The following two contributions by L. Cifuentes and by L. Eldredge are part of a series on the vernacularization of science, medicine, and technology in the Late Middle Ages inaugurated in 1998 with a special issue of Early Science and Medicine (III, 2), featuring papers selected by William Crossgrove and Linda Ehresam Voights under sponsorship of the Medieval Academy of America for presentation at the Thirty-Second International Congress on Medieval Studies in Kalamazoo, Michigan, in May 1997.

VERNACULARIZATION AS AN INTELLECTUAL AND SOCIAL BRIDGE.
THE CATALAN TRANSLATIONS OF TEODORICO'S CHIRURGIA AND OF ARNAU DE VILANOVA'S REGIMEN SANITATIS

LLUÍS CIFUENTES
Dept. d'Història de la Ciència
Institució Milà i Fontanals, CSIC, Barcelona

Of the medical texts circulating in Catalan in medieval times, two of the most significant were doubtlessly the surgical treatise by Teodorico Borgognoni (1205-1298) and the regimen of Arnau de Vilanova (ca. 1240-1311). They are significant both because of the extent to which they spread throughout the fourteenth and fif-

---

1 This article, together with the research project of which it forms a part, have been supported by grants from the European Union (Human Capital and Mobility Program), from the Spanish Ministry of Education and Culture, and from the Medieval Academy of America. I would like to thank Prof. Luis Garcia-Ballester (Universidad de Cantabria, Santander), Jaume Riera (Arxiu de la Corona d'Aragó, Barcelona), Lola Badia (Universitat de Girona), and Prof. David Nirenberg (Rice University, Houston) for their valuable comments, and the latter also his revision of the English text.

teenth centuries and because of the way they represented their audience. The aim of this paper will be to identify the audience of such medical translations and to uncover the reasons for why they were produced.

1. The translation of Teodorico Borgognoni's Chirurgia

Borgognoni's Chirurgia\(^3\) has very early links with Catalan culture. The text was originally commissioned by the Catalan Dominican friar Andreu d'Albalat, who had met Borgognoni—also a Dominican friar—at the papal court. Around 1266-1267, Borgognoni sent him the finished text together with a dedication to Valencia, after Albalat had been ordained Bishop of that diocese.\(^4\)

A short time after the original text of the treatise had been written, at the beginning of the fourteenth century, a surgeon from Majorca, Guillem Corretger (fl. 1284-1309), took the initiative to translate it from the academic Latin into his own language, Catalan. Two very similar and closely linked versions of the translation of Teodorico's Chirurgia have reached us.\(^5\) The first is the


\(^4\) On Albalat as a typical representative of a type of thirteenth-century high clergy interested in scholastic medicine, see L. Garcia-Ballester, Historia social de la medicina en la España de los siglos XIII al XVI: La minoría musulmana y morisca (Madrid, 1976), 15, 18-20 and 22-23.

\(^5\) The discovery of these early Catalan versions confused some scholars. Hence in library catalogues from the eighteenth century to the present one often finds an invented “Theodoricus Catalanus.” We should remember that, up to the present, the identity of Teodorico has been an object of polemic, with disagreement centering on whether or not he was the son of the famous surgeon Ugo Borgognoni of Lucca (Teodorico explicitly presents himself as disciple of Ugo). See the author bio-bibliographies of G. Sarton, Introduction to the History of Science, 3 vols. (Baltimore, 1927-48, repr. New York, 1975), 2: 654-56; A. Pazzini, “Borgognoni, Teodorico,” in Enciclopedia cattolica, 12 vols. (Roma, 1949-54), 2: cols. 1923-24; Tabanelli, La chirurgia, 1: 203-08; W.A. Wallace, “Borgognoni of Lucca, Theodoric,” in Dictionary of Scientific Biography, ed. Ch.C. Gillispie, 16 vols. (New York, 1970-80, repr. 1981), 2: 314-15; A. Alecci, “Borgognoni, Teodorico,” in
original translation made by Corretger while he was studying surgery at Montpellier from 1302 to 1304, and the second, its correction or "perfection," was carried out from 1310 to 1311 by Bernat de Barriac, a university physician who worked for the king of Majorca. The Catalan translation immediately became very popular and was the main surgical manual consulted in the lands belonging to the Crown of Aragon throughout the whole of the fourteenth century.

The arrival of this innovative treatise coincided with important changes in the medical system and contributed to them. The Borgognoni treatise was enormously innovative, and not only in terms of its methods. Appearing in the middle of the introduction of surgery into the university curriculum of Northern Italian universities in the thirteenth century, it was the first manual of surgical techniques to emphasise the need to bring surgery and medicine together. Teodorico insisted that surgeons, who often had no formal textual training, had to understand Galen's medical doctrine and its basis in natural philosophy as taught at the increas-


8 See Contreras, La difusión medieval, 27 ff.; as well as his "La versión catalana de la Cirurgia de Teodoro de Luca por Guillem Correger de Mayorca: Un intento de mejorar la formación teórica de los cirujanos," Estudis Baleárics 4 (1984), 55-74; and "La formación profesional de los cirujanos y barberos en Mallorca durante los siglos XIV-XV," Medicina e Historia 43 (1992), 1-16; McVaugh, "Royal surgeons," 223; and idem, Medicine before the Plague, 92-94.
ingly prestigious universities. This call coincided with innovations within Catalan-Aragonese medical education: surgery was introduced at the University of Lerida (created in 1300) by the end of the 1320s, just as happened at Montpellier somewhat earlier. In fact the biographies of both Correger and Barriac are closely connected with these processes.

