabic. Although he does not mention any particular author or work, he also shows his familiarity with the literature against necromancy, because he uses arguments that can be retraced to other scholastic authors who had attacked it, especially Thomas Aquinas.

Necromancer's Disease

The argumentation against necromancy is the main subject of the text, but this paper only focuses on the short section that closes Arnau's epistle as an epilogue, where he uses another kind of source: the medical. Whereas previously the author had stuck to the domain of natural philosophy, in the epilogue the physician is clearly unveiled:

However, regarding all those who devote their attention to such concerns to the point of believing them to be a rational and technical science and, through their operations, seeking to fulfill their desires, we can only excuse them with a generic veil by saying that certainly they have a physical disease, but one that is hidden to most people. For perceptible damage does not occur in any action of an animated body without a pathological state. In any case, the disease that manifestly damages the act of reasoning and thinking in a person without causing fever or fury is called melancholy, as medical expertise says. Therefore, since they maintain a statement according to their own judgments and beliefs, albeit unlike what intelligence understands or what the sting of bright reason makes one think, the truth proves that they suffer from a corruption of melancholy, whether innate or acquired by accident.

But, concerning the fact that it remains invisible to observers that they are somehow melancholic, it is not enough to note that they are not seen to be afraid without manifest cause or they are not heard to mix speeches according to the common opinion, as is usual in melancholy. It is necessary to add that, if one reads the doctrine of Galen on hidden species of melancholy, one will find persons whose faculty of judgment is similarly corrupted and will know that, likewise, such pathology produces an organic corruption, as I have also made extensive reference to in my *Treatise on disordered love*, written from a medical view. Thus, reason seems to dictate that in the aforementioned persons such judgment has to be imputed not to a moral but rather a natural corruption and, therefore, they somehow deserve to be excused to the extent that it is tolerable.⁴

Therefore, Arnau sees only one excuse for those who believe that necromancy is technical and rational knowledge: they are ill, even though their disease is invisible to most people. Arnau's argument is that a belief so misguided and contrary to truth and intelligence must be due to an injury to their reason. And this injury can only be attributed, according to author's medical expertise, to melancholy, after excluding other kinds of alienation, if the absence of fury or fever is considered. These other modalities of alienation are not mentioned, but may be mania or phrenitis in accordance with the medical classification

⁴ “Universos tamen hiis cum diligencia sollicitudinibus intendentis eo usque videlicet, ut de ipsis credant artificiali ac racionabilem esse scienciam et suis conentur eciam satisfacere desideriis operando, uno solum communi velamine possumus excusare dicentes quoniam pro certo corporaliter egri sunt, licet pluribus sit occultum. Etenim sensibile nocumentum non cadit in accione aliqua corporis animati sine morbi malicia. Morbus autem per quem actus racionis et intellectus in homine sine febre et furia leditur manifeste melancolia nominatur, ut tradit pericia medicorum. Igitur aliquid asserentes suis estimacionibus et sue credulitatis opinione, verumtamen aliter quam capiat intellectus aut persuadeat clare racionis aculeus, veritas probat esse non sine melancolie vicio vel innato vel accidentaliter acquisito. Sed, quod lateat cernentibus eos melancolicos aliqualiter esse, parum est quod nec sine manifesta causa timere videntur nec audiuntur secundum commune iudicium hominum intermiscere sermones, que melancolicis ut plurimum insunt. Si quis tamen doctrinam legit Galeni de occultis speciebus melancolie, non sine vicio estimacionis inveniet huiusmodi homines scietque similiter huiusmodi maliciam organorum vicium commutari, quemadmodum eciam in tractatu *De amore inordinato*, quem scripsimus in medicina, fecimus notabillem mencionem. Iam ergo racio dictare videtur quod supradictis hominibus talis estimacio non sit ad moris vicium quam nature pocius imputanda et sic, quantum hoc tolerat, merentur quodammodo excusari” (ll. 264–288).

of alienations discussed in the *Pars operativa*, a head-to-toe compendium of practical medicine left unfinished by Arnau and which we can assume was a product of the latter years of his life (1308–1311).⁵ Due to its incomplete state, this text is focused on mental disorders, and is therefore a reference for understanding the ideas about melancholy in *De reprobacione*, although we must bear in mind that there was a difference of more than two decades between the two texts. *Pars operativa* tells us that fury is one of the signs of mania, whereas fever might be produced by hot aposteme, to which phrenitis is normally attributed. Melancholy may be due to an originally unbalanced complexion (innate) or to a bad lifestyle (acquired), a dichotomy already mentioned by Rufus of Ephesus and Galen and preserved in medieval medicine.⁶ Indeed, Rufus and Galen, the former being the latter's main source, were the most influential ancient medical authors on the posterior developments regarding melancholy. In any case, what is particularly distinct about Arnau's discussion is his reference to a

5 Fernando Salmón, "De parte operativa: A Preliminary Approach to its Date of Composition and Contents", *Arxiu de textos catalans antics* 30 (2011–2013), 373–383. Fernando Salmón and Michael McVaugh are working on the edition of this text for AVOMO.

