

Passion and Melancholy: Julian of Norwich's Medical Hermeneutic

Abstract

This paper examines Julian of Norwich's representation of the Passion of Christ in her *Revelation of Love*, proposing that Julian reads the body of Christ through a medical hermeneutic which echoes vernacular texts of the spiritual 'remedy' genre. The essay's overarching argument is that Julian's engagement with humoral theory positions her as a participant in an emerging collective imaginary of vernacular medicine, related to the translation and transmission of medical texts in the late fourteenth and early fifteenth centuries. Comparing the Latin and Middle English versions of William Flete's *Remedies Against Temptations* and related works, I examine how this spiritual-medical discourse is expressed in vernacular texts contemporary to Julian's life. I then consider Julian's own sophisticated invocation of medical theory and practice in her description of the Passion, where she deploys diagnostic markers to depict an 'ex-sanguination' of Christ's perfect disposition. These markers serve to reify the traditional figure of the 'Man of Sorrows' with a portrayal of Christ's body as melancholic, a humoral affliction which reiterates both his suffering and his 'love-longing' for humanity. Finally, I show how this medical account functions in Julian's optimistic theology, offering a reminder of the eternal presence of God's love even in times of pain and disease.

In Julian of Norwich's *Revelation of Love*, the visionary theologian recounts in detail the series of sixteen showings to which she bore witness, as she lay afflicted with a 'bodely sekeness' for three days and nights. Following the onset of this illness, Christ's Passion begins to unfold before Julian in all of its violence, his body damaged, drained, and discoloured. Julian then beholds further manifestations of this 'revelation of love', including showings of God's loving power, the defeat of the devil, and the divine indwelling of God within the souls of those who love him. The shorter version of Julian's *Revelation*, presumed to be written c. 1373-1380s prior to the longer text in c. 1393-1416,¹ gives greater detail of Julian's personal situation than does the longer, revised version. The long text, meanwhile, with its highly developed theological programme, offers a fuller interpretation of the showings informed by Julian's retrospective meditation. The overarching revelation Julian gleans is one of God's eternal and therapeutic love.

The Julian texts are, however, rooted in a deep awareness of the anchoress's own epistemological limitations. Julian admits the texts' non-closure, ceding the possibility that she can ever comprehend her showings fully, since with our limited postlapsarian perspective we can only hope to glean an 'ABC'² understanding of the divine. Her *Revelation* thus constitutes a prolonged effort to express this 'gostly vnderstanding' (*Rev* 135) in terms intelligible and accessible for her 'even cristen' audience. Linguistic strategies of cataphasis, apophasis, and triadic imagery are all deployed in the rich texture of Julian's writing, as she navigates this epistemological terrain.³ One of these strategies is, this paper proposes, an engagement with vernacular medical language, which speaks to Julian's audience through a common schema of medieval humorism and soteriology. In this essay, I will demonstrate Julian's deft interweaving of theological and medical material, a spiritual-medical matrix which allows the anchoress to negotiate the Scriptural model of 'metaphor-that-is-more-than-metaphor', the Word made flesh.⁴ Julian's 'understondyng' is led into the 'wound into his [Christ's] syde' (*Rev* 35), and the traditional exegetical practice of *lectio divina*—holy reading—turns into what Vincent Gillespie has called *lectio Domini*: a reading of the book of Christ.⁵

Specifically, I will examine the humoral framework upon which Julian's medical hermeneutic is grounded, suggesting that Julian's reading of the Passion expresses her understanding of Christ's suffering using humoral language. In doing so, I respond to Julian scholarship which has suggested that the anchoress was familiar with medieval medical theory and/or practice.⁶ Rebecca Maryan, for example, has briefly examined the presence of humoral discourse in Julian's writing, arguing that 'it is evident that she [Julian] (or her amanuensis) was aware of learned humoral discourse, and chose to use it to describe her religious experiences'.⁷ Maryan subsequently infers 'the wider transmission of medical ideas within religious contexts in this period'.⁸ I am not so concerned with the degree of learned medical knowledge Julian possessed, but with the porosity of vernacular religious literature to secular discourses of health and the body. Primarily, however, I am interested in the ways in which Julian both adopts and, importantly, subverts these frameworks. This paper thus follows a similar mode of analysis as Gillespie's recent article on Julian, which outlines the proliferation of language of 'disease' in penitential manuals and books of tribulation, relating this to Julian's engagement with the same themes.⁹

More specifically, what does the intersection of theology and humoral theory offer to the anchoress's work? To what extent does Julian conform to or disrupt this conceptual framework? And how 'successful' is Julian's hermeneutic strategy—that is to say, what is revealed and what remains hidden? For as Denys Turner has written, the meaning of Julian's work 'consists precisely *not* in some immediate datum of experience as distinct from its interpretation but, on the contrary, in the hidden meaning that can be known to be there, but in its ultimate significance inaccessibly so, and known to be there insofar as we can know it only on the strength of an appropriate hermeneutic'.¹⁰ I want to interrogate Julian's medical hermeneutic for the strength of its signifying power, beginning by outlining the tradition of humoral language deployed in texts of vernacular devotion. Particular attention will be paid to the confluence of humorism and devotion in William Flete's *Remediis contra Temptationes* (c. before 1359) and its Middle

English translations. As Flete's understanding of melancholia is analogous to Julian's, both texts participate in a collective imaginary of spiritual and medical ideas, which was widespread in the 'remedy against sin' genre of vernacular religious writing.

Further, Julian's rendition of the *Christus medicus* topos and 'Man of Sorrows' iconography connects Christ's physiological suffering with the postlapsarian human condition. As he loses blood and sacrifices his divine aspect, Julian's Christ adopts the role of 'wounded physician'; a doubling of patient and healer which draws on both surgical and humoral understandings of the crucified body and the inherited 'disease' of humanity. Finally, Christ's changing 'chere' serves to highlight the limitations of Julian's *lectio Domini*, thereby disrupting the crucifixion narrative: God possesses, Julian begins to understand, an eternal countenance of love not always visible to human experience, or through signs of bodily suffering. Julian's medical hermeneutic is, accordingly, a non-closing exercise, which diverts conventional accounts of human culpability for sickness and sin, towards the potential for growth and healing contained within these experiences of 'wo and disese' (*Rev* 26).

I. Theory and Practice: Medicine in Vernacular Religious Texts

The medical resonances throughout Julian's writing demonstrate an awareness of—and participation in—a discourse common to contemporary vernacular religious literature: the marriage of medicine and spirituality. With body and soul considered interactive and mutually determining constituents of health, this psychosomatic matrix accounted for certain afflictions as resulting from sin.¹¹ Medieval medicine subsequently supplied practical etiological and therapeutic frameworks for devotional practice, and for glossing the Christian narrative, with 'salvation' denoting both literal and spiritual health (as in *salus*, 'state of good health'¹²). This was a pressing concern in fourteenth-century England, a context in which mortality and death presided over the everyday lives of many, on account of the prevalence of both war and disease—

including, of course, the devastating outbreaks of the Black Death from 1348 onwards, which caused the deaths of an estimated one third of the population.¹³

