

◆ CHAPTER FIVE

Giving Birth to Science: Oliva Sabuco and Her Intrusions into the Male Episteme

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Introduction

With the growing control and institutionalization of medical practice in the Renaissance, the professional space shrank. Based on academic qualifications, a divide was created between university-trained physicians, guildsmen, and “empirics.”¹ Women, who had enjoyed a relative professional freedom in the Middle Ages (not only in their roles as nurses, midwives, and apprentices, but also as healers), were pushed into the margins of medical practice, along with unqualified men. In this cultural climate, a highly sophisticated collection of medical and philosophical treatises, entitled *New Philosophy of Human Nature*, appeared in 1587 under the authorial name of a twenty-five-year-old woman, Oliva Sabuco. This encyclopedic work is a collection of five Romance colloquies and two briefer opuscles in Latin and mixes medical knowledge, natural philosophy, and legislative materials with an *arbitrista* flavor. In the colloquies, three shepherds (Antonio, Veronio, and Rodonio) sit in a classical *locus amoenus* and engage in a conversation on different topics concerning the health of man and the “Republic” in its Platonic sense. From the observation and description of the human body and its physiological behavior, the author moves to the “composure of the world,” thus signaling a movement from the microcosmos to the macrocosmos: the first colloquy, on “Knowledge of One’s Self,” is followed by a “Composition of the World as It Is,” another brief exposition on “Treatments and Remedies of Proper Medicine,” a colloquy on the “The True Medicine,”

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and, finally, two opuscles in Latin entitled “Brief Exposition on Human Nature” and “Proper Philosophy of the Nature of Composite Things.”²

Ironically enough, the authorship of this collection of treatises has been in dispute since 1903, when Oliva’s father’s will was found. In this document, Miguel Sabuco states that he published his work under his daughter’s name in order to bring her “fame.” From this point on, scholars of the history of science sometimes attributed the work to Miguel Sabuco,³ however, recent editions have once again defended Oliva’s authorship.⁴ In a Baroque twist, this authorial dispute summarizes the resistance of the canon to female intrusions in areas of knowledge that have been culturally reserved for men. Leaving aside the anecdote of authorial attribution, it is important to remember that *New Philosophy* was published for the first time in 1587 under Oliva Sabuco’s name, and it was read in its time as the original product of a woman writer. The discussion regarding who wrote the work should not overshadow the rhetorical success of this creation by a defiant female voice within a book dominated by male voices (those of the characters and medical authorities) that deals with a discipline historically controlled by male scholars.⁵

Exclusion is an essential notion in understanding Sabuco’s project. In her work, exclusion and marginalization are the stance that allows creativity to explode: it is not only from the margins of patriarchy that she is writing, but also from the margins of literary tradition and medical practice. Oliva depicts herself as doubly excluded from the discipline: both as a woman and as an “empiric.”

This essay examines this act of writing, which challenges and intrudes into an intellectual space closed to women (that of writing) and the ways in which this feminist project is articulated in a work dominated entirely by the voices of its male characters or those of the medical authorities it cites. As I will explain later, José Pascual Buxó and Mary Ellen Waithe have already pointed out some of the strategies used to make the feminine more visible in *New Philosophy*. My approach, however, pays closer attention to the problematization of the figure of the author and the notion of authority in Oliva Sabuco’s work. Her exclusion as a female from both the institutionalized medical profession and from the practice of writing, I argue, allows her to challenge a fossilized epistemological system anchored in old voices from the past, by offering a new way of explaining the human body and its ailments. Moreover, *New Philosophy* becomes a space for Sabuco to challenge patriarchal authority, understanding the term both as the right to control and as an accepted source of information.

Female Space in Medicine

As Monica Green argues, the progressive marginalization of women in pre-modern medical practice cannot always be explained through the clichéd argument of “the sexual division of labor”: both men and women were responsible for male and female care, and even the field of obstetrics, generally understood as a female concern, was not always women’s business (451–52). Green cites literary evidence of male doctors’ interest in this specialization, including Scipione Merurio, Taddeo Alderotti, and Anthonius Guainerius (457–60). She concludes that premodern medical practice is a “tapestry” of tensions

not only between male and female, but also between Christian and Jew (and in Spain, Muslim as well), between those in positions of political power (the physicians and, to a lesser extent, guild members) and those relatively lacking in power (empirics and “old women”). To these must also be added the often conflicting needs and goals of municipal, royal, and ecclesiastical authorities. (452)

There are, therefore, different ideological and political variables at play in the redefinition of medical spaces during the late Middle Ages and the Renaissance.