6 "It is necessary to recognise that there are two kinds of melancholy. 1) Some of them have melancholy because of their nature and original mixture, whilst 2) others have acquired this mixture later owing to a bad diet", Rufus of Ephesus, *On Melancholy*, ed. and trans. Peter Ernst Pormann (Tübingen, 2008), Fn. 22, p. 35; "Qui quidem humores in quibusdam hominibus multum creatur aut propter complexionem suam ab initio aut propter assuefactionem cibariorum in hoc mutandorum cum in venis digeruntur", *De interioribus*, 3, 7, in Galen, *Opera* (Venice, 1490), 2, [125va], = Greek original *De locis affectis*, *Opera omnia*, ed. Carl G. Kühn (Leipzig, 1821–1833), 8, 177; "Colere autem nigre alia est naturalis, alia non naturalis superfluitas", *Canon*, book 1, fen 1, doct. 4, cap. 1 (Lyon, 1522), fol. 7v. The mentioned edition of Rufus includes some essays relevant to the history of melancholic disease in Ancient, Medieval and Early Modern Times. On melancholy and other mental disorders in Antiquity and the Middle Ages, see Raymond Klibansky—Erwin Panofsky—Fritz Saxl, *Saturn and Melancholy. Studies in the History of Natural Philosophy, Religion and Art* (London—New York, 1964), esp. pp. 27–135; Hubertus Tellenbach, *Melancholie* (Berlin, 1974), pp. 17–32 of the Spanish translation: *Melancolía* (Madrid, 1976); Stanley W. Jackson, *Melancholia and Depression: from Hippocratic Times to Modern Times* (New Haven, 1986); Hellmut Flashar, *Melancholie und Melancholiker in den medizinischen Theorien der Antike* (Berlin, 1966), Jackie Pigeaud, *La maladie de l'âme. Étude sur la relation de l'âme et du corps dans la tradition médico-philosophique antique* (Paris, 1981), esp. pp. 122–133; eadem, *Folie et cures de la folie chez les médecins de l'antiquité gréco-romaine. La manie* (Paris, 1987), esp. 11–129; Muriel Laharie, *La folie au Moyen Âge. XI^e–XIII^e siècles* (Paris, 1991); Laura Borràs, *Més enllà de la raó* (Barcelona, 1999); Jean-Marie Fritz, *Le discours du fou au Moyen Âge* (Paris, 1992). There are also text anthologies, such as *The Nature of Melancholy: From Aristotle to Kristeva*, ed. Jennifer Radden (Oxford, 2000), and *Anthologie de l'humeur noire: écrits sur la mélancolie d'Hippocrate à l'Encyclopédie*, ed. Patrick Dandrey (Paris, 2005).

hidden melancholy, one that is normally not detectable and is different from the most known and common forms. The difference is the remark that it does not show the usual symptoms, for instance unmotivated fear or speech disorders, two signs mentioned in the ancient and medieval descriptions of this disease.⁷ Arnau says that this kind of melancholy is usually unnoticed, because the only perceptible sign is the corruption of the estimative or rational faculty (*estimatio*)—the cognitive faculty that is responsible for making judgments. This damage also occurs in the common species of melancholy, not alone but among other signs. Such stress on a lesion of the rational faculty is closer to Avicenna and Rhazes than to Galen or Constantine, who, however, also refer to the damaged reason of melancholics. Certainly, Avicenna's *Canon* offers fear and corruption of judgment as the first signs of melancholy in a formulation that is recalled in *De reprobatione* and especially in Arnau's late *Pars operativa*. The Latin version of Rhazes' *Continens*, in a Rufus' quotation, also names "fear, doubtfulness and bad thought about one single thing" as the primary symptoms.⁸ So, there may be more than one authoritative medical source for

⁷ Whereas speech disorders are not always mentioned, fear is one of the defining symptoms of melancholy, together with sadness and depression. Whereas speech disorders not always are mentioned, fear is one of the defining symptoms of melancholy in addition to sadness or depression: "Fear and depression that is prolonged means melancholy", Hippocrates, *Aphorisms*, sixth section, 23, ed. and trans. W. H. S. Jones, vol. 4 (Cambridge, Mass., - London, 1931), pp. 184–185; [Aristotle], *Problem xxx,1*, 954b, *Problems. Books 20–38. Rhetoric to Alexander*, ed. and trans. W. S. Hett (Cambridge, Mass., - London, 1937), pp. 160–165 (fear and cowardliness only in some situations); Aretaeus of Cappadocia, *Aretaeus*, ed. Karl Hude (Berlin, 1958), 3, 5, 6, and 3, 6, 10, pp. 39 and 43; "Timor et tristitia eorum et vituperatio huius vite ab eis et odire homines omnibus melancolicis pertinent [...]. Ypocrates bene omnia accidentia eorum cum his duobus conclusit timore vicelicit et mentis corruptione, quia propter mentis corruptionem quicquid vident odio habent et semper sunt tristes et timorosi", Galen, *De interioribus*, 3, 7, in *Opera*, 2, [fol. 126rb] (=Kühn, 8, 190–191), and see also next note; "tardus ad loquendum", "timor de re non timenda", Ishāq Ibn 'Imrān—Constantine the African, *Māqala fi l-mālīhūlīyā / Constantini Africani libri duo de melancholia: vergleichende kritische arabisch-lateinische Parallelausgabe*, ed. and trans. Karl Garbers (Hamburg, 1977), pp. 111 and 120; "Profert verba fatua que non habent caput neque caudam nec prosequitur verba incepta nec reddit rationem de eis", Bernard of Gordon, *Lilium medicine* (Lyon, 1559), vol. 2, 19, fol. 69ra, and the passage reproduced in note 31 below; "Signa melancolie in communi est timor irrationalis et tristitia sine manifesta causa", Arnau, *Pars operativa*, in *Opera* (Lyon, 1520), fol. 128rb. See also the citations of Rufus and Avicenna in the next note.

⁸ "Et signa eius principii sunt timor, dubitatio, cogitatio falsa in una re sola, et in omnibus aliis dispositionibus suis erit sanus. Et species opinionum eorum sunt infinite [...]. Et morantur cum his accidentibus per aliquod tempus, et postea fortificantur omnia accidentia melancolie", *Oeuvres de Rufus d'Ephèse*, eds. Charles Daremberg and Ch. Émile Ruellé (Paris, 1879).

Arnau's statement that melancholy is proved by improper thoughts, but none of them sustains his assertion that it is the only visible sign. However, he supports the existence of a disease suffered by necromancers through what he calls "Galen's doctrine on the hidden species of melancholy", and compares their mental state with what he had discussed in his treatise on passionate love, considered to be a pathological symptom: the corruption of the estimative faculty suffered by heroic lovers, although for a different reason, causes an overestimation of the desired person above all other things. Arnau warned that passionate love can turn into mania or melancholy.⁹