2. The translation of Arnau de Vilanova’s Regimen Sanitatis

The kings of Aragon, and particularly James II (1291-1327), were inclined to surround themselves with university-trained doctors and therefore promoted this kind of training. The chief surgeon of James II, Berenguer Sarriera (fl. 1298-1310), was one such doctor, just as Guillem Correger had been. Berenguer Sarriera came from a family of outstanding surgeons from Girona who had been trained under the patronage of the royal family. Unlike some of his descendants, Berenguer did not manage to obtain academic

---

9 On this characterization of Teodorico’s treatise, see Ch. Crisciani, “History, novelty and progress in scholastic medicine,” in Renaissance Medical Learning: Evolution of a Tradition, ed. M.R. McVaugh and N.G. Siraisi [=Osiris 6 (1990), 118-39], 133. On the practical aspects of medieval medicine, with special emphasis on the foundation of surgery as a learned discipline, see the essays collected in Practical Medicine; Siraisi, Medieval and Early Renaissance Medicine: An Introduction to Knowledge and Practice (Chicago, 1990), chapter 6; McVaugh, “Royal surgeons;” and idem, Medicine before the Plague, 113 ff., passim.

10 On surgery in the Studium of Montpellier, see V.L. Bullough, “The teaching of surgery at the University of Montpellier in the thirteenth century,” Journal of the History of Medicine and Allied Sciences 15 (1960), 202-04. The city of Montpellier formed part of the Crown of Aragon and of the autonomous Kingdom of Majorca from 1204 to 1349, and it was a common destination for Catalan-Aragonese students of medicine and surgery, even after the foundation of the Studium of Lerida, whose medical faculty took some years to get off the ground. See M.R. McVaugh and L. Garcia-Ballester, “The medical faculty at early fourteenth-century Lerida,” History of Universities 8 (1989), 1-25, in 19; and McVaugh, “Royal surgeons,” 228-29, and Medicine before the Plague, 113-16.

qualifications, but like many other surgeons, he did share the general admiration of Galenism. 12

He was therefore up to the task, both technically and intellectually, when he was asked by the Queen to undertake the translation into Romance of a regime of health based on academic medicine, the *Regimen sanitatis ad inclytum regem Aragonum*, written by Arnau de Vilanova for his lord and friend, King James II of Aragon. 13 Berenguer carried out his translation from *ca*. 1308 to 1310, while Arnau, whom he most certainly met, was still alife. This translation soon became enormously popular. Not only were a large number of copies put into circulation, but the text was also rewritten anonymously at least twice in the second half of the fourteenth century and the beginning of the fifteenth century. 14

It is worth mentioning that Romance texts were often taken as a base for translation into another medieval European language, Hebrew. As Jews were not allowed into universities but became increasingly fascinated by medical scholasticism, translations into Hebrew were one way for rationalistic Jewish doctors to gain access to Galenic medical doctrine and natural philosophy. 15 A consid-

---


erable proportion of the medieval Latin medical corpus was translated into Hebrew, including Arnau’s *Regimen sanitatis* and Teodorico’s *Chirurgia*. Today, we can ascertain that three of the four known Hebrew translations of Arnau’s work were based on the various versions of the Berenguer Sarriera Catalan translation. We do not know yet whether the same thing happened with the Catalan translation of Borgognoni’s *Chirurgia*. What we do know is that the Catalan text was used by Jewish doctors, because the manuscript of the “corrected” version made by Barriac is glossed in Hebrew. These, then, are two examples among many of the way in which Romance, in this case Catalan, came to play an important albeit still unstudied role as a vehicle of scientific communication in the Jewish and Christian communities.

3. Vernacularization and its audience

The use of vernacular languages alongside academic Latin as a way of making technical and natural-philosophical texts available to a broader audience was a common phenomenon in later medieval Europe, although it was accompanied by varying local features and chronologies. It is known that this process was particularly pre-

---

ocious and complex in the Iberian Peninsula, where we find early Arabic and Hebrew translations of even highly theoretical texts. From the last quarter of the thirteenth century onward many texts, particularly medical and natural-philosophical ones, circulated in Catalan.20 The key to the study of this interesting phenomenon lies in identifying the audience (or audiences) of such works and the motives for which translations were commissioned. Three sources help us address these questions: the extant manuscripts, the inventories of libraries of the time, and the comments made by the translators in their prologues.21

a. Preserved manuscripts
The manuscripts that have been preserved can give us valuable information about the people who owned them. The version of Borgognoni's *Chirurgia* written by Guillem Corretger appears in ms Espagnol 212 of the Bibliothèque Nationale in Paris, which dates to the early second half of the fourteenth century and contains a series of works on human medicine as well as on veterinary medicine for horses and hunting birds. Although it lacks miniatures, it is a luxurious copy on white large parchment, with profusely ornate capitals and written in two columns, in a very regular, polished three inks script. There are marginal glosses copied...
by the scribe literally from an original. It probably came from the library of the Kings of Aragon in Naples (and formerly from the royal library in Barcelona).22