In fact, in the Middle Ages, women had practiced “monastic,” “domestic,” and “empiric” medicine with relative freedom.⁶ They were usually responsible for the care of the sick in their households or hired as nurses for other households, and they also worked in religious hospitals at convents, and as healers, surgeons, and midwives. However, in the twelfth and thirteenth centuries, the sanitary system began to be regulated by the state and institutionalized through universities. As Michael Solomon points out, in 1239, the Valencia court enacted a statute that proscribed women from practicing medicine “under penalty of being whipped through the town,” while requiring all medical practitioners to possess a university degree and to demonstrate their medical competency by way of an annual examination, although the small number of university-trained physicians and the limited reach of judicial control allowed for many exceptions to the law. In addition, “the high cost of licensed practitioners assured an ongoing demand for women and other subaltern practitioners even in times when their activities were challenged by new legal constraints” (79–80). Further strategies of control were progressively implemented: in the fourteenth century, the practice of medicine by unlicensed practitioners was prohibited and, in 1477, the Royal Court of the

Protomedicate was created in Spain. Its double mission was to grant and examine licenses for physicians, surgeons, apothecaries, spice sellers, herbalists, and midwives, and to persecute intrusions into medical practice by unqualified practitioners. As Bertha M. Gutiérrez Rodilla points out, this process (directed by men) progressively pushed women to the margins of a regulated discipline (128). Women, who until then had been able to assist in childbirth, testify as experts in courts, administer medication, and attend to the different needs related to male and female health, saw their ability to practice become significantly marginalized as they were excluded from university, along with men who had no university qualifications (the ample spectrum of Medieval “surgery,” obstetrics, and empiric healing) (129).

Excluded from universities, where dissection, anatomy, and technological innovations (such as forceps) were being introduced, women were progressively perceived as “having less scientific and technological expertise” (105), according to Meg Lota Brown and Kari Boyd McBride. As these historians explain: “Gradually, women’s lack of access to developments in the study of anatomy, combined with time-honored views about the intellectual and moral inferiority of females, contributed to their disenfranchisement in the profession” (105). Sharon Strocchia also points to the inflation of institutionalized theoretical knowledge, based on the authority of Greek philosophy and medicine, as well as to the written tradition itself: “Crucial to the marginalization of women as healers was the denigration of their empirical knowledge and know-how by university-trained physicians and guildsmen eager to establish superior professional competencies,” by debasing “the kind of practical knowledge women healers possessed, since it was not grounded in text-based, academic medical theory” (496–97). Thus, she concludes, “female practitioners were pushed to the margins by medical professionalization and their expertise devalued within a more highly differentiated marketplace” (497). University training, then, created a divide in professional prestige between physicians, on one hand, and barber-surgeons, apothecaries, and empirics on the other, with the former holding the highest positions of authority and prestige. Since women were denied access to universities and usually trained by family members, their knowledge was “primarily experiential in nature, based on seeing and doing,” although their knowledge could also be “deeply informed by reading practices and medical theory” (503), with the rapid translation and dissemination of knowledge in more accessible formats, such as short treatises in romance languages. This might be the case for Oliva Sabuco: her father, Miguel, was an apothecary,⁷ and she may have also been a disciple of Simón Abril (professor of grammar, rhetoric, Latin and Greek, and translator of Aristotle). The marginalization of women practitioners, therefore, was intimately related to their lack of access to the university. In this regard, male

practitioners with no institutional training (barber-surgeons and male empirics) were also marginalized.

Alternatively, Gianna Pomata highlights women's exclusion from the guilds (going back to the Middle Ages) as another definite factor in their marginalization. Whereas barber-surgeons and apothecaries were able to organize in guilds, women were not allowed to join guilds or to lead businesses in the Middle Ages. In Bologna (which served as a model for the control of medical practice in Spain), guild statutes for the inheritance of barber-surgeon licenses stated that, at the death of the barber-surgeon, only sons and grandsons of masters could inherit the right to keep their stores open. In 1560, an amendment was added that allowed female heirs to keep their establishments open, but only if they were directed by a male master. Moreover, lists of masters and apprentices published by the Protomedicate in Bologna in the sixteenth and seventeenth centuries included no women at all, although we can assume that some women clandestinely practiced as barber-surgeons (119–20). Alejandra Pyñeyría seems to confirm that this situation also developed in Spain, affirming that there is evidence that women worked with their husbands (but not very often as widows) in occupations related to medicine, although she does not mention specific guild laws: “las viudas de barberos . . . suelen contratar a hombres para que prosigan con el ejercicio del oficio de sus maridos muertos” (146) (widows of barber-surgeons . . . used to hire men so that they could continue their deceased husbands' practices). Later, Pyñeyría states: “En apariencia el ejercicio sería individual, no se tienen noticias de agrupaciones femeninas similares a cofradías o gremios” (164) (It seems that it was an individual practice, there is no evidence regarding feminine associations or guilds). As Pomata explains, women were excluded from the “tripartite hierarchy” formed by university-trained physicians and the two most salient guilds (those of barber-surgeons and apothecaries), which led them to practice medicine on the margins of the health system as midwives, sellers of remedies, and unlicensed healers (120). Even so, Pomata notes that women seemed to be a relatively marginal group, even within the unlicensed practice of medicine (120). The increasing push for the institutionalization of medicine, as Solomon explains, follows a deliberate attempt to monopolize a highly profitable practice through the “production of an imaginary otherness that was thought to oppose malevolently the objectives and ideology of legitimate medicine.” This rhetoric of legitimation would thus cast “a shadow on the activities of subalterns” (81), understanding “subalterns” as the satellite practitioners who lay out of the confines of the schooled elite of physicians.