Nevertheless, the reference that needs further explanation is Galen's citation, because, in fact, it does not match any of his texts directly but is derived from a contamination of Galen's classification of melancholy exposed in *De interioribus* caused by the Latin-Arabic medical tradition. This transformation occurred through two key figures in the medieval transmission of the ancient ideas on melancholy: Ishāq ibn 'Imrān (c. 900) and Constantine the African (11th century), joined by their link with the north-African city of Kairouan. Ibn 'Imrān's *Treatise on melancholy* is mainly based on Rufus of Ephesus and Galen, among others. This treatise was spread to the Latin Western world in the form of a reworking by Constantine titled *De melancholia*.¹⁰ Constantine's writing was

p. 455. The Latin version appears to be unfaithful when compared with the English translation from Arabic published in Rufus, *On Melancholy*, F13, 2, p. 37: "The beginning of melancholy is indicated by fear, anxiety and suspicion aimed at one particular thing whilst no disease is present in any other respect"; "Signa principii melancolie sunt existimatio mala et timor [...]. Cum autem confirmata est timor et malitia existimationis et angustia et sollicitudo et alienatio sermonis [...]. Sunt trauli et sylabam multotiens repetens antequam dictionem proferant", Avicenna, *Canon* (book 3, fen 1, tract. 4, cap. 18, f. 15orb); "malitia estimationis", Arnau, *Pars operativa, Opera*, f. 128rb; "Colera nigra rationalis anime fundamento dominatur, si tristitiam et timorem melancolici patientur mortisque suspicione. Videmus enim quod nulla res extrinsecus adveniens interdum generet timorem sicut tenebre quoniam enim eam partem rationalis anime quasi tenebre operiunt", Galen, *De morbo et accidenti*, 5, 7, in *Opera*, 2, [f. 151r]. Also Constantine: "Alii corruptam habent imaginationem et rationem", p. 120.

- ⁹ *Tractatus de amore heroico—Epistola de dosi tyriacalium medicinarum*, ed. Michael McVaugh, AVOMO, 3 (Barcelona, 1985). There is now a Catalan translation: *Tractat sobre l'amor heroic*, ed. Michael McVaugh and trans. Sebastià Giralt (Barcelona, 2011). Regarding this work and the pathological conception of passionate love in Galenism, see also Massimo Ciavolella, *La malattia d'amore dall'antichità al Medioevo* (Rome, 1976), pp. 67–95; Danielle Jacquot - Claude Thomasset, "L'amour heroïque à travers le traité d'Arnaud de Villeneuve", in *La folie et le corps*, ed. Jean Céard (Paris, 1985), pp. 143–158.
- ¹⁰ The treatise by Ibn 'Imrān has been edited by Garbers including its Arabic text with a German translation and Constantine's Latin version (cited above, in note 7). There is also

far more an adaptation than a translation because, as was usual in his versions, he did not declare his source text and altered the original work by adding data from other authors, especially in the final section, omitting parts that he considered superfluous and paraphrasing the source text. In fact, since the twelfth century he has often been criticized as a somewhat incompetent translator: his tendency to shorten and simplify causes distortion and misunderstanding as a result of the missing content.¹¹ We will now look at one of the consequences of his incompetence.

a French translation: Ishāq Ibn ‘Imrān, *Traité de la mélancolie*, ed. and trans. Adel Omrani (Carthage, 2009). On Ibn ‘Imrān and his writing, see Garber's introduction (pp. xiii–xxx), Danielle Jacquot—Françoise Micheau, *La médecine arabe et l'occident médiéval* (Paris, 1990), pp. 109–110; Manfred Ullmann, *Die Medizin im Islam* (Leiden, 1970), pp. 125–126; Peter E. Pormann, “Melancholy in the Medieval World. The Christian, Jewish, and Muslim traditions”, in Rufus, *On Melancholy*, pp. 179–196; Adel Omrani—Niki S. Holtzman—Hagop S. Akiskal—S. Nassir Ghaemi, “Ibn Imran's 10th Century *Treatise on Melancholy*”, *Journal of Affective Disorders* 141/2 (2012), 116–119.

¹¹ Regarding Constantine and his translation activity, fundamental for Latin medieval medicine, see Jacquot—Micheau, ibidem, pp. 96–129; Lynn Thorndike, *A History of Magic and Experimental Science* (New York—London, 1923), I, pp. 742–759; Marie-Thérèse d'Alverny, “Translations and Translators”, in *Renaissance and Renewal in the Twelfth Century*, eds. R. L. Benson and G. Constable (Cambridge, Mass., 1982, repr. in *La transmission des textes philosophiques et scientifiques au Moyen Âge*, Aldershot, 1995), pp. 421–462 (pp. 422–425), Enrique Montero Cartelle, in “Introducción”, *Constantini liber de coitu. El tratado de andrología de Constantino el Africano* (Santiago de Compostela, 1983), pp. 11–70; idem, “Sobre el autor árabe del *Liber de coitu* y el modo de trabajar de Constantino el Africano”, *Medizinhistorisches Journal*, 23/2 (1988), 105–113; idem, “Encuentros de culturas en Salerno: Constantino el Africano, traductor”, in *Rencontres de cultures dans la philosophie médiévale. Traductions et traducteurs de l'antiquité tardive au XIV^e siècle. Actes du Colloque international de Cassino (1-17 juin 1989)*, eds. J. Hamesse and M. Fattori (Leuven, 1990), pp. 65–88; Danielle Jacquot, “Le sens donné par Constantin l'Africain à son oeuvre: les chapitres introductifs en arabe et en latin”, *Constantine the African and 'Ali ibn Al-'Abbas: The Pantegni and related texts*, eds. Ch. Burnett and D. Jacquot (Leiden - New York - Köln, 1994), pp. 71–89. Stephano da Pisa translated the *Pantegni* again in 1117 because he considered Constantine's previous version incomplete and inappropriate, in addition to accusing him of presenting his translations as his own works; later Tibbon criticized him with similar arguments when translating the *Viaticum* into Hebrew in 1259. However, scholars disagree about such considerations. Montero suggests that his mistakes are no more numerous than those of other translators', but his bad reputation could have been spread by his rivals. In contrast, Jacquot analyzes the differences between the original and the translation and attributes them both to Constantine's purpose of adapting to the necessities of Latin medicine and his incompetence.

