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Title: Bodies, Causes, and Diseases: Toward a History of Premodern Medical Theory and Practice Beyond the Humors

Abstract:

This talk presents some preliminary findings and possible solutions to an ongoing problem in the main narratives of the history of "Western" theories and practices of elite medical anatomy, diagnosis, and pathology. Older narratives first depicted pre-modern medical theory in a way such that bodily humors and their changes constituted diseases and the solid parts of bodies were relatively unimportant or even ignored in physicians' thinking and practice. Humors mattered rather than organs and solid parts. These narratives usually emphasized a sea change in medical theory, perception, practice, and education in the decades around 1800 in Paris hospitals and schools. There, close physical examination of living patients and frequent pathological post-mortems supposedly brought clinical symptoms and the hidden states of diseases into close correlation for the first time. This narrative has long been in tension with the dramatic rise in the status, breadth, and sophistication of anatomy in early modern Europe. Recent work by a number of historians has successfully challenged this narrative even further, pointing to much earlier practices and even traditions of clinical examination and post-mortem dissection, notably in early modern Padua and Rome in the sixteenth and seventeenth centuries, as well as the Netherlands and England in the later seventeenth and eighteenth centuries. This talk attempts to give a sense of the state of the field, and points to a new framing with new evidence. Specifically, I will suggest that premodern academic medicine, notably influenced by Galen's works, consistently defined diseases in terms of the impaired functions of anatomical parts of bodies, with morbid changes to humors as a very common proximate cause of these impairments. A generic "imbalance" of humors did not constitute disease, then, but changes to the humors often changed organs in ways that impaired their anatomical functions, thus constituting disease states.