This period saw the convergence of an increasingly affective brand of devotion to Christ with a rise in the dissemination of vernacular medical material. The former resulted from centuries of theological discussion concerning issues of the Incarnation and Christ's bodily suffering: since Anselm's *Cur Deus Homo* enquiry (1094-1098), discussions of the soteriological drama had centered Christ as the lead actor. In the wake of the Fourth Lateran Council (1215), with its intensification of Eucharistic piety, even greater weight was placed by the Church on Christ's bodily suffering at the Passion, as well as reiterating the link between health of the body and soul. The latter, meanwhile, resulted from the translation of Greco-Roman and Arabic medical sources into Anglo-Norman and Middle English, disseminated both via the universities and religious institutions.¹⁴ By the end of the thirteenth century English clergymen were required to study the liberal arts, among which were included the natural sciences, where they would have encountered humoral theory.¹⁵ While higher education remained limited to the clergy, the surviving literature also demonstrates an awareness of humorism in those who had not formally studied medicine. Naoë Kukita Yoshikawa provides evidence for this in her study of Henry of Grosmont, Duke of Lancaster's (c. 1310-1361) *Le Livre de Seyntz Medicines*.¹⁶ A picture emerges of a cultural awareness of medical theory, which informs increasingly complex representations of spirituality: as Yoshikawa writes, 'armed with a solid grasp of medical ideas, theologians often drew on a complex and sophisticated explanation of physiology, based on the Galenic theory of humours'.¹⁷

The assimilation of this material into the literary vernacular in the fourteenth and fifteenth centuries is exemplified in sources such as the love lyric which, responding to the flourishing of Christological and Marian devotion, deploys macaronic language to combine spiritual and medical themes. The affective refrain from the Song of Songs, *Quia amore langueo* ('Because I languish for love'), for example, provides fertile ground for the medicalization of

devotion, manifesting as the acutely physical afflictions of ‘love-languor’, or the ‘wound of love’.¹⁸ In ‘The Valley of This Restless Mind’, Christ is the languishing lover, whose humours indicate the extent of his suffering:

‘Alle myn humours Y have opened hir to—

There my bodi hath maad hir hertis baite, has

Quia amore langueo.’¹⁹

This *opening* of the humours can here be read as a release of Christ’s bodily fluids—that is, blood, water, and milk—made accessible through the wound, which in the next stanza is the ‘chaumbir’ where the soul will ‘neste’.²⁰ This is an image also employed by Julian, as referred to above, who describes her understanding as led into Christ’s side-wound (*Rev* 35).

Christ’s blood thus becomes in this poem—as it will in the Eucharist—a purgative which will ‘waische if ony filthe’²¹ from the penitent, as in Revelation 1:5: ‘Jesu Christo [...] qui dilexit nos, et lavit nos a peccatis nostris in sanguine suo’ (‘Jesus Christ [...] who hath loved us, and washed us from our sins in his own blood’).²² This verse was used widely in Middle English sermons, particularly during Holy Week, with Christ often portrayed as a conventional lover-knight.²³ By the fifteenth century, the image was used in more affective contexts: the late fifteenth-century translation of a French devotional tract, *The Tretyse of Love*, for example, incorporates this same verse in a passage describing the ‘gret loue [...] between mother & childe’.²⁴ ‘Yf þe chylde had suche a syknesse that hyt myght neuyr be helid but hyt were bayned in the mothyrs blood, & yff the mother wolde make thys bayne, thys shewed well a gret & specyall loue’ (ll. 4-8), the translator writes. The text then compares this relationship to ‘whanne we were so syke of synne so vyle & soo dysho[n]est þat no thyng in all thys worlde myght wasshe vs, hele vs, but alonly the precyus bloode of Ihesu cryst’ (ll. 9-12). This integration of the blood topos with the mother-child relationship echoes the early thirteenth-century guide for anchoresses, *Ancrene Wisse*, and also, notably, makes its way into Julian’s famous God-as-mother image.²⁵

In such representations of the narrative of fall and redemption, Christ's blood becomes the nourishing succor which will heal us of our inherited disease, but which leaves his own body wounded and broken. This 'wounded healer' paradox is typical of the topos of *Christus medicus* (Christ the physician), or Christ as *medicus animae* (physician of the soul), which can be found in texts as early as the second century.²⁶ Following elaborations by writers such as Augustine and Aelred of Rievaulx, this topos was steadily integrated with available medical information, with elements of the Passion glossed as directly related to the spiritual and bodily health of the Christian population. In the above instance, a reading of Christ's blood as a purgative incorporates both humoral theory and its practical application, with blood-loss also related to the surgical correction of humoral imbalance: if an individual's humoral equilibrium was disrupted, a regimen would be implemented to 'purge' the individual of excessive humours, which could include the practice of phlebotomy, or bloodletting.²⁷ The flow of Christ's blood, then, is both indicative of its purgative power (healing humanity of its sins), and of God's loving nature, with the 'wound of love' motif configuring Christ's blood-loss as a signifier of the strength of his devotion. With this, the medical reading of Christ as physician is intertwined with the affective, even erotic, imagery of Christ as lover.

These affective topoi are developed further in religious literature contemporary to Julian, which may have influenced, or been influenced by, her texts. Again, the assimilation of medical material into the vernacular, can be mapped onto the kind of spiritual-medical imagery used in Middle English devotional texts. One such example is William Flete's *Remediis contra Temptationes*, a Latin treatise of spiritual direction, which was translated into a number of Middle English versions. These translations expand the text with new material which elaborates on the medical theme, transforming the Latin original from what editors Edmund Colledge and Noel Chadwick have called Flete's 'sparse, concise and scholarly' treatment of his subject matter, 'manifestly the work of a trained and skilled academic', to 'a highly charged piece of affective writing'.²⁸

Explicitly medical treatments of Flete's theme are infrequent in the Latin, which relies more heavily on exegesis and scriptural authorities. Flete's singular invocation of medical theory is his discussion of the humours, used to explain the spiritual temptation into doubt and despair. Here, Flete cites 'naturales', natural philosophers, to support the idea that a person's innate humoral disposition—their 'complexion'—determined their propensity to sin or their 'spiritual aptitude'.²⁹ The absent authority is Constantinus Africanus (d. 1087), whose *De melancholia* was a major contribution to the dissemination of Greco-Arabic humoral theory into the medieval west. Accordingly, Flete concentrates on the melancholic humour, black bile, explaining that an excess of this cold and dry humour obscures the mind, rendering the subject particularly prone to spiritual, temperamental, and physical ailments: 'Dicunt enim naturales quod fumus nigre colere, ad cerebrum ascendens, ad locum mentis peruenit et lumen eius obscurat et turbat, prohibens animam discernere' ('For the natural philosophers say that the smoke of the black choler, rising to the brain, comes to the locus of the mind and obscures and disturbs its light, preventing the soul from discerning').³⁰

The most detailed Middle English version of this text is from c. 1425-1450, part of a devotional miscellany compiled around the mid-fifteenth century in East Anglia, most likely for a house of women religious.³¹ This archetype expands on Flete's brief reference to melancholy, adding an entire passage later in the same chapter, in which the translator describes God as a 'lyche' ('a physician or surgeon for the body [as opposed to a spiritual doctor]'³²). Here, the translator writes that God 'werketh lyke a good lyche, for a lyche suffereth somtyme the dede flesh to | growe on hym þat he hath in cure, but aftirward he taketh away the dede flesh *and* | maketh the qwyk flesh to growe, and so he heleth þe man'.³³ This image of God physically stripping away the dead flesh of mankind has a parallel in the Middle English translation of Bridget of Sweden's *Liber celestis* (c. 1420), where Christ is also rendered as *chirurgus*, 'surgen', who 'cuttes away rotyn fleshe and transform[e]s' the faithful 'vnto hymselfe'.³⁴ Common to both

texts is the image of Christ as surgeon, *Christus chirurgus*, a topos which supplemented the devotion to Christ's wound, as seen in the above lyric.