The departure point is the division into three types of melancholy discussed in Galen's *De interioribus*: one form of melancholy spreads throughout the body and passes into the brain, another one only affects the brain (encephalic), generated in the same or in another organ, and a third one, called flatulent disease or hypochondriac, originated in the upper abdomen or hypochondria.¹² This categorization became canonical among the medical authors of late Antiquity and the Arabic and Latin Middle Ages. Ibn 'Imrān and Constantine reproduce the same classification without explicitly citing Galen.¹³ But what is its origin? We do not know for certain, but it seems to have precedents in previous authors such as Aretaeus of Cappadocia, who might have lived in the mid first century or around 120 AD, and Rufus of Ephesus, who probably lived during Trajan's rule. Aretaeus already considered two kinds of melancholy: one caused in the hypochondria and another one passing into the head by sympathy.¹⁴ This distinction established by Aretaeus is not indicated as a precedent of Galen's in the literature that I have consulted, but it clearly is in my view. In contrast, we have no conclusive evidence regarding Rufus' position on the classification of melancholy, firstly because of the indirect transmission of his *De melancholia*, which is lost and can only be reconstructed from citations

¹² "Sed illud demum determinare prius necessarium mihi esse videtur quod derelictum est a medicis, quemadmodum enim et in partibus corporis que apparent quandoque quidem omnibus eadem appetit crasis [...], quandoque vero una aliqua particula aut colericum aut flegmaticum aut melancolicum suscipiens humorem, ipsa sola exalteratur crasi. Ita contingere potest et cerebrum quandoque verso qui secundum venas sanguine melancolico facto communi ratione nocimenti et ipsum noceri. Secundum alium vero modum impassibili permanente sanguine, qui secundum totum hominem et alteratur qui secundum cerebrum solum et contingere hic dicitur vel melancolico humore fluente in id aliunde vel generato in illo loco; generatur autem a calore multiplicato locali super coquentem aut calefactam coleram aut crassiorem et nigriorem sanguinem. Differunt autem ad curam no parum determinatio hec [...]. Item tertia melancolie [corr. manie] species est que fit propter stomachum, sicut epilentia que fit propter stomachum, quam quidem medici vocant lateralem aut inflativam", *De interioribus*, 3, 7, Galen, in *Opera*, 2, [125vb–126ra] (=Kühn, 8, 181–186). I use the "hypocondriac" of the Greek text, although in this Arabic-Latin version it is replaced by "lateral", because Constantine and other medieval authors do employ it.

¹³ "Melancolica igitur passio triplex est: alia enim est in ore stomachi et hypocondriis, alia in cerebro, in quo duae sunt considerandae: aut enim in essentia cerebri, aut in toto corpore, quae a pedibus ad cerebrum solet ascendere. In essentia cerebri vel est cum acuta febre, quod plurimum fit in phrenesi", Constantine, *De melancholia*, p. 107, cf. the German translation of Ibn 'Imrān's *Māqala fi l-mālīhūliyā*, pp. 17–18 in the same volume.

¹⁴ III, 5, 4, *Aretaeus*, p. 40. However, the problem is that Aretaeus' chronology is highly controversial.

by other authors, although it became the main source of the Arabic discussions on this disease. Another cause for such uncertainty is given in a quotation of Rufus by Ibn 'Imrān, according to which the Greek physician focused solely on the hypochondriac type, since he felt that such an approach was sufficient for a skilled physician to find out the description and therapeutics concerning the other two types of melancholy.¹⁵ Even though he does not mention what the other two are in the extant text, the recognition of a threefold division has been seen by some scholars as proof that Rufus was already considering the classification later discussed by Galen.¹⁶

What concerns us, however, are some ideas regarding the first of the above-mentioned species of melancholy. This is Ibn 'Imrān's text:

We have seen how *this kind of melancholy* that ascends from the lower body into the brain, when it occurs, *is hidden and occult*. Only one commentator among physicians reports it for two reasons: one is the diversity of human temperaments according to their nature and the other is that the experience with human temperaments can only achieve an indisputable solidity thanks to a longer time spent with the patient and more frequent visits after numerous examinations and revisions. Regarding the knowledge of human nature, the humoral complexion and structure, experience with the patient's normal state offers considerable help in exploring him and seeking a medical treatment for him. For, when the physician knows the predisposition of the person while he is healthy, he

¹⁵ Ibn 'Imrān, echoed by Constantine, and Rhazes agree that Rufus focuses on hypochondriac melancholy, while appreciating Rufus' treatise: "Rufus, the physician, however, had only discussed the hypochondriac kind of the disease of melancholy, and he dedicated his book to it. Yet, Rufus is willing to argue and say: 'My discussion of one kind of the disease of melancholy is linked and connected to the other two types. Moreover, by my discussion of this one kind of melancholy, I hint at the other two types as regards the symptoms which I have listed and the treatment which I have described'", Rufus, *On Melancholy*, F5, p. 29; "Rufus autem ille de solis hypocondriaciis melancholicis illum librum fecit. Sed tamen cum de specie illa sola scriperit, cum qua tamen duas alias tetigit, se omnes tres comprehendisse dixit", Constantine, *De melancholia*, p. 112.

¹⁶ The last effort to reconstruct the lost text of Rufus' *De melancholia* from the fragments quoted by Greek, Arabic and Latin authors is *On Melancholy* by Portman, which represents a considerable advance in respect of the previous collection by Daremburg and Ruelle: Rufus, *Oeuvres*. See Portman's introduction (pp. 3–23) regarding the contents, the transmission of the text and the question of the classification of melancholy, in addition to his commentary and one of the essays contained in the same volume: Philip J. van der Eijk, "Rufus' *On Melancholy* and its Philosophical Background", pp. 159–178.

is able to distinguish the onset of the disease in the moment, as well as the severity of the damage suffered in his soul and his body. [...]

[F5] We noticed that Rufus, the physician who composed the book *On Melancholy*, discussed the symptoms and incidents occurring to melancholics at great length in the first treatise. Finally, after he discussed at great length the things which occur to each single one of those suffering from melancholy, he said (having cut short his discussion): 'In this treatise of ours, we have just listed in a reliable fashion the symptoms occurring in melancholics, so that, if the reader understands our book well, he will even be able to comprehend all those symptoms present in those suffering from this disease which we have not mentioned in this work.'

By saying this, Rufus, the physician, indicated that the *symptoms of this disease can hardly be ascertained or elucidated to their full extent*. This is the case not because *the symptoms of melancholy, when they dominate the body, are hidden*. Rather, the way in which the soul is affected is hidden, because the substance of the soul is concealed and difficult to perceive and it is unclear how one arrives at a knowledge of the choices of the soul, and how one comes to measure whether the soul's thought is good or bad, whether the imagination is sound or not, whether the memory is strong or weak, and, in general, whether the intellect urges something on, is opposed to it, or fails in it. The situation is similar as concerns the soul's character traits and their diversity in it. All this is subject to disagreement and diverse opinions, since even intelligent physicians are at a loss, and do not have knowledge of this illness with all its different symptoms.¹⁷

Therefore, Ibn 'Imrān explicitly stresses the difficulty faced by physicians when diagnosing the kind of melancholy that ascends from the lower body into the brain. He gives a quotation from Rufus' treatise as support for his discussion, but it seems to me that Rufus' words are interpreted by the author in an abusive way in order to turn them to his advantage. He perhaps (this is not very clear in the text) generalizes the indicated difficulty to melancholy in general. In fact, in another passage, transmitted by Rhazes, Rufus does clearly warn of the possibility that melancholy goes unnoticed during its early stages if the physician is not skilled enough to detect its signs immediately.¹⁸ In any case,

¹⁷ Ibn 'Imrān's first part has been translated by me from Garbers' German version of *Māqala fil-l-mālīḥūlīyā* (pp. 19–21). Rufus' citation, together with its interpretation by Ibn 'Imrān, is taken from Pormann's edition, p. 29 (F5). See also Pormann's commentary, pp. 81–82.