Despite these efforts to disqualify women from medical practice, obstetrics remained primarily a female professional space. Brown and McBride note that the delivery of babies, including attending labor and providing postpartum

care, was “almost exclusively the purview of female midwives in Europe until the middle of the seventeenth century” (102). Montserrat Cabré and Teresa Ortiz refer to it as a “traditionally feminine activity” (16), and Francisco Suastre, in his introduction to Damián Carbón’s *Libro del arte de las comadres o madrinas* (published in 1541), notes that men were completely excluded from the moment of child birth due to a sense of inappropriateness, with one result being that a physician in Hamburg in 1522 had to disguise himself as a woman in order to observe the delivery of a child (14). Carbón himself remarks in his treatise that it was necessary to leave this responsibility to women due to reasons of “honesty” (31): that is, the need to preserve women’s honor and modesty from the threat of male gaze. In fact, Green proposes that these claims of honesty were a conscious attempt by women to actively pursue a division of medical labor in order to guarantee a space for themselves: “Their desire may have been to make women’s health women’s business because it was in women’s interest that there be a sexual division of medical labor that would ensure them a field of practice where men could never claim competence or offer competition” (199). In this sense, safeguarding the honesty of female patients became an argument for resisting the monopolization of all medical fields by licensed, university-trained male practitioners.

Oliva’s Perversions: Breaking the Walls of Patriarchy

It is not surprising then, that Sabuco opens her letter of dedication to the king by referring precisely to childbirth, along with women’s vulnerability and weakness. With this move she both adheres to and challenges constructed conceptions of femininity. She both reappropriates and subverts literary themes commonly employed by male authors. As Dámaris Otero-Torres explains, this letter is “a feminine space of articulation” where Oliva, cloaked in an apparent humility, disarms the cultural logic responsible for the social marginalization of women (12–13).

Sabuco starts by establishing an analogy between herself and a captive from Getulia who, escaping from her captors, entered a mountain teeming with lions, and the animals spared her life after listening to her humble words. As this captive, she is “kneeling” and seeking the King’s protection and magnanimity, thus she is praising the king as the “great lion and lord of men” (*New Philosophy* 44). Immediately after this, she presents her work as a newborn “child” handed over to the King: “I ask protection and shelter under the aquiline wings of Your Majesty, under which [wings] take this, my son which I have begotten” (44). In this *captatio benevolentiae* (winning of goodwill), Sabuco is ventriloquizing the literary tropes of male authors, but with that she is

actually legitimizing her intrusion into a male intellectual space by appealing to the expectations of her gender: giving birth and recognizing her subordinate position to the male ruler. Moreover, Sabuco provocatively reterritorializes literary production as a womanly practice by alluding to the moment of childbirth, a medical procedure generally overseen by female practitioners, and usually denied to males.⁸ Empowered by this association, she boldly states:

And may your Majesty receive this pledge from a woman, for I think it is of higher quality than any others by men, by vassals, or by lords who had vowed to serve Your Majesty. And even if your Caesarean and Catholic Majesty has had many books dedicated to Him from men, only few and rare were from women, and none about this subject matter. This book is as unique and new as its author. (44)

Note the double meaning of “Caesarean,” not only as praise to the King’s hegemony in Europe but also as a subtle reference to the obstetrical procedure of the “caesarean section” (back then known as “cesarean operation”), commonly supposed to be named after Julius Caesar, who was believed to have been born through this surgery.⁹ This particular defense of the uniqueness of her work and her authorship is built on the opposition between women vassals/writers and men vassals/writers as representative of the two medical practices to which she alludes: childbirth (generally overseen by midwives) and the “cesarean operation” (generally practiced by male surgeons).

Citing Allison Weber’s ideas on the female rhetorical strategies of *captatio benevolentiae*, Otero-Torres describes Sabuco’s artifice of humility in the dedication letter as an effective mechanism that presents a “panoramic social view” of the imbalance of power between the two genders she is denouncing, while at the same time counterbalancing her own challenges to this ideological system by claiming the protection of the strongest (men, the King) over the weakest (women) (15). In doing this, Otero-Torres affirms, Sabuco shows a sophisticated understanding of the operativity of gender constructions that silence women and takes advantage of them by obliging the addressee of her letter (a male) to protect his “humble female vassal” who “dares to speak” (16): that is, to permit her to actually speak, thus demonstrating the virtues (such as magnanimity) that characterize males and which women are supposed to lack.