Apart from fragments of a manuscript from Barcelona,23 the version made by Bernat de Barriac has been preserved in ms 342 of the Karl-Franzens-Universitätsbibliothek in Graz, Austria. Both the fragments and the complete manuscript date from the end of the fourteenth century. The Graz manuscript is quite different from the Parisian one. First, it is not a miscellaneous ms, but contains only our text and a few medical recipes copied by other hands. Second, except for a simply illuminated initial at the beginning of the text (showing a scribe at work), it is an accurate but not luxurious copy, also on large parchment, with simple initials, written in two columns, in a less polished two-ink script. Third, there are corrections in the text and notes in the margin in different handwritings commenting or expanding on the text and ap-

---

22 Paris, Bibliothèque Nationale, ms Esp. 212, ff. 1a-93va. See note 5. Best ms descriptions in A. Morel-Fatio, Catalogue des manuscrits espagnols et des manuscrits portugais (Paris, 1892), 33, § 94; P. Bohigas, “El repertori de manuscrits catalans. Missió a París,” Estudis Universitaris Catalans 15 (1930), and 16 (1931), repr. in his collection Sobre manuscrits i biblioteques (Barcelona, 1985), 101-02; F. Avril, J.-P. Aniel, M. Mentré, A. Saulnier and Y. Zaluska, Manuscrits enluminés de la Péninsule Ibérique (Paris, 1982), 168, § 216; Contreras, La difusión medieval, 47-52; and idem, “La versión catalana,” 68-70. While it is not mentioned by T. de Marinis (La biblioteca napoletana dei re d’Aragona, 4 vols. [Milan, 1947-1953], and Supplemento in 2 vols. [Verona, 1969]), it is in all likelihood of Neapolitan origin. Two titles written in Italian (La Cyrugia de homini, cavalli et falconi in lingua catalana and Chirurgia et medicina degli huomeni, cavalli et falconi) by a fifteenth-century hand on the first leaf, very similar to others in Neapolitan mss now in the Bibliothèque Nationale cited by L. Delisle (Le Cabinet des manuscrits de la Bibliothèque Impériale, 3 vols. [Paris, 1868-1881], and Supplement [Paris, 1977], in 1: 224-26), support this hypothesis. The Paris ms is listed in the inventory of the French royal library at the castle of Fontainebleau (1544) with the number 1689 (H. Omont, Anciens inventaires et catalogues de la Bibliothèque Nationale, 5 vols. [Paris, 1908-1921], in 1: 247); other notes in French on the first leaf by a sixteenth century hand (espaignol, six cints douze, 867) could have been written by the Blois or the Fontainebleau librarians.

23 Barcelona, Arxiu Històric Municipal, ms B-109, three separated leaves of a lost ms dating from the late fourteenth century which were re-used for the binding of municipal books in the second half of the sixteenth century. See Cardoner, Història de la medicina, 56, note 40, and 246 (partial facs. of f. IIIv); and Contreras, La difusión medieval, between 55-56 (facs. of f. IIv); both authors erroneously state that there are only two leaves. Recently, I have identified two more separated leaves from the same lost ms in the Arxiu del Monestir de Pedralbes, also in Barcelona, also re-used for binding. See all these fragments published in Ll. Cifuentes, “A ops de relligar. Fragmentos d’un ms de la traducció catalana del tractat de cirurgia de Tederic reaprofitats en relligadures del Cinc-cents” (forthcoming).
pearing both in Catalan and Hebrew.\textsuperscript{24} It is possible that the manuscript reached Austria by the luggage of some Catalan medical student, of which there were many in the north of Italy at the end of the fifteenth century and beginning of the sixteenth.\textsuperscript{25}

The Catalan versions of the Arnau de Vilanova's *Regimen sanitatis* have reached us in three manuscripts, all polished but not luxurious copies, on paper. The annotations which appear on all of the manuscripts are often just a simple title or mark made in the margin. The first version of the translation made by Sarriera is preserved in ms 10078 of the Biblioteca Nacional in Madrid, originally from the library of the cathedral of Toledo, where it may have been left by some Aragonese archbishop. It dates to the second half of the fourteenth century.\textsuperscript{26} The second version of the same translation is in ms 1829 of the Biblioteca de Catalunya in Barcelona, which was copied at a later time (first half of the fifteenth century) and is less polished than the first. It is a collection of hygienic writings, which in the seventeenth and eighteenth centuries belonged to a public notary.\textsuperscript{27} Both mss are written in long


\textsuperscript{25} J. Arrizabalaga, L. Garcia-Ballester and F. Salmón, "A propósito de las relaciones intelectuales entre la Corona de Aragón e Italia (1470-1520): Los estudiantes de medicina valencianos en los estudios generales de Siena, Pisa, Ferrara y Padua," *Dynamis* 9 (1989): 117-47. At the bottom of the first leaf, a note informs us of the ms' owners, beginning with Franz Emerich (1496-1560) from Opava (in German Troppau, in Moravia), a well known reformer of medical studies at Vienna. Then (1531) it was sent to the Abbey of Sankt Lambrecht, in Carinthia, probably at the request of Antonio de Hoyos, from Salamanca, who was the administrator and later the incumbent of the bishopric of Gurk (1523-1551), where the abbey was located. Under his rule, the monastic libraries of the bishopric increased their holdings of Catalan and Spanish mss. When the abbey was closed (1876), her rich library was moved to Graz. See Karl, "Theodorich der Katalane," 257-58; Contreras, *La difusión medieval*, 53-54; and Zotter, *Der digitale Handschriftenkatalog*, § 342.