¹⁸ Rufus' fragment from Rhazes' *Continens*: "He said: When melancholy occurs, often only skilful physicians can recognize it at the onset. For an intelligent physician usually knows

Rufus must mean the hypochondriac kind, the only one he discusses, and not that rising from the lower body, to which Ibn 'Imrān refers.

When compared, Constantine's version is shorter and introduces significant differences in meaning, which are indicated in italics in this particular passage:

This kind of melancholy and the other one that ascends from the lower body into the brain, when they are fully developed, *are very hidden and obscure*. Thus, with these words Rufus manifests that *melancholic symptoms are imperceptible*. The reason for such *imperceptibility* is that melancholy, when it has dominated the body, *is hidden*. Likewise passions of the soul are hidden because of the *imperceptibility* of their essence and the difficulty of them being found.¹⁹

If we compare Ibn 'Imrān's text with the version of it given by Constantine, it becomes clear that the latter is the source for qualifying some of the three types of melancholy as 'hidden'. Constantine first transforms the varieties of melancholy that "are very hidden and obscure" into two, whereas Ibn 'Imrān only refers to the kind "that ascends from the lower body into the brain" or maybe to melancholy in general. In fact, Constantine's text also seems to only be discussing this type and, in my view, the sudden duplication should be

how to distinguish a malign state of the soul, despair and worry occurring at the onset of melancholy from affections caused by something else", Rufus, *On Melancholy*, F15, p. 39; cf. "Et quando accedit melancolia, possibile est quod eius notitia occultatur medico in principio; sed peritus medicus et subtilis indagationis poterit eam cognoscere in initio per malitiam animae, per paucam eorum abstinentiam, membrorum ariditatem et proper tristitiam . . .", Rufus, *Oeuvres*, p. 356.

¹⁹ The whole passage: "*Haec autem species melancholiae et alia*, quae ab inferiore cerebrum ascendit corpore, cum plenae sint et perfectae, *multum sunt occultae et obscurae*, ut nullus speret vel cogitet eas esse. Quod ex qualitatum diversitate contingit. Intellegere enim naturas hominum et astutias eorum incomprehensibile est. Ex diurna igitur conversatione et ipsarum cognoscitur cohabitatione, et quia naturae in sanitatibus intellectae, cum videantur a priori esse mutatae, intelliguntur in has passiones incidisse [...] 'Tantum in hac particula diximus de melancholicis accidentibus, ut si lector percurrit studiosus et intentus, ex scriptis non scripta perpendere possit accidentia'. Monstravit ergo Rufus in his verbis, quia *accidentia melancolica incomprehensibilia* sunt. Causa *incomprehensibilitatis est*, quia, cum melancholia corpus superavit, *occulta est*. Item passiones animae sunt occultae ex incomprehensibilitate sua essentiae et inveniendi difficultate. Quis enim possit investigare rationes, imaginationes et memorias animae, quot et quantae sint in unoquoque? Similiter astutias hominum quis possit comprehendere? Unde perfecti medici in dubium cedidere, cum nequirent ad plenum huius infirmitatis noticiam habere" (*De melancholia*, pp. 111–112).

considered a simple mistake. Secondly, whereas the discovery of the accidents or symptoms of melancholy in Ibn ‘Imrān’s text is described as extraordinarily difficult, in Constantine’s version it is an impossibility: the symptoms (*accidentia*) become imperceptible (*incomprehensibilia*) and the melancholy hidden (*occulta est*) in the absolute sense, without any nuance.

The Constantinian origin of Arnau’s reference to “hidden species of melancholy” is therefore clear. Moreover, it becomes evident that in the previous parts of *De reprobacione* terms such as *vesania* or *alienatio* are not used generically, with a “low level of medical language”,²⁰ as they were used by other detractors of necromancy such as William of Auvergne and Roger Bacon: William blames the insanity (*vesania*) of magicians and astrologers, which leads them to believe that they perform their marvelous works in virtue of God’s name; likewise Bacon denounces “the dementia of false astrologers” several times.²¹ However, there is no doubt that such terms are employed in Arnau’s epistle with the technical precision of a professional physician. This can be observed in his *Pars operativa*, when Arnau enumerates the kinds of mental alienation according to the patient’s damaged operations, simple if the operations of only one faculty of the brain are affected, and composite if more than one. In the simple category, the alienation that solely affects the rational faculty (*estimatio*) is properly called *vesania* or *insania*.²² This is the case with necromancer’s melancholy, as seen. Of course, we have seen another name employed in Arnau’s epistle: *melancolia*. This is not contradictory with

²⁰ Expression taken from Joseph Ziegler, *Medicine and Religion c. 1300. The Case of Arnau de Vilanova* (Oxford, 1998), pp. 59–60.

²¹ “Nec praeterunda est illa vesania magorum et astronomorum, qui virtute cuiusdam ex nominibus creatoris opinati sunt se operari diabolica omnia mirabilia sua . . .”, William of Auvergne, *De legibus*, cap. 27, in *Opera omnia* (Paris, 1674), I, p. 91; “demencia matematicorum falsorum”, Roger Bacon, *Tractatus brevis*, in Pseudo-Aristotle, *Secretum secretorum*, ed. Robert Steele, *Opera hactenus inedita Rogeri Baconi*, 5 (Oxford, 1920), p. 6; “falsorum mathematicorum insanias”, *Opus maius*, ed. John Henry Bridges (Oxford, 1897–1900), I, p. 241.