Flete's translator may have been influenced by Bridget's *Liber*, or indeed simply by the increased prevalence of surgical material available in the vernacular in the early fifteenth century, such as the translations of surgical treatises by English physicians Gilbertus Anglicus (c. 1250), John of Gaddesden (d. 1348), and John Arderne (d. 1392), and those of continental surgeons like Lanfranc of Milan (d. 1306), Henri de Mondeville (d. 1316), and Guy de Chauliac (d. 1368).³⁵ This proliferation of surgical material into the public imaginary allowed for the development of Christ the *physician*, who offered spiritual remedy, to Christ the *surgeon*, who effected his cure through physiological—visceral, often painful—means. In the above passage from the Middle English *Remedies*, Christ is the latter, cutting away so as to allow the new flesh to regenerate and grow. Jeremy Citrome comments on this surgical double action, writing of the punitive and restorative role of the surgeon, who 'both healed and hurt',³⁶ while Virginia Langum points out that Christ the surgeon provides an opportunity for compassion: by inviting the faithful to attach themselves to his wound, Christ incorporates these persons as 'members' of both his body, and the metaphorical body of the Church.³⁷

Given that the dating of Julian's long text runs from 1393 possibly into the early fifteenth century, predating the Middle English *Remedies* by approximately a quarter century, Julian's own medical hermeneutic may be read as an antecedent (if not an exemplar) for such representations of these themes as those by Flete's East Anglian translator. There are further similarities which hint tantalizingly at a connection between the two texts: for example, following the metaphor of God as 'lyche' in this version of Flete is an *amplificatio* which describes God as 'also like a | gardener', who 'suffereth somtyme wikked wedys to growen in his gardeyn, and whanne the erthe þoruȝ reyn is moyste *and* tendre, he taketh away the wedys bothe rote and rynde'.³⁸ Julian performs the same movement from God as physician to God as gardener in the first and second halves of her *Revelation*, a pairing of metaphors compressed by Flete's translator into the space of

two paragraphs. There is even a potential geographical link: Veronica O'Mara argues that 'the balance of probability would associate the manuscript with the Benedictines of Carrow in Norwich'.³⁹ It must be conceded, however, that the lack of a contemporary witness to Julian's work, or evidence of its circulation, limits any claim to direct influence.

As a participant in this collective vernacular conversation about the connections between devotion and health, though, Julian's *Revelation* speaks to both surgical and humoral understandings of the Christian narrative, invoking the same motifs we find in literature contemporary to and following her work: Christ's purgative blood, the opening and closing of his wounded flesh, and the humoral transformation of his dying body, for example. Yet Julian drives this discourse into new territory, her affective description of the Passion asking her readers to rethink contemporary assumptions about human culpability and sickness, thereby repurposing the spiritual-medical ideas about disease to focus instead on the potentiality of healing and health.

II. *Christus medicus*

A Revelation of Love invokes the conventions of humorism and the 'remedy' genre in both Julian's description of the Passion showings and her interpretation of their meaning. This medical hermeneutic is rooted in two particular elements of the Passion narrative, found in the fourth and eighth showings of the *Revelation*: the scourging and spilling of Christ's blood, and his dying, respectively. The former draws on the doubled power of surgery, both wounding and curative, while the latter engages elements of humoral theory, specifically, melancholia, as a means of expressing the extent of Christ's kenosis and sacrifice. Two interconnected roles are thereby ascribed to Christ: Christ the physician, or surgeon; and Christ the patient, or sufferer. With this combination of humoral and surgical elements, Julian's *Revelation* constructs a hybrid 'Man of Sorrows', whose surrogate suffering is reified through the medical framework.

Julian's representation of Christ's blood-loss in the fourth showing invokes the same medical topoi as the literature described above, setting up her characterization of him as 'our

medicyne' (*Rev* 130) in chapter eighty-two. As in *The Tretyse of Loue*, Julian portrays Christ's blood as a potent signifier of both his suffering and his healing capacity: invoking the same verse from Revelation 1 as *The Tretyse*, Julian writes that 'it likith God rather and better to wash us in his blode from synne than in water, for his blode is most pretious' (*Rev* 19). Julian is here reminded of the 'waters plentivous in erthe' that God made 'to our service and to our bodily ease', an image which pre-empts her statement that he would rather us take '[h]is [Paris: his] blissid blode to washe us of synne'. In the same sentence, the tone becomes Eucharistic, as the blood becomes the 'licor' that Christ gives to us: 'for there is no licor that is made that he lekyth so wele to give us'.

The term 'licor' encompasses a multiplicity of meanings, signifying primarily the 'liquid' of Christ's blood, as well as metaphorically the 'liquor' of the communion wine, and liquid 'medicyne'—such as an unguent or a tincture.⁴⁰ The second reading of 'liquor' also recalls the Gospel of John (19:29) which, after the prophetic Psalm 68,⁴¹ recounts that sour wine—vinegar, 'aysel' in Middle English⁴²—was given to Christ on the cross in response to his penultimate words, 'Sitio' ('I thirst'). The sponging of wine or vinegar onto wounds was a common surgical measure in antiquity and beyond, given its antiseptic qualities and the astringent effect, which would contract the wound to speed the healing.⁴³ In the Gospel, however, the sour wine does not revive Christ, nor satiate his thirst, as he presently expires on the cross. In Julian's account too—and this is explored more fully below—Christ's thirst becomes an outward sign of his body's failure, as well as an indicator that *he cannot be healed*. Instead, his wounds produce fresh 'licor', which will cleanse and purge our sins and restore our bodily ease, transubstantiated into the medicinal 'liquor' of the Eucharistic wine.

The wine is, however, only one half of the Eucharist; it must be paired with Christ's body to fulfil its salvific purpose. Accordingly, Julian's *Christus medicus* supplies humanity with healing through both the medicine of his blood and the proto-surgical enjoinder of the human body to his flesh: he is 'our medicyne', and 'will we turne us to him, redy cleved to his love'

(*Rev* 130). Again, this image can be compared to Bridget's *Liber*, which describes *Christus chirurgus* who 'transform[e]s' the faithful 'vnto hymselfe'. The soul must turn away from sin in order to turn towards Christ and to salvation, a process Julian describes as 'beseking', whereby 'our wil be turnyd into the will of our lord, enioyand' (58). With this, the souls of the saved are incorporated as 'members' of the communal body of Christ, an idea Julian develops in her account of the thirteenth showing, when she writes, 'Criste is our hede, he is glorified and onpassible, and anernst his body in which al his members be knitt' (43).

Surgical resonances of this language can be found in contemporary vernacular treatises, such as Lanfranc's *Cirurgie*, in which he warns the reader to avoid piercing the delicate veins with their stitching: 'Loke þat þou peerse not þe veyne, & knytte hir wiþ a þreed'.⁴⁴ Julian has already demonstrated an awareness of this venous anatomy, when in the first showing she describes how 'grete dropis of blode fel downe from under the garland like pellots semand as it had cum out of the veynis' (*Rev* 10). Watson and Jenkins also remark that such anatomical knowledge was widely disseminated by vernacular surgeries, citing Guy de Chauliac's *Cyrurgie*, which describes how 'Blode is yette out [shed] when the cote [exterior] of the vesselles, that is, veines is [...] opened or broken'.⁴⁵ Julian's description of Christ's broken veins thus medicalizes the image of the communal body of which Christ is our 'hede'; the body is knitted together like the surgical patient, a redemptive stitching of flesh at the seams.

Julian's punning on the term 'seme' subtly reiterates this stitching action, as in her account of the fourth showing, when she beholds 'the body plentiously bleding *in seming of the scorgyng*, as thus' (*Rev* 19, emphasis added). The short text has the more explicitly material 'semes'—'in the *semes* of the scourginge'—suggesting a semantic layering of 'seems' with 'seams' across the two versions of her text. 'Seam', or Middle English 'seme', denotes an anatomical join, as 'of junction of two bones forming an immovable joint, esp. in the skull', or alternatively, a suture made by sewing two pieces of material together, in particular the ridged furrow or protruding edges of this junction.⁴⁶ The 'seming of the scourginge' passage might, then,

be read as another instance of Julian's linguistic open-endedness, drawing on these 'seem'/'seam' homonyms to enfold further meaning into the enclosure of Christ's flesh. This multidimensional aesthetic invokes both a hermeneutic dimension—how the showing 'seems' to Julian—a physical one—the seams of Christ's wound—and a metaphorical one—the surgical, material, splitting and reknitting of Christ's flesh.