\textsuperscript{27} Barcelona, Biblioteca de Catalunya, ms 1829, ff. 1-72, with the complete text. Variants and fragments lacking in the Madrid ms have been edited from this.
lines on small sized paper; the first with ornate initials and in three inks, and the second without initials and only in two inks. An anonymous abridged version of the *Regimen* by Arnau has been preserved in the Barberini Latinus 311 ms in the Bibliotheca Apostolica Vaticana (mid-fifteenth century), which in the previous century belonged to the Prince Barberini. Today it is a composite volume containing a collection of hygienic writings in Catalan, Occitan and Latin; the part of the volume that interests us is written in two columns, on medium sized paper, by a polished mid fifteenth-century gothic cursive hand.  

Thus, the preserved manuscripts of Teodorico’s *Chirurgia* written in Catalan are generally luxurious, which together with the subject matter and the clues we have as to their origin, points towards owners of high social standing (kings and noblemen) or belonging to the medical profession. As regards the manuscripts of *Regiment de sanitat* by Arnau de Vilanova, its codicological and paleographic features indicate a relative value which, together with the information we have on its contemporary or later owners, would suggest an audience of burghers (public notaries) and nobles (bishops and lords). The comments made by the owners also vary: corrections to the text and notes clarifying or expanding the text would indicate professional use; marks or simple repetitions in the margin for quick consultation would suggest private use. Notes of the first kind are found in the Graz manuscript of Borgognoni’s *Chirurgia* and of the second above all in the manuscripts of Arnau’s *Regimen*.

*b. The libraries*

*Post mortem* inventories accompanying wills are a primary source of information on the diffusion of these works and of others which have not been preserved, though it should be kept in mind that

---


inventory descriptions do not always tell us the language in which a work was written. I have gathered a great many of these inventories for the fourteenth and fifteenth centuries from archives throughout the Catalan linguistic area and have used these to reconstruct ownership patterns for the medical texts in question.²⁹ So as to avoid overwhelming the reader with details, I will summarize the results in the two tables below. Although I have made educated guesses in some cases where the language of the text is not explicitly identified, the general results would not be upset even if these cases were suppressed.

The earliest piece of information concerning the dissemination of the Catalan text of Borgognoni's *Chirurgia* dates to a period that is very close to the date of translation. As can be seen in Table I, we know of at least twenty owners from the fourteenth to the sixteenth centuries. The professional distribution of these owners is quite striking. The most numerous group was made up of members of the health professions (14 cases), including surgeons (8), barbers (3), apothecaries (2) and smiths (1). The most significant cases are those of surgeons trained in Galenism (as indicated by the alias Metge) and apothecaries practicing medicine. Outside these occupations we have reports of copies belonging to the

## Evidence of the Catalan translation of Teodorico’s *Chirurgia* in late medieval libraries

<table>
<thead>
<tr>
<th>date</th>
<th>library</th>
<th>occupation</th>
<th>city</th>
</tr>
</thead>
<tbody>
<tr>
<td>1305*</td>
<td>Domènec d’Om</td>
<td>surgeon?</td>
<td>Majorca?</td>
</tr>
<tr>
<td></td>
<td>Pasqual d’Om</td>
<td>merchant?</td>
<td>Majorca</td>
</tr>
<tr>
<td>1308*</td>
<td>Templars</td>
<td>clergymen (knights)</td>
<td>?</td>
</tr>
<tr>
<td>1328*</td>
<td>Jaume II</td>
<td>King</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1326*</td>
<td>Bernat de Llampaies</td>
<td>apothecary (physician)</td>
<td>Castelló d’Empúries</td>
</tr>
<tr>
<td>1338</td>
<td>Bernat Serra</td>
<td>(alias Metge)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>royal surgeon (physician)</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1348</td>
<td>Ponç Salvador</td>
<td>surgeon’s assistant</td>
<td>Majorca</td>
</tr>
<tr>
<td></td>
<td>Jaume Ferrer</td>
<td>surgeon</td>
<td>Majorca</td>
</tr>
<tr>
<td>1383</td>
<td>Guillemo Ponç</td>
<td>barber</td>
<td>Majorca</td>
</tr>
<tr>
<td></td>
<td>Guillem Ponç</td>
<td>?</td>
<td>Majorca</td>
</tr>
<tr>
<td>1388*</td>
<td>Francesc Moliner, sr.</td>
<td>(alias Metge)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>surgeon (physician)</td>
<td>Valencia</td>
</tr>
<tr>
<td>1399*</td>
<td>Francesc Moliner, jr.</td>
<td>surgeon</td>
<td>Valencia</td>
</tr>
<tr>
<td>1411*</td>
<td>Joan Balcells</td>
<td>clergymen (priest)</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1414*</td>
<td>Pere Riba</td>
<td>apothecary?</td>
<td>Perpignan</td>
</tr>
<tr>
<td>1419*</td>
<td>Francesc Desprat</td>
<td>citizen</td>
<td>Vic</td>
</tr>
<tr>
<td>1430*</td>
<td>Pere Cantarell</td>
<td>surgeon</td>
<td>Vic</td>
</tr>
<tr>
<td>1430*</td>
<td>Jaume de Marcadal</td>
<td>barber</td>
<td>Vic</td>
</tr>
<tr>
<td>1432</td>
<td>Daniel</td>
<td>galley barber</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1435*</td>
<td>Jaume Pol</td>
<td>citizen</td>
<td>Vic</td>
</tr>
<tr>
<td>1436*</td>
<td>Jaume Viila</td>
<td>citizen</td>
<td>Vic</td>
</tr>
<tr>
<td>1471*</td>
<td>Bernat Lanes</td>
<td>surgeon</td>
<td>Vic</td>
</tr>
<tr>
<td>1505*</td>
<td>Antoni Molera</td>
<td>surgeon</td>
<td>Vic</td>
</tr>
<tr>
<td>1546</td>
<td>Rafel Costa</td>
<td>smith</td>
<td>Pollença</td>
</tr>
</tbody>
</table>