²² “Species alienationis simplex, in qua tantum leditur operatio partis unius ipsius mentis, *composita*, in qua due vel omnes leduntur [...] et dicitur fatuitas, quasi fantasie vel imaginationis pravitas, alienatio in qua tantum estimatio leditur, sive, ut loquamur in homine specialiter, in quo dicitur cogitativa. Nam et hoc proprie dicitur vesania vel *insania*, quasi contraria operatio sanitati, scilicet recte rationi, que est suprema et propria hominis sanitatis”, *Pars operativa*, in *Opera*, fol. 126rb, with corrections from the edition of Basel (1585), c. 270, in italics.

the previous name, because it is due to the cause of this disorder: melancholic humor, harming either the rational faculty (*vesania*) or another faculty.²³

However, despite finding the real origin of Arnau's reference, the problems are not over. We still have two questions to answer. Firstly, why does he quote the species of melancholy under Galen's name? We can only speculate. As far I can see, there are three possible reasons:

It may be a simple mistake, perhaps due to the circumstances in which *De reprobacione* seems to have been written, while the author was far from his library and therefore forced to quote from memory. Maybe he was confused because the modalities of melancholy were discussed in the third book of *De interioribus*, a treatise that Arnau knew or would know perfectly well in the future because years later he would write a summary of the first two books.²⁴

The ascription to Galen could also be explained by the possible circulation of *De melancholia* under his name. This false attribution is demonstrated by William of Auvergne, when he claims to base his discussion of religious melancholy on Galen's *De melancholia*, although this disease is dealt with in Constantine's treatise, and not in any of Galen's works.²⁵

Finally, we can also note that Constantine's name is hardly ever mentioned by Arnau (or Bernard of Gordon), even though he uses him as a source, probably due to the poor reputation of his versions and work among medieval physicians or to his reluctance to mention medieval Latin authors.²⁶

The second problem is how Arnau explains "the hidden species of melancholy". In fact, as we have seen in other medical authorities (and unlike what Arnau affirms in his epistle), Constantine never states, anywhere, that the only symptom of any of the kinds of melancholy is injury to reason. On the contrary,

²³ Cf. "Alienatio, quam concomitut timor irrationalis et solicitude, que communiter nominatur melancholia, recipiens suam denominationem a sua causa materiali", Arnau, *Pars operativa*, fol. 126v; "Invenimus ceteros appellare hanc passionem melancoliam, quod nomen significat materiam qua ista passio generatur", Galen, *De interioribus*, 3, 7, in *Opera*, 2, fol. [126rb] (=Kühn, 8, 191–192).

²⁴ Edited in *Commentum supra tractatum Galieni De malicia complexionis diverse—Doctrina Galieni de interioribus*, eds. Luis García Ballester, Eustaquio Sánchez Salor and Richard J. Durling, AVOMO 15 (Barcelona, 1985), pp. 298–351.

²⁵ "Galenus autem in libro *De melancholia* dicit ex huiusmodi desideriis interdum aliquos incurrire morbum melancholicum, qui proculdubio desipientia magna est et abalienatio a rectitudine intellectus et discretionis rationis", William of Auvergne, *De universo*, 2, 3, 20, in *Opera omnia*, vol. 1, p. 1054.

²⁶ Constantine is only cited by Arnau once: Juan Antonio Paniagua, *El Maestro Arnau de Vilanova, médico*, in *Studia arnaldiana: trabajos en torno a la obra médica de Arnau de Vilanova, c. 1240–1311* (Barcelona, 1994), p. 28.

the African provides a list of the general symptoms (*accidentia*) of melancholy, including fear, and the particular symptoms of each type of this disease.²⁷ In fact, Arnau himself does not include any hidden species of melancholy in his late *Pars operativa* when he discusses this disease, characterized with the symptoms of “irrational fear and anxiety”.²⁸ Such disagreements seem to be related to his objective of diagnosing necromancers with melancholy.

The Purpose of a Diagnosis

In order to discover Arnau’s purpose, it is useful to compare this text with others, both by Arnau and by other authors. Of course, the relationship between melancholy and magical arts is not new. One of precedents is a passage from *De universo* by William of Auvergne (1231–1236). Therein William resorts to melancholy to attack the practice of divination through Apollo’s mirror.²⁹ The medical source for his ideas on melancholic disease, considered “insanity and alienation of the right intelligence and the discernment of the reason”, is also Constantine’s *De melancholia*, again under Galen’s name. But, unlike Arnau’s epistle, William attributes such magical operations not only to a deception caused by demons but also to demonic possession, in accordance with the widespread opinion that the devil uses melancholy to influence humans.³⁰

²⁷ Constantine, *De melancholia*, pp. 119–127.

²⁸ See note 6.

²⁹ “Ne credideris autem mendacibus qui plenam revelationem obtinere se posse credunt per speculum Apollinis, quoniam nec ipse Apollo cognitionem habet omnium presentium, praeteritorum et futurorum quae per speculum Apollinis pollicentur. Habet autem fortassis fantasia speculi ipsius ex arreptione daemonicâ, sine qua opus speculi non est verisimile consumari, habet—inquam—hoc: ut sic deceptus et arreptus opinetur se habere scientiam omnium occultorum. Et iam in multis experientia docere potuit quod in istud deliramentum inciderunt. Sic enim plerumque vides de melancholicis, id est de morbo melancholiae laborantibus, qui multa se opinantur scire quae penitus ignorant. Ita possibile est ut, crescente in ipsis morbo isto, crescat et in eis delira ista opinio. Quod si aliquis ex malignis spiritibus quaedam revelare de occultis per huiusmodi speculi inspectionem permittitur, scito illa pauca esse et quod raro eidem spiritui revelationes huiusmodi facere permittitur”, William of Auvergne, *De universo*, 2, 3, p. 1058. On William and demonic magic and divination see Thomas B. de Mayo, *The Demonology of William of Auvergne: By Fire and Sword* (Lewiston, NY, 2007), pp. 119–190, and my works cited in notes 3 and 35.

³⁰ Two examples of the connection between melancholy and devil are Hildegard of Bingen, *Causae et curae*, ed. Paul Kaiser (Leipzig, 1903), 2, pp. 143–144, and Albert the Great, *Super Matthaeum*, 8, 6, in *Opera omnia*, 21, ed. Bernhard Schmidt (Münster in Westfalen, 1987).

Therefore, we can see William as a transitional stage in the evolution from the religious view that considers a necromantic operation to be based on demonic possession towards the naturalistic conception that regards the belief in necromancy as a possible consequence of melancholy. In contrast, the naturalization process appears to have already been completed in Arnau's epistle: he does not see necromancy as an example of demonic possession but merely as a deception by the devil. And to understand how a person, especially if educated, can believe in an idea as absurd as the rationality of necromancy it is necessary to impute it to some pathological condition.