Christ's body must, therefore, be scourged before regeneration can occur, drained of his life-giving blood so that the communal body of the saved might be revived. The fourth showing draws to a close with this image, as the 'pretious plenty' of his blood descends 'downe into helle' (*Rev* 19), bursting its banks and delivering all thence at the Harrowing. So begins the fifth showing with God's statement, 'Herewith is the fend overcome' (20). The narrative sequence of these events provides an etiology for Julian's account of Christ's dying which follows in the eighth showing. Christ's blood-loss fulfils the defeat of the devil, a sight which fills Julian with joy such that she 'lavhyd migtily' (21). Christ, however, remains stony-faced, reminding Julian that he has taken on the sins of humanity so that they might 'lavhyn in comfort of ourselfe and ioying in God'. He becomes, in other words, the archetypal 'Man of Sorrows', whose love induced him to take on the grief and infirmities of humankind, and which, in turn, nourishes humanity back to health, or to salvation.

III. The Man of Sorrows

With this transition from bloody to bloodless, Christ begins his slow death, a 'swemful chonge' which dwells 'continuly' (*Rev* 24-25) in Julian's sight. Gillespie has written of this temporal distortion as an invocation of crucifixion iconography, writing that Julian's Christ 'functions like the atemporal Passion image of the Man of Sorrows, who speaks from a non-linear and non-chronological "nowhere"'.⁴⁷ I would argue that Julian takes this iconographical convention even further, with a spiritual-medical representation of the Passion reflecting humoral understandings of dying and grief. That is to say, the humoral physiology of Christ's dying body provides Julian

with an appropriate hermeneutic for understanding his kenosis, and his role as the ‘Man of Sorrows’.

Iconography of the ‘Man of Sorrows’ evolved, Sarah Stanbury writes, ‘into an important cult image in the fifteenth century’, coinciding with the affective emphasis on Christ’s bodily suffering.⁴⁸ Even in the fourteenth century, however, material from Scripture and the liturgy provided a rich store of imagery for depicting Christ’s sorrow. Scripturally, the ‘Man of Sorrows’ was a prefiguration of Christ drawn from Isaiah 53, which describes Christ’s surrogate torment: ‘despectum et [...] virum dolorum et scientem infirmitatem’; ‘Vere languores nostros ipse tulit et dolores nostros’; ‘Ipse autem vulneratus est propter iniquitates nostras adtritum est propter scelera nostra disciplina’ (‘Despised, and the most abject of men, a man of sorrows, and acquainted with infirmity’; ‘Surely he hath borne our griefs and carried our sorrows’; ‘But he was wounded for our transgressions, he was bruised for our iniquities’) (Isaiah 53:3-5). The fourteenth-century sermon collection, *Fasciculus Morum*, subsequently asks the viewer to look upon him and see ‘Suche sorow’, an invitation common also to lyrics of the same theme.⁴⁹

This abject figure lends itself particularly well to the humoral framework, with its etiological connection between emotions or ‘affections’, spiritual health, and physical infirmity. Indeed, the superlative nature of Christ’s suffering required an equivalent etiology in the view of medieval theologians, leading to various scholastic interpretations of Christ’s physicality using humorism, in particular complexion theory. Given that Christ never committed a sin, nor could he, his human body was thought to transcend the imbalances of the postlapsarian disposition; his divine element was begotten by the Holy Ghost, while his human element—his blood—was inherited from the Virgin Mary, whose own immaculate conception rendered her blood pure. Christ’s fleshly incarnation was, therefore, ‘quasi agni incontaminati et immaculati’ (‘as of a lamb, unspotted and undefiled’) (1 Peter 1:19).⁵⁰ This logic was used to explain the singularity of his suffering at the crucifixion: since the better complexioned the body, the better the soul was thought to perceive pain, theologians such as Aquinas determined Christ as incarnated with the

perfect complexion, *optime complexionatus*.⁵¹ The corollary of this discourse was the reiteration of Christ's sacrifice, and a physical expression for the spiritual salvific transformation of his kenosis.

Christ's exemplary complexion thus provides a hermeneutic framework for explicating his role as the 'Man of Sorrows', as the *most* abject of men, carrying the suffering of *all* of humankind. His perfectly formed body implied an ideal balance of humours, the human equivalent of which was thought to be the sanguine complexion, which, ruled by blood, was frequently described as the *complexio temperata*.⁵² An anonymous text found in London, British Library, MS Egerton 843 (c. 1250-1275), *Legitur in annalibus hebreorum*, describes Christ using this schema, stating that his perfect complexion is of the sanguine type.⁵³ While this is an unusually specific representation of Jesus's complexion, the sanguine predominance of warm and moist blood was thought to be common to Christian men, and would manifest in a robust and cheerful disposition. Raymond Klibansky, Erwin Panofsky, and Fritz Saxl note that sanguine complexions are commonly defined by a 'ruddy complexion' ('rubeique coloris', from Latin *ruber*, 'red' or 'ruddy'),⁵⁴ a feature which also appears in descriptions of Christ: in Bridget's *Liber*, for instance, Mary describes Christ's lips when he was a young man as 'thike anogh and revyse' ('very thick and ruddy').⁵⁵ Watson and Jenkins point to the similarity between this passage in Bridget's text and Julian's own description of Christ's lips, which before his death are 'freshe, *redy* and likyng to [her] sigte' (*Rev* 24).⁵⁶ Direct influence of this text upon Julian's is unlikely, since the Middle English translation of Bridget's *Liber* was not in circulation in England until later in the fifteenth century.⁵⁷ It is more probable that the images derive from common representations of Christ according to his paradigmatic physiology.

The sanguine type fell at the opposite end of the spectrum from cold and dry melancholy; a contrast which undergirds Hildegard of Bingen's conception of the disposition of postlapsarian humanity as inherently melancholic.⁵⁸ In the medieval imaginary, melancholics were at worst associated with the devil and demonic possession, and at best with love-loss, grief, and sorrow.⁵⁹

Physically, the dispositional predominance of the melancholic humour, black bile, is described by Greco-Roman and Arabic sources as manifesting on the body as a darkening of the flesh as black or blue: Aristotle, for example, described the melancholic as ‘swarthy’,⁶⁰ while Galen noted the possibility of temperamental change, arguing that those with ‘a very red complexion’ can suddenly change ‘to an atrabilious constitution’.⁶¹ This is supported by Bartholomeus Anglicus’s encyclopaedic *De proprietatibus rerum* (1240), which, translated into Middle English by John Trevisa in 1398, describes how a dominance of ‘blak colera’ is visible on the body by ‘signes and tokenes’, one of which is that ‘þe colour of þe skyn chaungip into þe blake or into bloo colour (Latin: ‘in nigredinem vel livorem’).⁶² These melancholic markers were also linked to ageing and dying, since in the humoral system, the body was thought to cool and dry out over time.