* Copy written explicitly in Catalan.

TABLE II
Evidence of the Catalan translation of Arnau’s *Regimen sanitatis* in late medieval libraries

<table>
<thead>
<tr>
<th>date</th>
<th>library</th>
<th>occupation</th>
<th>city</th>
</tr>
</thead>
<tbody>
<tr>
<td>1323*</td>
<td>James II</td>
<td>King</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1326*</td>
<td>Elisenda Montcada</td>
<td>noblewoman</td>
<td>Peralada?</td>
</tr>
<tr>
<td>1341*</td>
<td>Jaume de Pau</td>
<td>citizen</td>
<td>Vic</td>
</tr>
<tr>
<td>1346*</td>
<td>Pere Ferrer</td>
<td>notary</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1361</td>
<td>Bernat de Cabrera</td>
<td>nobleman (royal counsellor)</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1362*</td>
<td>Bernat Verdaguer</td>
<td>clergyman (<em>hospitalarius</em>)</td>
<td>Gerona</td>
</tr>
<tr>
<td>1363</td>
<td>? (Jew)</td>
<td>physician</td>
<td>Roussillon</td>
</tr>
<tr>
<td>1392</td>
<td>Guillem d’Horta</td>
<td>notary</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1406</td>
<td>Bernat de Montmany</td>
<td>citizen</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1408</td>
<td>Pere de Queralt</td>
<td>nobleman</td>
<td>Santa Coloma de Queralt</td>
</tr>
<tr>
<td>1412</td>
<td>Andreu Romeu</td>
<td>citizen</td>
<td>Perpignan</td>
</tr>
<tr>
<td>1423</td>
<td>Ferrer de Gualbes</td>
<td>citizen</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1428</td>
<td>Joan Gener</td>
<td>knight (royal chamberlain)</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1429*</td>
<td>Honorat Miquel</td>
<td>apothecary</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1430*</td>
<td>Pere Cantarell</td>
<td>surgeon</td>
<td>Vic</td>
</tr>
<tr>
<td>1436</td>
<td>Jaume Vila</td>
<td>citizen</td>
<td>Vic</td>
</tr>
<tr>
<td>1439</td>
<td>Bernat Jornet</td>
<td>clergyman (archdeacon)</td>
<td>Majorca</td>
</tr>
<tr>
<td>1464*</td>
<td>Joan Vicenç</td>
<td>surgeon</td>
<td>Barcelona</td>
</tr>
<tr>
<td>1491</td>
<td>Antoni Deslanes</td>
<td>jurist (doctor)</td>
<td>Majorca</td>
</tr>
<tr>
<td>1506</td>
<td>Pere Martí</td>
<td>surgeon (physician)</td>
<td>Valencia</td>
</tr>
</tbody>
</table>

* Copy written explicitly in Catalan.

Templar friars (a copy later owned by the King), to a clergyman (1) and to burghers (3).

As regards Arnau’s *Regiment de sanitat*, the earliest news we have dates from fourteen years after the work had been translated. Table II lists twenty owners documented in the same period. But here the professional distribution of owners is sharply reversed. Owners not involved in the health occupations are in the large majority (15 cases), and include commoners (8), noblemen (4), members of the clergy (2) and the King. Far behind we find doctors (1), surgeons (3) and apothecaries (1).

c. The evidence of the translators
The third and most important source of information about the audience for which these translations were made comes from evidence given by the translators themselves. Guillem Corretger heads his translation of Borgognoni’s *Chirurgia* with a marvelous prologue where his reasons for the translation are explained.30 He begins with an unusually long invocation. Whereas Bernat de Barriac or Berenguer Sarriera chose a simple invocation of God, Corretger invoked the Holy Trinity and provided a veritable profession of faith. As far as I know, nobody has pointed out that he used the Trinity deliberately to establish a necessary imbrication between medicine and surgery. For he allegorized the Trinity, reducing the three persons to two: the Father and the Holy Spirit (medicine), who sent the Son (surgery) to assume human flesh (the material upon which surgeons work) through the Mother of God. The message is clear and agrees with the idea of the work: although medicine and surgery are two different things, they are essentially one and man must believe this firmly, as though it were a dogma of faith.