From this strategic gender opposition, Sabuco moves forward to an antithesis between literacy and illiteracy in order to attack the edifice of tradition and authority. This unruly female author points out that she never had

access to formal education, while also arrogantly claiming that traditional and institutionalized medicine is erroneous because Galen, Hippocrates, Plato, Aristotle, and Pliny (the highest authorities in natural philosophy and medicine) never got to properly understand human nature.¹⁰ Following Pomata, in the context of Humanist medicine, other authors (such as Luis Collado, Juan Valverde de Amusco, López de Villalobos, Andrés Laguna, Juan Huarte de San Juan, Luis Mercado, Francisco Valles, and Antonio Gómez Pereira) had already criticized Scholastic Galenism, but what sets Sabuco apart is her radical rejection of the basic principles of Galenism and Hippocratism. While the above-mentioned authors advocated for a “more authentic Galenic doctrine, based on the philological reading and restoration of the ancient Greek texts” (33), Sabuco was demanding a complete re-writing of the discipline, a task to which she actually sets her efforts in her book:

Galen, Plato, and Hippocrates were in need of this entire book for their treatises about human nature, and so was Aristotle in his treatises about the soul and about life and death. It was also wanting in the naturalists such as Pliny, Aelian, and others who dealt with mankind. . . . Not that I remembered any medicine, for in fact I never studied it. But . . . it is as clear and evident as sunlight that the old medicine as it is perused and studied, dealing only with its principal foundations, was mistaken because ancient philosophers and physicians neither understood nor comprehended its peculiar character [from] whence medicine had its origin and foundation. (44–45)

Sabuco’s voice comes, then, from a marginal space. She is not only a woman but an “unschooled” one who frees herself from the limitations imposed on scientific creativity by the written tradition. Renouncing the “authority” of ancient philosophers, she affirms her renewal of the discipline by filling a void, instead of repeating, even in an extenuated way, what ancient philosophers have said, hence the title of her work: *New Philosophy of the Human Nature*. University training is associated with the repetition of outmoded, mistaken knowledge, with male writing, while Sabuco aligns herself with renovation and the orally transmitted knowledge that Strocchia defines as “the kind of practical knowledge women healers possessed, since it was not grounded in text-based, academic medical theory” (496–97). Not coincidentally, Sabuco presents her *New Philosophy* as a colloquy, not an exposition, in which a master converses with his neophytes, thus depicting the intellectual exchange

proper to apprenticeship, rather than that of the university (of course, this project is not completely disconnected from the written tradition, nor is it devoid of contradictions, as I will discuss later).

In this respect, Otero-Torres observes that Sabuco populates the letter of dedication with images of animals. In fact, there are references to lions, eagles (“the aquiline wings of Your Majesty”), sheep (“as any good shepherd rules and better governs his flock”), donkeys (“as the veterinarian cures the donkey”), and crows (“as funny as the crow draped in the feathers of prettier birds”) (44–45). Otero-Torres sees in this profusion of references to animals an attempt to appeal to the simplicity of experiential knowledge, since the animal kingdom is not contaminated by the intellectual entrapments that numb the sensibility of scholars (17). In this vindication of the excellent attributes of the animal, of the creature that is placed in a lower position with respect to man in the chain of beings, Sabuco is also advocating for women, who are also placed in a lower position with respect to man. Natural common sense, experience, and empirical investigation are thus dignified over and above the accumulation of knowledge solidified by institutions that are led by and founded on the knowledge produced by men.

Oliva’s Ventriloquizing of Men

This leads to the question of why Sabuco would still be conservative enough to let a male master embody the voice of practical empiric knowledge (Antonio), instead of depicting a wise woman, or, put differently: why does she project herself onto a male subject in the colloquies? Otero-Torres unconvincingly suggests that Sabuco employs the masculine as an objective universal register, devoid of gender markers (20). I argue that employing a male character to voice Sabuco’s ideas, is a legitimizing strategy. In voicing her theories through a male alter ego, she makes a statement about the quality and sophistication of these theories in relation to those produced by men. Sabuco asserts that her intellectual stature is equal to that of her male peers. The wise shepherd, whom she ventriloquizes, acts as a leveling tool that helps to establish a claim for respect from her audience.

However, as Otero-Torres notes, the participants in the colloquies are shepherds, that is, they are men who are excluded from the academic economy and lead a simple life, safe from the “intellectual entrapments” of university elites, just like Sabuco herself (22). At the very end of the first colloquy, “Knowledge of One Self,” Antonio says to Veronio: “if you go to the city, tell the physicians that their medicine is fundamentally mistaken, for that is a good deed” (122). According to Romero Pérez, the final lines of this colloquy

pose a distinction between medical knowledge written in Latin (associated with the city, governed by an “emerging [male] medical class”) and popular medical knowledge transmitted orally through proverbs (associated with small villages, spaces where female healers would escape the supervision of the Protomedicate) (257–58). The countryside and the small village, therefore, are those marginal spaces where control of the state and of intellectual authorities is diluted and allows for the emergence of alternative discourses. Similarly, at one point in the middle of the discussion with the Doctor in the colloquy of “The True Medicine,” Antonio tries to end the dispute by saying: “Go with God, Mr. Doctor, back to your city and to your business; leave me to my solitude with these lambs and these birds in the trees, which don’t know how to lie” (165). Here again, Antonio claims this idyllic creative space for himself, where common sense can overcome the obscurities of inflated authority. Women were excluded from the economy of writing, but not from oral traditions that were associated with truth and the absence of artifice.