Julian’s representation of the eighth showing depicts just such a change in Christ’s physiology, with the outward ‘signes and tokenes’ of skin condition and colour reflecting a gradual change from his paradigmatic state of health to one of disease. In humoral terms, the process of his blood-loss functions as what I want to describe as an ‘ex-sanguination’, as his sanguine complexion is corrupted by the symptoms of melancholia. Following his scourging in the fourth showing, for instance, Christ’s ‘ruddy’ lips now present with ‘iiii colowres’: pale, blue, brown blue, and ‘more depe dede’, while his body turns ‘blew, and sithen more brown blew’, then ‘brown and blak, al turnyd oute of faire lifely colowr of hymselfe onto drye deyeng’ (*Rev* 24). This oscillation affects the general pallor of Christ’s skin, which becomes, in Julian’s sight, ‘ronkyllid, with a tannyd colour, lyke a dry borde whan it is akynned [Paris: agyd]; and the face more browne than the body’ (26).⁶³ Julian’s description is here reflective of the physical condition of a crucified body: upon crucifixion, vasoconstriction limits circulation of blood to the extremities of the body, causing them to shrivel and become cyanotic—a blue-grey color—due to lack of oxygen. Yet the changing hues would also have been symbolically relevant to the medieval reader: as Gillespie has shown, ‘The hues of brown, black and blue that dominate this scene are in striking contrast to the brightness that elsewhere characterizes descriptions of the

radiant Godhead'.⁶⁴ Medieval colour theory subsequently construed the black end of the spectrum as 'linked to earth, to autumn, to manhood, to bile and melancholy, to cold and dryness' (24).

The changing colour of Christ's flesh thus becomes a token by which Julian glosses God's devotional act of self-sacrifice, with the creeping and oscillating blues and blacks of his bruised body juxtaposed against the light of the divine. It also, however, assimilates conventions which regarded melancholia as associated with excessive passion or affect, an etiological framework which highlights Christ's loving devotion to humanity. Gillespie points, for example, to another association of blue and black flesh with spiritual fervor in the work of Julian's contemporary, Margery Kempe, identifying one of the red ink annotations in *The Book of Margery Kempe*, which reads 'nota de colore' next to the passage in which Margery turns blue and grey, the colour of lead, during a particularly intense session of weeping.⁶⁵ Laura Kalas Williams has since proposed a reading of Margery's affective piety as connected to the pathology of the melancholic humour, arguing that 'Margery's notorious weeping is pseudo-stigmatic, evidencing a melancholic woundedness to which she is helplessly subjected but which is concomitantly productive in facilitating visionary perceptivity'.⁶⁶ Citing Gerard of Berry's etiology for melancholia as the fixation on an object of desire, Williams shows how the complex of melancholia functions as 'an open wound', 'strikingly resonant with Judeo-Christian imagery' (89). Given the body-soul interaction, Christ's own woundedness thus provides a physiological parallel to the sorrow, or melancholia, he takes on as the 'Man of Sorrows'.

The remainder of Julian's account of Christ's dying further invokes the symptomatology of the melancholic body, primarily through the extreme dessication of his flesh. As shown above, the blood that has defined Christ's robust and 'lively' health is lost, and his flesh is 'dryden [...] be process of tyme' (*Rev* 24). First, Julian associates this drying with the external environment—the 'dry, harre wynde and wond colde' which blows on Christ as he hangs on the rood—a description which resonates with the 'pneumatic' school of humoral thought, which considered black bile to be of an airy nature, distending the veins and stretching the skin of the melancholic.

An excess of this air, or ‘pneuma’, would set the organism in a state of tension:⁶⁷ in Hildegard of Bingen’s description of the melancholic, for example, she writes, ‘They [melancholics] are like a strong wind that does harm to all plants and fruits’.⁶⁸ Second, Julian associates this drying with Christ’s internal pain and bloodshed: ‘Blodeleshede and peyne dryden within’. Combined with the ‘wynde and cold commyng fro withouten’, these inner and outer dryings ‘metten togeder in the swete body of Criste’. In other words, the flesh of Christ becomes the juncture at which these internal and external dryings meet, and he is suspended as the atemporal ‘Man of Sorrows’, ‘at the poynt of out passing away, sufferand the last peyne’ (25).

Christ’s protracted d(r)ying results in what Julian describes as his ‘doble threst’ (*Rev* 25), a bodily and spiritual manifestation of his suffering which further connects Christ’s melancholic body with the driving force of his Passion: his love. The first of this ‘doble threst’ is his bodily thirst, which has already been referred to above, featuring in the scriptural account of the crucifixion. The second thirst, meanwhile, relates to Christ’s spiritual suffering, which Julian describes as his ‘gostly thrist’, or ‘luflongyng’ (42). Constantinus Africanus associated this condition of ‘love-longing’ with black bile, or melancholy: ‘Just as they [erotic lovers] fall into a troublesome disease from excessive bodily labour, so also [they fall] into melancholy from labour of the soul’, writes Constantinus.⁶⁹ This was a convenient topos with which to understand the salvation narrative: as Williams has shown in relation to Margery Kempe, melancholic love-longing which centered God as an idealized, desired love object could lead to affections such as grief and sorrow, as well as mystical conditions like *alienatio mentis*. In secular terms, this unsatisfied desire was known as *amor hereos*, heroic love, which was typically associated with femininity: see, for example, Arcite’s lovesickness in Chaucer’s *Knight’s Tale* (I 1361-79), which bears a marginal Latin gloss identifying a reference to mania or mental disorder in the following lines:

‘Nat oonly lik the loveris maladye
Of Hereos, but rather lyk manye,

Engendred of humour malencolik' (I 1373-75)

Poised on the threshold between the human and the divine, Julian's lovelorn Christ invokes both of these mystical and heroic traditions, adapting the lover-knight topos that defined representations of Christ in preceding centuries. Just as Christ is both patient and physician, he also becomes both idealized love object and the feminized heroic lover.

A reading of Julian's representation of Christ as melancholic—blue and black, dry and cold, thirsty with 'luflongyng'—thus provides a conceptual framework for her wider theology of love. By situating Christ's suffering within this medical imaginary, Julian reifies the figure of the 'Man of Sorrows' and his kenotic act; Christ's blood-loss fulfils both theological and humoral conventions, leaving him drained and dry, while providing the medicine that will ease humanity's infirm state. Indeed, while contemporary medical authorities advised that melancholic love-longing could be remedied by the drinking of wine, thought to humidify the body, rectifying excessive drying,⁷⁰ the melancholia of Julian's Christ cannot be remedied, as demonstrated by his continued thirst. Rather, he *is* the remedy, the 'medicyne' which will ease humanity's 'disese'.

IV. Christ's Changing 'Chere'

Despite his prolonged cooling and drying on the cross, however, Julian's Christ does not die. In the final chapter of the eighth showing, Julian anticipates his demise, 'but I saw hym not so' (*Rev* 30). Instead of completing the kenotic act, Christ changes his 'chere': 'sodenly, I beholdyng in the same crosse, he chongyd his blissfull chere. The chongyng of his blisful chere chongyd myn, and I was as glad and mery as it was possible' (31). This advent of joy is unexpected, deferring the intense pain and sadness that has characterized the scene thus far. Julian's 'Man of Sorrows' is transfigured, his changing cheer pulling focus away from the intensity of his suffering.

Christ's changing cheer marks a crucial moment in Julian's medical reading of the Passion—a moment at which the energetic pains of his Passion irrupt as emotional experience, his abject suffering revealed to be undergirded by eternal love. Glasscoe has also written of this

event as ‘the quick of the whole revelation’, after which Julian’s remaining showings ‘unpack what is concentrated in this change of *chere*: the glory of a life-giving energy that brought it about, and the capacity of this energy to process all the works of darkness to feed its own light’.⁷¹ Glasscoe subsequently challenges Colledge and Walsh’s division of the text, which places the changing cheer passage at the start of the ninth revelation. The passage does indeed provide a transition from the sorrow of the Passion to the ninth showing, of Christ’s love for humanity filling the heavens. Yet I agree with Glasscoe that it is more essential to Julian’s reading of the eighth, the pivotal moment of Christ’s dying-but-not-death.