After this declaration, Corretger explains the extremely deficient situation of surgical practice in the countries of the Crown of Aragon. If he first relied on allegory to justify his translation, he now turns to practical reality. All the country’s surgeons “work more by practice than theory,” that is, more by empirical knowledge than by knowledge of the books of medicine and surgery; in

30 It was published in Karl, “Theodoric der Katalane”, 262 ff. (in an unsatisfactory transcription), and in Contreras, *La difusión medieval*, 61-62. I have transcribed it again in Appendix I.
fact, they are almost oblivious to their subject matter. This is because all book, or at least “the best” of them, such as Teodorico’s work, were written in Latin, a language they do not understand well enough as they “have not learned enough about grammar.” Here, Corretger’s fascination for scholasticism is apparent in his praise of the Latin texts (which are “the best”), a fascination which future copyists of the text would perpetuate by erroneously transforming his name from Guillem into Galiën (Galen), the most venerated authority of scholastic medicine.

According to Corretger, non-Latinist surgeons, even if they do possess the right books, will not be able to reap all benefit from them and “fall into error or confusion through ignorance.” This ignorance is highly prejudicial both for the surgeons themselves (because they are deprived of medical knowledge which could improve their social and economic situation) and for their patients (because even though these patients make the correct choice of coming to surgeons to be cured before going to faith healers or witch doctors, the surgeons might kill them through their ignorance).31

31 Compare the situation described in France by Henri de Mondeville in his Chirurgia (written from 1306 to ca. 1320). Mondeville divides those practising surgery in Paris into: (1) The “students of surgery, who at least know the general principles of medicine and understand the terminology of the art,” for whom a [Latin] treatise like this is especially profitable. (2) Those “illiterates, dolts and complete ignoramuses, who say that despite the opinion of clerk surgeons, with incredible arrogance, they have the innate and hereditary gift of manual operation from immemorial times, transmitted by their ancestors, being these as illiterate as the former; sharing their stupidity, all illiterates, the nobility and today the princes too, and after them all the people, believe in them, and great dangers have arisen from this.” And, finally, (3) “other surgeons just as illiterate, but not as pigheaded, who regret very much not having learned grammar and not knowing the art of surgery, allowing that whatever little knowledge they can acquire will come only from learned surgeons and doctors.” This Latin treatise will be also very profitable for them. Mondeville presents the study of treatises on surgery like his own as the most agreeable and quickest way to acquire knowledge, better than the traditional way in surgeons, “going throughout, as in hard and very dangerous feats of arms than in famous universities, laying oneself open to very serious risks and great want.” See Die Chirurgie des Heinrich von Mondeville (Hermondaville), ed. J.L. Pagel (Berlin, 1892), 11-12; and M.-C. Pouchelle, Corps et chirurgie à l’apogée du Moyen Âge: Savoir et imaginaire du corps chez Henri de Mondeville, chirurgien de Philippe le Bel (Paris, 1983), 27. It is not surprising that French, Occitan, Catalan and English surgeons in particular were soon interested in Mondeville’s treatise, and that they quickly obtained translations into their respective languages. On the Catalan translation, as well as on the treatises on surgery circulating in Catalan in the Late Middle Ages, see my note “Una traducció catalana de la Chirurgia d’Henri de Mondeville” (forthcoming).
Taking account of the gravity of the situation, Corretger decided to translate Borgognoni’s work into the vernacular and to provide the mass of non-Latinate surgeons with the most suitable intellectual and practical tool, a tool that was soon afterward to be refined (esmenat) by an academically trained doctor, Bernat de Barriac, with the intention of bringing it even closer to the aims of Galenism, and of making the explanations simpler, more accessible, and thereby more useful.

We may thus conclude that Corretger’s translation was not simply the fruit of an isolated, personal decision but rather a response to a very specific social and professional demand with which it is immediately connected.\(^{32}\) It formed part of a historical process, which counted on the support of the highest political and social echelons (king, nobles and burghers), and led to the consolidation of a new medical system based on Galenic medical doctrine and no other. Surgeons and other academically untrained practitioners were willingly brought into this new medical system, for they sought to profit from its growing prestige.\(^{33}\) The intellectual and social bridge which enabled this integration was the translation into the vernacular of the most important works of the discipline. Of these writings, Borgognoni’s treatise connected especially well with this new sensibility, which explains why it was selected by Corretger for translation. In the process, it became the first work on medicine and surgery to reach a wider audience and played a fundamental role in the improvement of theoretical training for Catalan-Aragonese surgeons during the period of consolidation of the new medical system.\(^{34}\)

Berenguer Sarriera prefaced his translation of Arnau’s *Regimen sanitatis* with a prologue of similar magnificence.\(^{35}\) Like Corretger, he began with a holy invocation through which, using the legitimising force of religion, he directly praises Galenic medical doctrine and the doctors trained according to it (“the wise doctors”). Due to the grace of God, humans can only act, both physically or

---


\(^{34}\) See note 7.