The Doctor, who has no distinctive identity or name and acts as a representative of the urban scholarly class of literate physicians, is obviously portrayed as a clumsy contender in this intellectual battle. The end of “The True Medicine” colloquy epitomizes this blind epistemological predicament, which anchors medicine to repetition:

Doctor: [N]ot even the whole world would suffice to persuade me to stop following my teachers and their authority.

Antonio: By God, yes; I think that even if I were to tell you that tomorrow the sun will rise, you would not believe it. Therefore, go with God, and leave me alone.

Doctor: First put together for me some brief sayings that I may carry in my memory.

(*The True Medicine* 229–30)

After Antonio extensively explains his “new” theory in twenty-four sections, the Doctor still insists on having it rephrased once again in the form of “brief sayings.” As Pomata brilliantly explains: “The joke on the Doctor is obvious: learned physicians don’t understand plain language, common sense, and sound logic; they get the idea only when spoken to in Latin and in the form (the aphorism) that they learned to memorize at school” (*The True Medicine* 35). The Doctor is associated with Latin and memorization, and both imply circularity, a return to an origin (Greek and Latin sources) that is constantly revisited but never renewed.

Numbed by this senseless repetition, the Doctor requests this new knowledge to be translated into Latin in the form of short sayings, and Latin has already been associated with falsehood. At the beginning of the “The True Medicine,” when the Doctor cites authorities in Latin, Antonio immediately interrupts to say: “Let’s leave aside Latin and Greek, and speak our language. Too many evils in the world are due to the sciences (and especially the laws) being in Latin” (Pomata 99). Paradoxically enough, Antonio concedes the Doctor’s request formulated at the end of “The True Medicine,” as the two following colloquies are written in Latin.¹⁰ However, both end with a similar plea to truth, as can be seen in the closing lines by the Doctor, as well as on the colophon page of “Brief Exposition”:¹¹

Doctor: I do not see this truth.

Antonio: Experience and time will deliver it right to your hands, and you shall see it with your own eyes.

Doctor: May the highest truth keep us from the eternal, and singular error, and may it guide us on the right and true road toward the highest good. Amen.

Believe me, you Pisons!

Believe that I have

Recited for you the leaves of the Sybil.

In times of a wise King,

Truth, not Mendacity, will prevail.

(Sabuco, *New Philosophy* 266)¹²

The Doctor is still reluctant to believe what Antonio has explained to him in two colloquies at this point, although this time he aligns himself with the search for truth. He remains almost completely silent in the last colloquy, “Proper Philosophy,” only appearing at the beginning of the opuscle in order to initiate the discussion. It is Antonio who closes this last piece and, similarly, the colophon page of *New Philosophy* reads: “Sincere reader, allow the amicable truth to overcome every obstacle” (305). Paradoxically enough again, *New Philosophy* mockingly emulates the sort of knowledge that it criticizes by dwelling constantly in repetition. It uses the same rhetorical strategies and perverts them, just as Sabuco did with gender constructions in the letter of dedication. Using the same rhetorical strategies and stemming from the same humoral system, Sabuco is still able to construct a clear opposition between two different epistemologies through these two opposing characters: the Doctor and Antonio.

Sabuco's *New Philosophy* highlights the antithesis between literacy and illiteracy, or the contrast between bookish, written knowledge perpetuated by institutions and associated with deception and orally transmitted practical knowledge, based on observation, which is associated with truth. The Doctor represents the first epistemological stance, while Antonio (Sabuco's alter ego), represents the second: the voice of those excluded from the scholastic circles (surgeons, empirics, and midwives).

This wise man who voices Sabuco's "new" philosophy is also a "new" man, who openly displays an inclusive attitude, especially toward women. Pomata explains the subversive drive of Sabuco's modifications to the classical theories explained in her work by Antonio, in order to avoid prioritizing the male element (traditionally considered to be positive) over the feminine (considered to be negative) in the pairs that sustain humoral and philosophical binarisms and which are charged with a profound gender symbolism, such as warm/cold, humid/dry, and Sun/Moon (53–64). As Pomata writes: "The categories defining the male and the female were unchanged, but their hierarchical order was turned upside down. Sabuco's *Nueva filosofía* reversed the hierarchy of the sexes that was at the core of the Renaissance model of the body. We can now better understand why the author of this book, whoever she or he was, decided to publish it under a woman's name" (*The True Medicine* 63–64). These theoretical alterations indicate a will to legitimize the feminine, rescuing it from that ideological depression by which woman had been represented as the imperfect draft of man.