Such attribution of melancholy to the defenders of ideas that were seen as intellectual errors is also found in other contemporary authors. In his *Lilium medicine* (1305), Bernard of Gordon, a professor at the University of Montpellier at least from 1283, when discussing the danger of melancholy becoming a mania, says that the hidden signs of a future mania are: thinking what should not be thought, considering good or honest what is not, setting oneself unreasonable or impossible goals, about which they have a wrong judgement. Another sign is seeing demons, black monks, dead people or other fantasies in dreams.³¹

Bernard's consideration of illegitimate or irrational beliefs and visions of demons as being hidden signs of melancholy recalls Arnau's diagnosis for necromancers. The difference is that Bernard indicates such hidden signs in addition to the general perceptible symptoms of melancholy, while Arnau says they are the only ones. Therefore, Bernard is more faithful to Constantine and the other medical authorities than Arnau. Indeed, there is no doubt that Constantine is one of Bernard's main sources,³² but he does not mention him like Arnau. He only cites Avicenna and Galen.

³¹ "Signa autem occulta future manie sunt, cum aliquis imaginatur aut cogitat ea que non debet cogitare aut iudicare aut imaginare et cum putat bonum quod non est bonum et putat honestum quod non est et cogitat apprehendere impossibilia aut irrationabilia et cum male iudicat de illis, sive fiunt tempore somni sive in tempore vigiliarum, et cum hoc habet fantasmata diversa et terribilia aut quia videtur sibi in somnis quod videat demones aut monachos nigros aut suspensos aut mortuos et omnia talia consilimia, et modo ridet, modo flet, et timet de non timendis et ridet de non ridendis" (*Lilium medicine*, II, 19, fols. 68vb–69ra). Melancholy and mania often appear as alternating phases during the illness or, like here, the latter is considered an advanced stage of the former (cf. Aretaeus, 3, 5, 3, pp. 38–39); Jackson, *Melancholia and Depression*, pp. 233–254 of the Spanish translation (Madrid, 1989), and Laharie, *La folie au Moyen Âge*, p. 134.

³² Cf. "Timor de re non timenda, cogitatio de re non cogitanda. [...]. Vident enim ante oculos formas terribiles et timorosas nigras et similia. [...] Videbat nigros homines"

In another passage of the *Lilium*, Bernard also attributes melancholy to some professors and prophets:

Some consider themselves masters in all the sensible world and they begin to give lessons and teach, albeit not explaining anything rational, whereas others believe that they are prophets and that they are inspired by the Holy Spirit and begin to predict many future events regarding the world or the Antichrist.³³

According to Michael McVaugh, the blame for both should be attributed to Arnau, his fellow at the Faculty of Montpellier, the first due to his interest in natural philosophy and the second, to his religious concerns.³⁴ It is well known that Arnau devoted the last twenty years of his life to announcing the coming of the Antichrist and asking for Christianity to reform and fight against it. In this latter imputation, another aspect should be considered: prophesying has been seen as a possible effect of melancholic disease since Antiquity.³⁵ Therefore, the diagnosis of melancholy was used by some late medieval authors in order to discredit opposing, and often unorthodox, opinions: Arnau blames necromancers in *De reprobacione*, and in turn is disgraced by Bernard on the same basis. In my opinion, this can be interpreted as a medicalization of the practice of relegating to marginality behaviors and opinions that deviated from the mainstream ideology and assimilating them into madness.³⁶

(Constantine, *De melancholia*, p. 120), “appropinquare videntur morti. [...] alii plorant, alii rident” (*ibidem*, p. 124).

33 “Aliis videtur quod sint magistri in omni sensibili et incipiunt legere et docere et tamen nihil dicunt rationabile; aliis videtur quod sint prophete et quod sint inspirati a spiritu sancto et incipiunt prophetare et multa futura predicere sive de statu mundi et Antichristi” (*Lilium medicine*, II, 19, fol. 69ra).

34 Michael McVaugh, “Nota sobre las relaciones entre dos maestros de Montpellier: Arnau de Vilanova y Bernardo Gordon”, *Asclepio*, 25 (1973), 331–336.

35 “Some of them [*i.e.* melancholics] may become passionately fond of dreams and forecasting future events, and they predict them accurately”, Rufus, *On Melancholy*, F35, 2, p. 46; “Et contingit quod quidam istorum narrant et somniant praeter solitum, et prognosticant futura, et eveniunt ea quae ipsi praedicunt”, Rufus, *Oeuvres*, Fr. 126, p. 456. Regarding the connection between melancholy and prophecy in late medieval authors see Sebastià Giralt, “Aristoteles imperfectus. Natural Divination, Dream and Prophecy in the Latin Middle Ages (1210–1310)”, in *Die mantischen Künste und die Epistemologie prognostischer Wissenschaften im Mittelalter*, ed. Alexander Fidora (Köln—Weimar—Vienna, 2013), pp. 23–59.

36 On the social situation of the mentally ill in Middle Ages see Laharie, *La folie au Moyen Âge*, pp. 271–272, 232 and 241–270; Borràs, *Més enllà de la raó*, pp. 77–90.

Many years later, in his religious controversies with scholastic theologians, Arnau also imputed ideas he considered wrong to mental disorders. In his attack on Martín de Ateca (1304), he states that his adversary's unfair arguments could only be excused by insanity (*vesania* or lethargy), although he is somehow responsible due to having an unhealthy lifestyle.³⁷ In the debate with the Dominicans of Girona (1302 or 1303), he describes those who misunderstand him or the Holy Scriptures as insane or heretic.³⁸ In my opinion, such attributions of mental illnesses are not merely metaphors, as Joseph Ziegler suggests,³⁹ but a possible explanation for the irrationality of the ideas held by his detractors according to the learned medical tradition.

These other examples help to understand Arnau's purposes for diagnosing necromancers with melancholy. To discredit the views of his dialectic opponents (both defenders of necromancy or opponents of his religious thought), Arnau cannot diagnose damage to the rational faculty if he does not show that this is the only visible symptom of their disease, because in his eyes they had no health problem other than a misguided belief.