\(^{35}\) Published by Batllori, *Arnau de Vilanova*, 2: 99-103. I have transcribed it again in the Appendix II.
rationally, thanks to a vital strength or "power," which is bestowed through health which, in turn, can only be guaranteed by Galenic medicine. God himself enlightens doctors to teach other mortals how to stay healthy, but not all doctors are thus enlightened, but only the "wise doctors" trained in natural philosophy ("philosophers") and in possession of a university degree ("masters in medicine"). For the basis of their "enlightenment" is none other than what constitutes the nucleus of Galenic doctrine: complexions and humors. Among all "wise doctors," Sarriera singles out Arnau de Vilanova, whom God himself "had wanted to enlighten," not only among the "masters of medicine," but also among the "philosophers," that is to say among the investigators of natural knowledge.

Despite the fact that both "great lords" and "common people" are equally interested in the art of medicine, which they wish to "understand and put into practice" in order to "live healthily and reach old age naturally," the complexity of university medicine, the great number of available doctrinal texts, together with the other preoccupations or the ignorance of people make it almost impossible to gain access to Galenic medical doctrines in a legitimate manner. This is why Arnau de Vilanova wrote his text as an easily accessible ("clearly ordered") compendium of such knowledge for the use of anyone interested in the matter, although the book was specifically dedicated to his lord and friend James II of Aragon. Here, Berenguer Sarriera informs us of the immediate interest that Arnau's text aroused in its readers. It seems clear that this text, just like Teodorico's treatise, immediately connected with a wide-spread social demand. Both the "great lords" and "common people" wanted accessible versions of academic texts for their own use, written in a language that they could understand.

Our glance at the library records has identified these "great lords" and "common people:" The former were kings and nobles (lay and ecclesiastical), who carried out the "high affairs" of government; the latter were members of the emerging classes of burghers (jurists, public notaries, merchants and other commoners), who made up the urban patriciate. The friendship between James II and Arnau de Vilanova spurred the King's interest in the new medicine and natural philosophy and hastened the consolidation of a new medical system.36 This interest, as we have said

36 See J.A. Paniagua, "Vida de Arnaldo de Vilanova," Archivos Iberoamericanos de Historia de la Medicina 3 (1951), 3-83; idem, "El Maestro Arnau de Vilanova,
before, would soon spread to the rest of the Royal household, to the nobility and to educated commoners.

Indeed, the desire to disseminate Arnau's regimen and its attendant Galenic medical doctrine came from the King's most intimate associate: the Queen.37 It was understood that the best way to achieve this dissemination was to have the work translated into the vernacular. The task called not for an ordinary scribe, but for someone experienced and trained in medicine. The choice fell not on a university-trained doctor but rather on a surgeon with sufficient medical training. This passing over of the many university-trained court physicians was accepted by the aged Sarriera with pride, but also with intellectual and social respect for the "wise doctors ... philosophers and masters in medicine."

Sarriera also tells of the problems he encountered when setting about the translation, problems posed by the novelty and rarity of translations of specialized subjects such as medical texts into the vernacular. The Romance of the times of Sarriera lacked the vocabulary of Latin, which was the exclusive vehicle of medical scholasticism. As a result, the translator had to use his imagination when translating a large number of words and concepts (vocables e enteniments) common in the Latin medical literature. Foreseeing the modifications his text would undergo in the course of its transmission, Sarriera in fact asked his readers not to reject his translation if they find mistakes or imprecisions, but rather to improve it by correcting it with the original Latin.

Apart from small alterations made to the text as a result of the translation itself, Sarriera also found it necessary to make other modifications which were not required by linguistic limitations but...
which were aimed at the book’s specific readership. Thus he added titles in the margins to summarize the content of the work and to make it easier to use. He indicated that he had done this because he understood that those who had to use books in Romance would not be sufficiently familiar with the structure of Latin academic works on medicine to do without such aids. Sarriera tells us three things that he evidently accepts as commonplace: (a) that there were people at the time who used medical books in Romance; (b) that such people needed or preferred these books (“they have to help themselves” with them) and; (c) that this occurred because the people had not studied or read enough academic works. Surviving manuscripts and library inventories make clear whom Sarriera was here thinking of: royalty (such as the Queen Blanche), noblemen (“great lords”), and members of the urban patriciate (“common people”).

4. Conclusion

The two vernacular texts under study are very significant in terms of their audiences. One addressed surgeons and barbers, practitioners with no academic training but interested in connecting with a new kind of medicine which had proven its practical, economic and social efficiency. The other was aimed at noblemen and the burghers, groups with a growing interest in Galenic medicine and “natural science” in general, who preferred reading in the vernacular and who therefore sponsored a large part of these translations. In studying the vernacularization of medieval science we must keep in mind this diversity of audiences and interests, which only becomes visible through a simultaneous analysis of the texts, of their manuscripts, and of the archival documentation. An awareness of this diversity cannot help but contribute to our understanding of the birth and consolidation of a new medical system in late medieval Latin Europe.

---

38 On the influence of natural philosophy in the literary works of some authors from that social group, see L. Badia, Textos catalans tardomedievals i ciència de natures (Barcelona, 1996).
This study analyzes the dissemination and readership of two medieval medical works in Catalan. Combining the use of diverse sources such as the manuscripts themselves, post-mortem inventories, and the prologues written by the translators, the study shows how the diffusion of these works exemplifies the two main audiences to which vernacular texts were addressed. These were, on the one hand, literate but not Latinate surgeons and other practitioners interested in the new medicine emanating from the emerging universities; and on the other, nobles and burghers interested in issues of health and disease and in natural philosophy in general. The framework for the study is the general process of consolidation of the new medical system which developed in late medieval Latin Europe.