While the interruption of Christ’s surrogate suffering with his changing cheer leaves the Passion scene unclosed, it does provide Julian with a way to understand the mutability of tribulation against God’s interminable love, thereby concluding her medical hermeneutic. Christ’s scourging has demonstrated the necessity of his suffering for the purging of humanity’s sin—the simultaneity of healing and hurting—while his dessicating body has shown the extremity of this suffering, and the kenotic sacrifice of his divinity. But the end result of Christ’s melancholic dying is not, it seems, his death. It is, rather, the opposite: the revelation that God’s therapeutic love underlies this entire sin-sickness framework, a constant and unflagging expression of life- and joy-giving compassion. Julian reads this layering of inward love and outward sorrow in terms of God’s ‘chere’, which she examines in some further reflections on the showings in chapter seventy-one. Here, she defines ‘iii manner of cheres of our lord’ (*Rev* 114), which constitute ‘passion’, ‘pite and ruth and compassion’, and ‘blisfull cher as it shal be without end’, respectively. This threefold expression manifests, in other words, the outward, visible ‘token’ of Christ’s sorrowful Passion; the less accessible, inner expression of God’s love; and finally, his expression of eternal bliss in heaven. With this explanation of God’s threefold countenance, Julian is reminded that there are less accessible, inner expressions behind Christ’s veil of blood, which must be sought after with patience. The message of his changing cheer is, therefore, of loving faith *in the face*, literally and figuratively, of disease: ‘He seid not “Though shalt not be

tempestid, thou shalt not be travelled, thou shalt not be disesid", but he seid: "Thou shalt not be overcome"" (111).

Julian's realization of her own limited sight is reiterated by the showing of the Lord and the Servant, which takes the anchoress 'xx yeres after the tyme of the shewing, save iii monethis' (*Rev* 74), to understand. This showing functions as an allegorical analogue to the narrative of fall and redemption and has visual resonances of earlier Passion scene, including yet another instance of God's external and internal expressions, which Julian here refers to as his 'double cher'. The external markers of the lord's expression in the parable parallel those of Christ's dying, with his countenance described in the same terms as were used to depict Christ's ex-sanguination. The colour palette of Christ's death—the melancholic blues, blacks, and browns—is reimaged in the lord's appearance, with the markers of his scourging and sorrow inverted as symbols of the lord's worldly glory: the lord's clothing is 'blew as asure', his face 'faire browne with fulsomely featours', and his eyes 'blak, most faire and semely, shewand ful of lovely pety' (75). The understanding Julian finally gleans is that the lord's outward appearance reflects his internal expression of 'holy sobirnes' (76), meaning something general such as 'temperateness', and has all the qualities of the optimum *complexio temperata* of humoral theory.⁷² While outwardly the lord bears all the markers of melancholy, then, the inward, hidden meaning—the 'privity'—of these markers signifies his joyful sanguinity or 'blisfull lovely cher' (114), which Julian attributes to his 'lovelongeing', not always visible to our discernment. This 'lovelongeing' is not the melancholic yearning ('luflongyng') of the 'Man of Sorrows', but a constant, eternal fixity of love and joy.

The difficulty Julian has discerning the meaning of this showing is a reminder of humanity's limited epistemological capacity, and its tendency to be distracted by physical experiences of 'disese'.⁷³ This is reiterated again when, in chapter sixty-six, Julian mistakenly renounces her showings as the ravings of her injured mind: the anchoress tells the religious person who visits her that she has 'ravid', and is 'sor ashamid and astonyd for [her] recleshede'

(*Rev* 108) when he takes her visions seriously. She then laments that she has lost the ‘beholding’ of Christ ‘of feling of a litill bodily peyne’, suggesting that it is the return of her bodily symptoms which have distracted her from her beholding. Julian provides some further reflections on this connection between discernment and disease at the end of the long text, when she describes ‘ii manner of sekenes’ (117) that may afflict certain individuals.⁷⁴ The first of these is ‘onpatience or slaith’, which explicitly refers to the inability to bear our pains—*patientia* (‘endurance, ability to tolerate adversity or suffering’)⁷⁵—and the sin of sloth. The second, ‘dispeir or doubtfull drede’, is a condition born out of the ‘onknoweing’ of God’s love, which leaves a person without comfort. These states—sorrow, despair, anxiety—are, notably, the conventional markers of both sin and melancholy, which as Flete writes, typically lead the soul into such conditions as darkness and self-deception: ‘the smoke of the black choler, rising to the brain, comes to the locus of the mind and obscures and disturbs its light, preventing the soul from discerning’. Julian’s own physical affliction seems to have effected an equivalent disturbance in her mind, obscuring the light of her vision and leading her to turn away from God. This sequence thereby identifies the primary problem encountered by Julian’s hermeneutic: of human fallibility and ‘blindhede’.

Julian’s experiences with sickness and ‘disease’ thus provide a humoral parallel against which we can read her depiction of Christ as the ‘Man of Sorrows’. Her own sorrow, impatience, and doubt constitute the very symptoms of melancholia which Christ’s surrogate suffering should ‘medicate’ against. This medicine does not, however, function as a total cleansing or expatriation of worldly sin or pain; the ‘blindhede’ and frailty of humanity precludes any such straightforward cure. Rather, Christ’s suffering offers a symbolic reminder of the unerring nature of God’s love. Julian’s medical hermeneutic provides a physical, bodily framework with which to understand this spiritual ‘mening’, with her treatment of her own sickness highlighting the contingency of suffering to the postlapsarian condition. Just as her understanding is clouded by doubt and ‘disease’, Julian reminds her ‘even cristen’ audience of their own epistemological limitations. At

the core of this practice is ‘sekir troste’ that *in spite of* this tribulation, God’s love will prevail, and the devil—the harbinger of sin and disease—will be overcome.

These medical resonances open Julian’s text up to conversations about the relationship between sickness and sin, which were increasingly prevalent in vernacular devotional literature of the period. Flete’s Middle English translator, for example, provides a similar explanation of the soul’s ‘sensualite’ being easily led astray.⁷⁶ Just as Julian’s own experience shows her that she must not fall prey to the delusions of her mind, the Middle English *Remedies* insists that those who ‘ben sory and dredeful of complexion’ (267, l. 388) should not feel alone, nor take heed of such diseased ‘pouȝtis *and* sterynges’ (268, l. 393). Both texts also emphasize devotion to Christ as a therapeutic practice, whose ‘peyneful passyon and [...] precyous blood’ (290, l. 703) supplies a wellspring of ‘endeles | helthe’ (286, ll. 645-46). Julian’s rendition of this framework is distinctive, however, in her reiteration of the multiplicity of meaning inherent in Christ’s suffering: it is not enough, Julian reminds her readers, to see only the outward, bodily ‘chere’ of Christ’s sorrow and pain. Instead, she underscores the semantic plurality of Christ’s bodily signs, the significance of which consists of, as Turner puts it, precisely what is hidden as much as what is revealed. As a result, Julian’s *lectio Domini* remains as open-ended as her exegesis of the showings in general: it is ‘is begunne be Gods gift and his grace, but it is not yet performid, as to my syte’ (*Rev* 134). The performance, Julian concludes, is lifelong; a continuous remembrance of our own failures and frailty, which are superseded by God’s unfailing love, if they are accompanied by faithful seeking: ‘Than is this the remedy’, she writes, ‘that we ben aknowen [of] [Paris: omits] our writchidnes and flen to our lord’ (124).

Notes

¹ For the dating of Julian's texts, see Nicholas Watson, 'The Composition of Julian of Norwich's *Revelation of Love*', *Speculum*, 68 (1993), 637-83; Barbara Newman, 'Redeeming the Time: Langland, Julian, and the Art of Lifelong Revision', *Yearbook of Langland Studies*, 23 (2009), 1-32.

² Julian of Norwich, *A Revelation of Love*, ed. Marion Glasscoe (Exeter, [1976] 1993), 79. All further references are to this edition unless stated otherwise, cited parenthetically as 'Rev [page number]'.