In contrast, Buxó identifies the rhetorical strategies that, according to him, would confirm the feminine mark on *New Philosophy* (108–09).¹³ His study focuses on the first colloquy, on the knowledge of oneself, which Buxó considers "notably better conceived and illustrated than the other parts" and in which these rhetorical traits of femininity are more visible (108; my translation). Among these traits, Buxó first highlights the profusion of female exemplars. In chapter 9, discussing the effects of love and desire, Antonio mentions Deianira, Alcestis, Evadne, Portia, Julia, and Ludovica (Sabuco, *New Philosophy* 56). Chapter 20, on jealousy, features the cases of Procris (wife of Cephalus) and Aemilio's wife (63–64). Secondly, Buxó points out the frequent inclusion of the word "mujer" (woman) or the explicit mention of the feminine, instead of the general category of "man" or the use of the grammatical masculine gender to implicitly refer to the general category of "mankind," as in, for example, chapter 3: "I tell you, Rodonio, that eighty out of a hundred men or women who die, die from angry grief" (51). Additionally, we see the following passage in chapter 5: "this way men and women, with only knowing and recognizing this beast . . . will be able to dodge this threat" (Octavio Cuartero Cifuentes 16; my translation).¹⁴ Regarding jealousy in chapter 20,

Antonio claims that “It causes deaths, diseases, and madness in both men and women” (63). The third rhetorical strategy Buxó identifies is the offering of advice addressed specifically to women, as in chapter 7, where we read: “I warn women: the discontent brought about by their ill-deemed marriage will cause their death” (55); or in chapter 8, with its discussion of the effect of fear: “This emotion has a greater effect on women, especially pregnant women, who suffer miscarriages and pass away fearing and dreading minor, unfounded things” (55). These strategies of making the feminine more visible indicate an attention to the details of gender that was rare in the medical discourse of her age.

Moreover, in chapter 9, there is a curious case of identity transfer between Sabuco and the wise shepherd Antonio, in which the latter refers to himself as feminine: “If I lost this, which I love so much, would I be so meek and passive that I would also lose my life? Will I be like those other silly women who neither know nor learned about these threats to humankind?” (57). Florentino Torner, in his 1935 edition of *New Philosophy*, corrected this passage by changing the feminine to the masculine, possibly in order to give gender coherence to the text (Buxó 109). However, this apparent grammatical error shows a direct connection between the (real or feigned) author Oliva and the *magister* of the colloquy, who thus represents her alter ego. The fact that this alleged mistake was not corrected in any subsequent editions until 1935 could indicate that the connection between Oliva Sabuco and the character of Antonio was intentional and purposely maintained.

Oliva’s Perversions: Breaking the Walls of Male Authority

The identification of Oliva the author with Antonio in chapter 9 synthesizes the subversive game of substitutions at play in *New Philosophy*. The work is a dialogue between shepherds in which Antonio/Oliva’s voice progressively takes control over the discourse. In the first colloquy, “Knowledge of One-self,” the dialogical exchange becomes more volatile as the text unfolds (such as, in the section between chapters 24 and 55, there is no intervention from any other interlocutors), which symbolically enlarges the presence of the author’s alter ego, whose neophytes, Veronio and Rodonio, listen to without any interruptions. In addition, the speaker cites progressively fewer and fewer medical authorities. This dissolution of dialogism, not only between the characters, but also between the text and its tradition, can be interpreted as a strategical displacement of authority to Antonio, as the Derridean supplement that ends up taking over discourse.

This phenomenon is prolonged even further, indeed, nearly bleeding out of the book, if we consider the obscure attribution of authorship, which I have already mentioned: ironically enough, a bitter controversy over authorship surrounds a work that itself problematizes authority. The figure of the “author” is problematic in *New Philosophy*: not only do Miguel and Oliva seem to intertwine in the history of this piece, but also the author Oliva (this rhetorical construct) superimposes herself over an alter ego (Antonio), simultaneously usurping the place of classical authors.¹⁵

In the first chapters of “Knowledge of Oneself,” Antonio includes abundant historical and mythological narration in order to illustrate his arguments, citing sources such as Pliny and, to a lesser extent, Ovid, Theophrastus, Homer, and Democritus. Surprisingly enough, Hippocrates and Galen are scarcely represented in the pages of *New Philosophy* (except for the colloquy of “The True Medicine”), even though Sabuco’s proposal is, of course, subsidiary to a humoral doctrine that she does not intend to refute, but rather to improve by complementing it. Sabuco does not question the validity of the humoral system, instead focusing on the priority medical discourse gives to some *sex res non naturales* (sleep and wakefulness, exercise and rest, food and drink, air and environment) over others (passions of the soul or “affects”) that she considers crucial. At the bottom of this reevaluation of health we can clearly distinguish a distrust of blindly accepted knowledge and of the deification of classical authors. Hippocrates and Galen are cited at the beginning of the first colloquy only in order to highlight their information gaps, thus warning of the relativity of authorized knowledge: “Galen said there is no evident reason that shows why death comes. Hippocrates said, ‘I would praise any physician who seldom errs, because perfectly circumscribed certainty is not attained in Medicine’” (48). Even more remarkably, in another passage in which the shepherds are discussing happiness, the wise master Antonio supports his argument with a poem by Garcilaso de la Vega, to which Veronio responds: “You could quote Aristotle, Seneca, Plato, and Cicero, but you quote Garcilaso?” To this complaint Antonio replies: “The antiquity of the author is not important when things are well expressed” (98), thus showing the value that Sabuco grants to knowledge canonized in schools.