APPENDIX

I

TEODORICO BORGOGNONI, *Cirurgia*, Catalan tr. by GUILLEM CORRETGER, surgeon, student of surgery (ca. 1302-1304), and corr. by BERNAT DE BARRIAC, royal physician (ca. 1310-1311).

Preface of Guillem Corretger

En nom de la senta e no departible Trinitat ho essència, so és assaber, lo Pare, el Fil e'l Sent Sperit, a qual Trinitat regonec e creu ésser .III. persones e .I. Déu, e en nom de la gloriosa Mare sua, en la qual la persona del Pare e del Sant Sperit tramès la persona del Fil pendre carn humana — la qual persona del Fyl nos pertí per essència de la persona del Pare e del Sant Esperit—, comens jo, Guillem Correger, de Mayorcha, aprenent en la art de cirurgia, a translatar de lati en romans catalanesch aquesta obra de cirurgia, cor en tots feyts deu hom apelar la ajuda del devinal Nom e la gràcia del Sant Sperit que fassa lo comensament e la migania e la fin acorder, cor sen<s> la ajuda de Déu res de ben no pot ésser feyt.

Per assò, jo veent que alcuna partida de los surgians qui són en la sey<n>oria del noble En Jacme, per la gràcia de Déu, rey d'Aragó, no entenen los vocables latins, cor tots los hômens
d'aquestes nostres encontrades obren més per pràctica que per teòrica, cor aquella quax de tot meyns conexen, e assò lus esdevén cor tots los libres de cirurgia, los meylors, són compostz en latin, e jassia que és los agen emperò no poden trer enteniment acabat cor no aprenqueren tant de gramàtica que puguen saber la exposiçió de los vocables latins, e per assò caen en error ho en confusió per ignorància, e axí no tant solament nou a és la lur ignorància ans és damnosa a axí con per mort a molts qui cobesegen ésser curatz per ells de nafres o de plagues o d'altres malauties a les quals lo humanal cors és sotmès; per assò jo propòs, Nostre Sey<no acor atorgant a mi gràcia, de complir explençant la obra complida per frare Thederich, de l'orde dels Preycadors, la qual obra tramès quant planerament l'ac complida a l'honorable pare, per la divinal gràcia, N'Andreu, bisbe de València, d'aquel matex orde.

(Paris, Bibliothèque Nationale, ms Esp. 212, f. 1v)

II

ARNAU DE VILANOVA, Regiment de sanitat per al molt alt senyor En Jacme II, rey d'Aragó, Catalan tr. by BERENGER SARRIERA, roya surgeon (ca. 1308-1310).

Preface of Berenguer Sarrirera

Con Déus totpoderós, ple de misericòrdia, aja creat l'om, e aquel no aya neguna carrera de fer neguna cosa ne aya nuyla rahó sinó per poder, e poder no sia sinó <per> sanitat, e sanitat no és sinó per egualtat de complecció, e egualtat de complecció no és sinó per temprament de les humors; e per ço Nostra Senyor Déus, con hac creat l'om, volc-lo amar e espirar de gràcia sobre tots los animals, e féu-lo a la sua semblança, e volc-li donar remey que posqués aver temprament a les humòs per conservacion de sanitat, [e a] aquesta conservacion ha vulgut il·luminar los savis metges, e, entre los altres filòsofs e mestres en medicina, ha vulgut il·luminar lo molt savi maestre Arnau de Vilanova sobre los altres mestres de medicina, a conèixer e a aordonar en quantes maneres sanitat és conservada.

E per ço con l'art de medicina és fort longa, e'ls savis metges entichs ho agen longuament escrit (axí que'ls grans senyors qui an
los grans neguocis, ne encare lo poble comú, bonament no o poden entendre), lo dit maestre Arnau, a honor del molt alt senyor En Jacme seguon, rey d’Araguó, ha ordonat aquest libre per donar doctrina de viure san e de venir a natural velea a aquels qui ho volran entendra e metre en obra.

E per ço que aquest Regiment, qui tan planament és ordonat, pusca tenir o fer profit a aquels qui no entenen latí, és vengut a plaer a la molt alta senyora dona Na Blanca, per la gràcia de Déu, reyna d’Araguó, que ha manat a mi, Berenguer Sariera, surgian, que trelat aquest libre de latí en romanç, e yo, per satisfier a son manament, son-me entramès de tresladar aquest libre. E prec los legidors d’aquest que, si per Ventura en lo romanç ho en la sentència del libre trobaven nuyla cosa qui ls semblàs no raonable, que ans que ho reprenguesen, que ho corregisen ab aquel del latí, per ço cor moltz vocables e [en]tenimentz ha en los libres de medicina que a penes se poden metre en romanç.

Emperò jo vuyl enadir en aquest libre alsunes notes per los marges en manera de rúblikes, per ço que aquels qui legiran en aquest libre pusquen pus leugerament trobar la proprietat de l’ajudament ho del noyment de les coses qui ací són nomenades per regiment de sanitat, per ço cor aquels qui s’an ajudar [a]b los libres qui són en romanç no poden aver estudiatz tantz libres que leugerament pusquen trobar la proprietat del regiment dejús escrit.

(Madrid, Biblioteca Nacional, ms 10078, ff. 3-4)