³ For more on Julian's apophatic imagery, see Vincent Gillespie and Maggie Ross, 'The Apophatic Image: The Poetics of Effacement in Julian of Norwich', in *Looking Into Holy Books: Essays on Late Medieval Religious Writing in England* (Turnhout, [1992] 2011), 277-306.

⁴ Cristina Maria Cervone, *Poetics of the Incarnation: Middle English Writing and the Leap of Love* (Philadelphia, 2012), 5.

⁵ Vincent Gillespie, 'Strange Images of Death: The Passion in Later Medieval English Devotional and Mystical Writing', in *Looking in Holy Books*, 209-42, esp. 211.

⁶ Elizabeth Robertson, 'Medieval Medical Views of Women and Female Spirituality in the *Ancrene Wisse* and Julian of Norwich's *Showings*', in Linda Lomperis and Sarah Stanbury (eds.), *Feminist Approaches to the Body in Medieval Literature* (Philadelphia, 1993), 142-67; Alexandra Barratt, "'In the Lowest Part of Our Need": Julian and Medieval Gynecological Writing', in Sandra J. McEntire (ed.), *Julian of Norwich: A Book of Essays* (New York, 1998), 239-56.

⁷ Rebecca Maryan, 'Humoral theory circulating in religious literature in England, c.1300-1500', PhD diss. (Nottingham, 2016), 213.

⁸ Maryan, 'Humoral theory', 213. Cf. Daniel McCann, *Soul-Health: Therapeutic Reading in Later Medieval England* (Cardiff, 2019).

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- ⁹ Vincent Gillespie, 'Seek, Suffer, and Trust: "Ese" and "Disese" in Julian of Norwich', *Studies in the Age of Chaucer*, 39 (2017), 129-58.
- ¹⁰ Denys Turner, *Julian of Norwich, Theologian* (New Haven, 2011), 81-82, emphasis in original.
- ¹¹ Vivian Nutton, 'Medieval Western Europe, 1000-1500', in Lawrence I. Conrad, Michael Neve, Vivian Nutton, Roy Porter, and Andrew Wear (eds.), *The Western Medical Tradition* (Cambridge, 1995), 75-76.
- ¹² DMLBS, s.v. 'salus'.
- ¹³ Bruce Campbell, *The Great Transition: Climate, Disease and Society in the Late-Medieval World* (Cambridge, 2016), 307.
- ¹⁴ Faye Getz, *Medicine in the Middle Ages* (Princeton, 1998), 69.
- ¹⁵ Ralph McInery, 'Beyond the Liberal Arts', in David L. Wagner (ed.), *The Seven Liberal Arts in the Middle Ages* (Bloomington, 1983), 250.
- ¹⁶ Naoë Kukita Yoshikawa, 'Holy Medicine and Diseases of the Soul: Henry of Lancaster and *Le Livre de Seyntz Medicines*', *Medical History*, 53.3 (2009), 397-414.
- ¹⁷ Naoë Kukita Yoshikawa (ed.), *Medicine, Religion, and Gender in Medieval Culture* (Cambridge, 2015), 13.
- ¹⁸ See 2 Samuel 13; Song of Solomon 2:5, 5:8; and Origen, who said the wound of love is 'the wound of salvation': Origen, *Origen: The Song of Songs, Commentary and Homilies*, tr. R. P. Lawson, *Ancient Christian Writers*, 26 (Westminster, 1957), 199-200.
- ¹⁹ 'In the Valley of This Restless Mind', in Susanna Greer Fein (ed.), *Moral Love Songs and Laments* (Kalamazoo, 1998), 69, ll. 54-56.
- ²⁰ 'In the Valley', 69, ll. 57-59. Cf. F. J. Furnivall (ed.), *Political, Religious, and Love Poems*, EETS o.s. 15, 2nd ed. (London, [1903] 1965), 180-89.
- ²¹ 'In the Valley', 69, l. 61.
- ²² Cf. Psalms 65:9-10 (Vulgate 64:10-11).

²³ See Holly Johnson, *The Grammar of Good Friday: Macaronic Sermons of Late Medieval England*, Sermo, 8 (Turnhout, 2012), 45-138.

²⁴ *Tretyse of Loue*, ed. John H. Fisher, EETS, o.s. 223 (Oxford, [1945] 1951), 33, ll. 3-4.

²⁵ The image also appears in *The Chastising of God's Children* (c. 1382-1408), another text engaging humoral themes and to which *The Tretyse* has been connected, as well as in the *Stimulus Amoris*, the writings of St Bridget of Sweden and St Catherine of Siena.

²⁶ The first mention of the trope occurred in a letter to the Ephesians ascribed to bishop Ignatius of Antioch, who died a martyr in Rome in 107 CE. Quoted in Philip Schaff (ed.), *The Apostolic Fathers with Justin Martyr and Irenaeus*, Christian Classics Ethereal Library, 1 (Grand Rapids, [1886] 2001), 76. Cf. R. Arbesmann, 'The Concept of "Christus Medicus" in St Augustine', *Traditio*, 10 (1954), 1-28.

²⁷ In religious houses, periodic phlebotomy was a regular part of the enforced *regimen sanitatis*. See Eileen Power, *Medieval English Nunneries c. 1275 to 1535* (Cambridge, [1922] 2010), 257-58; also 'Ancrene Riwe', in Emilie Amt (ed.), *Women's Lives in Medieval Europe: A Sourcebook*, 2nd ed. (London, 2013), 211.

²⁸ Edmund Colledge and Noel Chadwick (eds.), *Remedies Against Temptations: The Third English Version of William Flete* (Rome, 1968), 205.

²⁹ Dyan Elliott, 'The Physiology of Rapture and Female Spirituality', in Peter Biller and Alastair J. Minnis (eds.), *Medieval Theology and the Natural Body* (Woodbridge, 1997), 149. Cf. Joseph Ziegler, 'Medicine and Immortality in Terrestrial Paradise', in Peter Biller and Ziegler (eds.), *Religion and Medicine in the Middle Ages* (York, 2001), 21.

³⁰ Jessica Lamothe, 'An edition of the Latin and four Middle English versions of William Flete's "De remediis contra temptationes" (Remedies against Temptations)', PhD diss. (York, 2017), 164-65, ll. 65-68.

³¹ Lamothe calls this the ‘ME3’ archetype (*Remedies* 77). This includes the version used by Colledge and Chadwick for their 1968 edition, from Cambridge, University Library MS Hh.1.11, ff. 100r-16r.

³² MED, s.v. ‘lêche’, *n.* (3).

³³ Lamothe (ed.), *Remedies*, 258-59, ll. 255-57.

³⁴ Quoted in Virginia Langum, “‘The Wounded Surgeon’: Devotion, Compassion and Metaphor in Medieval England”, in Larissa Tracy and Kelly DeVries (eds.), *Wounds and Wound Repair in Medieval Culture* (Brill, 2015), 278.

³⁵ See Langum, ‘The Wounded Surgeon’, 274, n. 17; George R. Keiser, *A Manual of Writings in Middle English, 1050-1500: Works of Science and Education* (New Haven, 1998); Getz, *Medicine in the Middle Ages*, 35; Tony Hunt, *Popular Medicine in Thirteenth-Century England: Introduction and Texts* (Cambridge, [1990] 1994); William Rothwell, ‘The Role of French in Thirteenth-Century England’, *Bulletin of the John Rylands Library*, 58 (1976), 445-66.

³⁶ Jeremy J. Citrome, *The Surgeon in Medieval English Literature* (New York, 2006), 2, 81.

³⁷ Langum, ‘The Wounded Surgeon’, *passim*.

³⁸ Lamothe (ed.), *Remedies* 259, ll. 263-65.

³⁹ Veronica O’Mara and Suzanne Paul, *A Repertorium of Middle English Prose Sermons, Part 1: Introduction and Cambridge University Library, British Library (Additional)* (Turnhout, 2007), 33.