Moreover, Antonio’s first recommendation on law includes a reflection on the treatment of textual authority and the role of experience. Antonio cynically complains about the copiousness of knowledge, calling attention to the inopportuneness of a knowledge that is too dependent on manuscripts. In order to develop his thesis, the shepherd brings out a series of hyperbolic counter-examples related to the use of the written word vis à vis individual experience and judgment. In the first place, he asks if it wouldn’t be “necia prudencia” (a stupid thing) from a king if he would demand that his wise men write for his

progeny “about everything that they are supposed to do and say during their lifetime, for every hour, day, week, month, and year of their lives?” (146), so that his descendants would be led by that codified knowledge, concluding: “With good reason, the son and grandson would tell the King: Father, it is more difficult work to review so many books in order to know what I have to do at certain times and to examine what everyone says in order to choose the best than do nothing” or “I would rather do it with my own judgment” (146). Later in the text, and continuing with these counter-examples, Oliva’s alter ego, Antonio, further debates on the usefulness of the written and the excessive credibility that is given to the letter over one’s own experience:

Would it not be improvident for someone who has a nearby farm with living quarters worth looking at to waste lots of paper describing it in detail with words, right down to each leaf of the tree and its fruits? It is very difficult to understand and to imagine, only from description, how something really is. So wouldn’t it be better, sparing such effort, just to take people to look at it through their own eyes . . . ? (146)

In this series of counter-examples, the unnecessary magnitude of a knowledge transmitted and augmented by centuries of glossing is openly criticized.

According to Antonio, every descriptive task is a waste of time and effort, and he defends direct experience (“vista por ojos”) instead, which was also the argument humanist anatomists used to defend dissection. Of course, *New Philosophy* engages in a rhetorical paradox: these critics are inserted into a descriptive treatise that adds to the vast written tradition of medicine and law. However, it is important to note that these colloquies in particular, with a very practical content, are devoid of the authoritative apparatus typical of medical rhetoric. In fact, later in the text, one of the interlocutors, Rodonio, proposes to cut through this extensive legal knowledge in order to keep only the necessary laws: “how strangely the world would be improved if only the most essential laws would remain in Romance and all the rest would be left to the judgment of a virtuous and Christian man” (147). Thus, invoking epistemological sanity, Rodonio proposes to eliminate textual authority and encourage the discreet discernment of judges who are not blinded by the textual machinery but rather are led by their own experience and wisdom and guided by the pragmatism of a purged (and thus, useful) knowledge.

Conclusion

Under this guise, *New Philosophy* furthers a discussion of the value of the “author,” the renovation of knowledge, and the matter of questioning the vastly expanded and sacralized written sources. In the pages of *New Philosophy*, the very concept of “author” is disputed through the construction of an unconventional author (a woman philosopher) who emerges through the voice of the wise shepherd Antonio. At the same time, the beatified edifice of the written tradition, resting on the foundations of Hippocratic-Galenic authority, is challenged, questioned, and deconstructed. In this context, the disputed authorship of the work seems like a fortunate accident that magnifies the work’s rhetorical project.

Nevertheless, Sabuco’s collection of colloquies presents a vivid performance of the transgression of patriarchal “authority” since in *New Philosophy* knowledge(s) assumes nuances of gender. Claiming the margin as a creative space, those excluded from the intellectual circuits of power, the illiterate (surgeons, empirics, and midwives), defend the validity of practical knowledge based on experience, which is associated with orality and femininity. Paradoxically, the defense of this orally transmitted knowledge is made through an act of writing, and through an act of reappropriation of genres (the Socratic dialogue), sources (cited again in *New Philosophy*, even if mostly to be contested), theories (the humoral system), and rhetorical conventions (including *captatio benevolentiae*, male characters, and repetition).

Ultimately, Antonio’s concession to the Doctor in translating his “new” knowledge to Latin marks, rather than surrender a resignation to the codes of learned knowledge, a subversive infiltration of the very system that so forcibly builds intellectual walls.