Beyond its undeniable polemic value, the idea that holding opinions contrary to reason may be an indication of a lesion of the rational faculty is well-rooted in Greek-Arabic Galenism, as we have seen. In different contexts, with different purposes and concretions, Arnau's, William's and Bernard's statements are the result of ideas, born in ancient medicine and developed by medieval Galenism, regarding the harm caused by melancholy to cognitive faculties, both the imaginative and the rational, which would be the origin of the behavioral disorders observed in the mentally ill. In fact, considering someone's irrational thought to be an effect of a physical disease is an extreme consequence of the somatic vision held by Galenism of mental illness from Galen

³⁷ "Secundo quia constat illud in editionibus meis [...], si vidit et perlegit eas manifeste mentitur. Cum neget illud quod in eis continetur, nisi per insaniam aut litargiam excusaretur, si vero non perlegit attente, certum est quod inique arguit et non iuste", *Antidotum contra venenum effusum per fratrem Martinum de Atheca, predicatorem*, MS Vatican, BAV, Vat. Lat. 3824, fols. 237c–254c (fol. 244ra).

³⁸ "...heretici vel insani...", Arnau de Vilanova, *Eulogium de notitia verorum et pseudoapostolorum*, edited in Joaquim Carreras i Artau, "La polémica gerundense sobre el Anticristo entre Arnau de Vilanova y los dominicos", *Anales del Instituto de Estudios Gerundenses* 5 (1950), 5–58 (esp. 33, 55 and 56).

³⁹ Ziegler, *Medicine and Religion*, pp. 91–97. Cf. Robert I. Moore, "Heresy as Disease", in *The Concept of Heresy in the Middle Ages (11th-13th C.). Proceedings of the International Conference, Louvain, May 13–16, 1973*, ed. W. Lourdaux and D. Verhelst (Leuven, 1976), pp. 1–11.

himself.⁴⁰ In *De reprobacione*, this use appears for the first time in Arnau's work and might be favored by melancholy's relationship with magic and the devil observed in preceding authors, such as William of Auvergne. But the closest seems to be Thomas Aquinas, when he imputes a "bad disposition of intellect" to necromancers, in addition to their poor moral disposition, because of the irrationality of their beliefs and practices.⁴¹

It is also revealing that Arnau considers the rational faculty (*estimatio*) to be injured, but not the imaginative, when according to medical tradition both of them could be affected by melancholy. This is the basic difference between his view and the imputation of melancholy often applied to witches, especially during the fifteenth and seventeenth centuries, by some physicians and writers, such as Johann Weyer or Reginald Scott, who tried to extenuate their guilt. In that case, witches' delusions were often attributed to an injury to the imagination produced by melancholy. Therefore, acts of witchcraft should not be considered real but hallucinations induced by the disease.⁴² In contrast, when

⁴⁰ Cf. "Unde periti medici concordati sunt quia humores et corporis compositio et natura mutant actionem anime quod monstravi una particula quia virtus anime complexionem corporis imitatur", Galen, *De interioribus*, 3, 7, in *Opera*, 2, fol. 132rb (=Kühn, 8, 191), with a reference to his treatise *Quod animi mores corporis temperamenta sequantur*, ed. Luis García-Ballester, *Alma y enfermedad en la obra de Galeno* (Valencia—Granada, 1972).

⁴¹ "Magi autem invocant eos quorum auxilio utuntur suppliciter, quasi superiores: cum autem advenerint, imperant eis quasi inferioribus. Nullo igitur modo videntur bene dispositi secundum intellectum", Thomas Aquinas, *Summa contra gentiles*, 3, 106, 9.

⁴² On the relationship established between melancholy and witchcraft and the devil in Medieval and especially Early Modern Times, see Jole Agrimi—Chiara Crisciani, "Savoir médical et anthropologie religieuse. Les représentations et les fonctions de la *vetula* (XIII^e–XIV^e siècle)", *Annales. Économies, sociétés, civilisations* 48/5 (1993), 1281–1308; Danielle Jacquot, "De la science à la magie: le cas d'Antonio Guainerio, médecin italien du XV^e siècle", *Littérature, médecine et société*, 9 (1988), 137–156; Roger Bartra, *Cultura y melancolía. Las enfermedades del alma en la España del siglo de oro* (Barcelona, 2001), pp. 49–63; Christopher Baxter, "Jean Bodin's *De la démonomanie des sorciers*: the Logic of Persecution", in *The Damned Art. Essays in the Literature of Witchcraft*, ed. Sidney Anglo (London—Boston, 1977), pp. 76–105; Stuart Clark, *Thinking with Demons. The Idea of Witchcraft in Early Modern Europe* (Oxford, 1997), pp. 179–213; H. C. Erik Midelfort, "Sin, Melancholy, Obsession: Insanity and Culture in Sixteenth-century Germany", in *Understanding Popular Culture. Europe from the Middle Ages to the Nineteenth Century*, ed. S. L. Kaplan (Berlin, 1984), pp. 113–145; Jack L. Evans, "Witchcraft, Demonology and Renaissance Psychiatry", *Medical Journal of Australia* 53/23 (1966); Oskar Diethelm, "The Medical Teaching of Demonology in the 17th and 18th Centuries", *Journal of the History of the Behavioral Sciences* 6/1 (1970), 3–15; Thomas J. Schoeneman, "The Role of mental Illness in the European Witch Hunts of the Sixteenth and Seventeenth Centuries: an Assessment",

Arnau says that it is the rational faculty that is injured, he is silent about the possibility of necromancy having real effects, but merely denies the interpretation given by its practitioners. The purpose of the epilogue is to discredit necromancers' beliefs, not the attenuation of their moral responsibility, even though Arnau actually diverts their wrong opinions from moral corruption to the physiological.⁴³ We must bear in mind that earlier in the same epistle he accused necromancers of being "the worst sinners" (ll. 179–180).

Journal of the History of the Behavioral Sciences 13/4 (1977), 337–351; Jean Céard, "Folie et démonologie", in *Folie et déraison à la Renaissance. Colloque international tenu en novembre 1973* (Brussels, 1976), pp. 129–147, Sidney Anglo, "Melancholia and Witchcraft: the Debate between Wier, Bodin and Scot", ibidem, pp. 209–228; George Mora, "Introduction", *Witches, Devils, and Doctors in the Renaissance: Johann Weyer, De Praestigiis Daemonum* (Binghamton—New York, 1991) esp. pp. lxi–lxxix.

43 See the passage cited and translated above.