⁴⁰ MED, s.v. ‘licœur’, *n.*

⁴¹ See Richard Rolle, *The Psalter, or Psalms of David and Certain Canticles*, ed. H. R. Bramley, (Oxford, 1884), 242.

⁴² MED, s.v. ‘aisel’, *n.*

⁴³ Anne Kirkham and Cordelia Warr (eds.), *Wounds in the Middle Ages* (London, 2016), 22-23.

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- ⁴⁴ Lanfranco of Milan, *Lanfrank's "Science of chirurgie"*. Edited from the Bodleian Ashmole ms. 1396 (ab. 1380 A.D.) and the British Museum Additional ms. 12,056 (ab. 1420 A.D.), ed. Robert V. Fleischhacker (Ann Arbor, 2006), 295 (see also 24, 36, 50, 71, 143, 170, 231, 301, 308).
- ⁴⁵ Julian of Norwich, *The Writings of Julian of Norwich: A Vision Showed to a Devout Woman and A Revelation of Love*, ed. Nicholas Watson and Jacqueline Jenkins (Turnhout, 2006), 147, n. to l. 11.
- ⁴⁶ OED, s.v. 'seam', n. (1), senses 1.a, 2.
- ⁴⁷ Gillespie, 'Seek, Suffer, and Trust', 134.
- ⁴⁸ Sarah Stanbury, *The Visual Object of Desire in Late Medieval England* (Philadelphia, 2008), 203. Cf. Catherine R. Puglisi and William L. Barcham (eds.), *New Perspectives on the Man of Sorrows*, Studies in Iconography, 1 (Kalamazoo, 2013).
- ⁴⁹ *Fasciculus Morum: A Fourteenth-Century Preacher's Handbook*, ed. Siegfried Wenzel (University Park, 1989), 216.
- ⁵⁰ Cf. Matthew 3:15; John 8:46; Hebrews 4:15; 7:26.
- ⁵¹ 'Nam et secundum corpus erat optime complexionatus, cum corpus eius fuerit formatum miraculose operatione Spiritus Sancti'. Aquinas, *Summa theologiae*, 3a. 46, 6. Cf. Irvn M. Resnick, *Marks of Distinction: Christian Perceptions of Jews in the High Middle Ages* (Washington D. C., 2012), 32; Esther Cohen, *The Modulated Scream: Pain in Late Medieval Culture* (Chicago and London, 2009), 204-6.
- ⁵² Raymond Klibansky, Erwin Panofsky, and Fritz Saxl, *Saturn and Melancholy: Studies in the History of Natural Philosophy, Religion and Art* (Nendeln, 1979), 100.
- ⁵³ Joseph Ziegler, 'Text and Context: On the Rise of Physiognomic Thought in the Later Middle Ages', in Yitzhak Hen (ed.), *De Sion exhibit lex et verbum domini de Hierusalem: Essays on Medieval Law, Liturgy, and Literature in Honour of Amnon Linder* (Turnhout, 2001), 117.

⁵⁴ Klibansky, Panofsky, and Saxl, *Saturn and Melancholy*, 369. For Scriptural descriptions of King David, Solomon, and the Nazarites as ‘ruddy’, see 1 Samuel 16:12, 1 Samuel 17:42, Song of Solomon 5:10, Lamentations 4:7.

⁵⁵ Quoted in Watson and Jenkins (eds.), *The Writings of Julian of Norwich*, 83, n. to l. 6.

⁵⁶ ‘Freshlye and ruddy, liflye and likande to [her] sight’ in the short text. Watson and Jenkins (eds.), *The Writings of Julian of Norwich*, 83, ll. 6-7, emphasis added.

⁵⁷ Vincent Gillespie, ‘The Latin Margery Kempe’, presented at *Margery Kempe Studies in the 21st Century*, University College, University of Oxford, April 5-7, 2018.

⁵⁸ Hildegard of Bingen, *Causae et curae*, in Manfred Pawlik and Patrick Madigan (tr.), M. Palmquist and J. Kulas (eds.), *Holistic Healing* (Collegeville, 1994), 35.

⁵⁹ Contemporary medical textbooks such as Bernard of Gordon’s *Lilium Medecinae* (ch. 19) describe the latter symptoms of melancholy. For further discussion of this, see Elliot, ‘The Physiology of Rapture’, 141-73.

⁶⁰ Aristotle, quoted in Klibansky, Panofsky, and Saxl, *Saturn and Melancholy*, 59.

⁶¹ Galen, *On the Affected Parts*, in Jennifer Radden (ed.), *The Nature of Melancholy: From Aristotle to Kristeva* (Oxford, 2000), 65.

⁶² *On the Properties of Things: John Trevisa’s translation of Bartholomeus Anglicus De Proprietatibus Rerum, A Critical Text*, ed. M. C. Seymour, 3 vols. (Oxford, 1975-1988), 1, 161.

⁶³ ‘Akynned’ refers to pain or breaking specifically of a wound or a sore (MED, s.v. ‘aken’, v.), which makes more sense than the Paris manuscript’s ‘agyd’ in the context of the rest of the line, considering ‘ronkyllid’, which from ‘ranclen’, refers to the festering of a wound (MED, s.v. ‘ranclen’, v.). Also ‘akennen’, i.e. ‘produce’, ‘give rise to’, ‘develop’, from Old English ‘ācennan’ (MED, s.v. ‘akennen’, v. [2]). This reference to production might invoke the process of tanning, where skin was stretched and scraped over a board to make leather, part of manuscript

production. Christ's skin is therefore wounded, festering, but also potentially part of a book to be read, reinforcing Julian's *lectio Domini*.

⁶⁴ Vincent Gillespie, 'The Colours of Contemplation: Less Light on Julian of Norwich', in E. A. Jones (ed.), *The Medieval Mystical Tradition in England: Exeter Symposium VIII. Papers Read at Charney Manor July 2011* (Cambridge, 2011), 23.

⁶⁵ Gillespie, 'The Colours of Contemplation', 24, n. 44.

⁶⁶ Laura Kalas Williams, "'Slayn for Goddys lofe": Margery Kempe's Melancholia and the Bleeding of Tears', *Medieval Feminist Forum*, 52.1 (2016), 86-87.

⁶⁷ See Klibansky, Panofsky, and Saxl, *Saturn and Melancholy*, 30.

⁶⁸ Hildegard of Bingen, quoted in Radden, *The Nature of Melancholy*, 81.

⁶⁹ Constantinus Africanus, quoted in Mary Frances Wack, *Lovesickness in the Middle Ages: The Viaticum and its Commentaries* (Philadelphia, 1990), 189.

⁷⁰ In Gerard of Berry's translation of Constantinus Africanus' *De melancholia*, he glosses only one remedy for love-longing: the drinking of wine. See Wack, *Lovesickness in the Middle Ages*, 205.

⁷¹ Marion Glasscoe, 'Changing "Chere" and Changing Text in the Eighth Revelation of Julian of Norwich', *Medium Ævum*, 66.1 (1997), 117.

⁷² MED, s.v. 'sobre', *adj*; 'sōbrenes(se)', *n*. Also "'moderate in one's desires or actions'; 'prudent, reasonable, sober-minded'; 'solemn' and 'serious'; 'not drunk with love'. Klibansky, Panofsky, and Saxl, *Saturn and Melancholy*, 100.

⁷³ For more on distraction and disease in the Julian texts, see Michael Raby, 'The Phenomenology of Attention in Julian of Norwich's *A Revelation of Love*', *Exemplaria*, 26.4 (2014), 347-67.

⁷⁴ Section twenty-four of the short text, an apparent peroration which may have been added as a response to the 1388 revelation that 'love was his mening'.

⁷⁵ DMLBS, s.v. 'patientia'.

⁷⁶ Lamothe (ed.), *Remedies*, 261, l. 297.