NOTES

1. By “guildsmen,” I will refer to those professionals, satellites to the physicians, who would not have been trained at universities, but were organized and regulated by guilds (barber-surgeons, herbalists, and apothecaries). By contrast, the term “Empirics” was used to designate unschooled medical practitioners such as popular healers, who would learn their profession through apprenticeship and direct experience, and who were not organized in guilds.
2. The entire collection has been translated by Mary Ellen Waithe, Maria Colomer Vintó, and C. Angel Zorita. There is also a translation of “The True Medicine” by Gianna Pomata, who has expressed very lucid reservations about the translation made by

Waithe et al. I have used Pomata's edition for quotations from "The True Medicine," but unfortunately, I have had to use Waithe et al.'s edition for the rest because it is the only available translation in English. Note that in Waithe et al.'s edition, the colloquy of "The New Medicine" is titled "Proper Medicine Derived from Human Nature." I have used Pomata's title in this list, since I am using her text for that colloquy.

3. See Benjamín Marcos, José María López Piñero, Luis Granjel, and Fernando Rodríguez de la Torre.
4. See Manuel Serrano y Sanz, Sánchez Ruano, Julián Atilano Martínez Tomé, Waithe et al., and Pomata.
5. In the present study, I will refer to the "author Oliva" as a rhetorical construct rather than as an actual person: regardless of who the actual author was, this collection of treatises was conceived as Oliva Sabuco's artistic and intellectual artifact and, as such, it displays particular rhetorical marks intended to encourage and sustain the representation of its author as a woman. I follow Pomata here: "It is quite certain . . . that the book was presented to the public as the work of a woman, and *for this reason* as radically innovative" (*The True Medicine* 30).
6. "Monastic" refers to the medical and sanitary practices carried out in the context of religious hospitals and leprosariums; "domestic" refers to the context of particular households. "Empiric" medicine refers to the popular medical practice of unschooled surgeons and healers, who would learn their profession through apprenticeship and direct experience.
7. As Rosalía Romero Pérez explains, some historians have defended the idea that Miguel was a lawyer in Alcaraz, and others hold that he was an apothecary (20), which is how Pomata presents him as well (10).
8. Sabuco will use the metaphor of childbirth again when she describes the different parts of his work, saying: "From this colloquy *Knowledge of One's Self*, and human nature, the dialogue *Proper Medicine* was derived and born" (44–45).
9. This is probably only a legend, since his mother, Aurelia, is reputed to have lived to hear of her son's invasion of Britain. Moreover, the cesarean incision was only performed on dead or dying women in Rome. Other possible Latin etymological origins include the verb *caedere* (to cut) and the noun *caesones* (infants born by post-mortem operations). See "Cesarean Section—A Brief History" for a full account of this procedure.
10. As Pomata explains, Sabuco's criticism also extends to the Islamic authors Averroes and Avicenna (*The True Medicine* 31).
11. The titles of these last opuscles in Latin are "Brief Exposition of Human Nature" and "Proper Philosophy of the Nature of Composite Things, of Humans, and of the World, Unknown to the Ancients."
12. According to Waithe et al., this whole section is omitted entirely in the 1622 Braga (Portugal) edition, which might be the last one that could have been prepared by Oliva Sabuco herself. The colophon lines are from Horace's *De Arte Poetica* (270).

13. Waithe, Colomer Vintró, and Zorita coincide with Buxó, concluding: “In the context of a severely patriarchal, misogynist society, Sabuco’s repeated references to women exemplars, as well as the evenhandedness of her treatment of uniquely female medical concerns, must be considered to be markers of a feminist voice” (13).
14. The original quotation in Cuartero’s edition is: “assi el hombre, y la muger, con solo el saber, y conocer esta bestia . . . se librá de ella.” Waithe et al. skip this part in their translation.
15. It is an accidental *mise en abîme* that brings out the omnipresent concern for the role and value of the author and his tradition in Renaissance medical discourse. These concerns are very visible in disciplines such as anatomy, since the Vesalian school, informed by Humanism, was forced to redefine its own methods in the mid-1500s. For an illustration of this phenomenon, see the prologue to *Historia de la composición del cuerpo humano* (1556) by Valverde, which discusses the exaggerated authority given to Galen before Vesalius would question his descriptions of the human body. Valverde mentions the practices of glossing and translation as reasons to doubt the validity of such knowledge (fol. 2). Following Vesalius, Valverde explains imprecisions in the body of Galenic knowledge, claiming that, either Galen did not actually carry out dissections on human bodies, and thus his explanations come from his observation of animals, or his manuscripts have been corrupted by centuries of glossing: “o Galeno vio pocas vezes o ninguna la Anatomia del hombre, o que sus libros estan corrompidos” (fol. 2 v) (or Galen saw the Anatomy of man few times or none at all). In addition, Valverde ends his prologue by referring to some university professors who repeat what is written in this altered body of texts: “como pregoneros dicen desde las Catedras, no lo que ellos an visto, antes lo que qualquier niño podria leer teniendo el libro delante” (fol. 2 v) (as town criers, they say from their podiums, not what they have observed, but rather what any child would be able to read if only he had the book in front of him). These same suspicions about the written record illuminate *New Philosophy*.

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