

Medical 'Emplotment' and Plotting Medicine: Health and Disease in Late Medieval Portuguese Chronicles

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Summary. In recent years, historians of medicine in the Middle Ages have tried to decode narratives of health and illness in their original context, attempting to uncover the meanings they may have had for the original audiences, rather than simply using these narratives to plot disease incidence. This article is a study of health, illness and traumatic injury in the chronicles of Fernão Lopes, who wrote in Portugal in the first half of the fifteenth century, focusing on the events of 1383–5, a period of civil war and foreign invasion. Arguing that Lopes made use of a series of medical 'emplotments' to construct his history, this study approaches medieval medicine in as broad a sense as possible engaging with the role of moral and bodily health in a dramatic tale of political ambition and national resurgence.

Keywords: medieval medicine; narrative theory; chronicles; Portugal; moral health

This study of 'emplotment' begins with a plot. In the late fourteenth century, an important citizen of Lisbon and royal chancellor, Álvaro Pais, sought permission from King Fernando to retire from service due to ill-health. Álvaro is described as 'being very ill with gout' but also politically ill at ease: 'his pain was not so great as the disgust that grew in his heart at the dishonourable behaviour of the king and the bad reputation of the queen'. He wished to remove himself from the machinations of Fernando's wife Leonor Teles at the royal court but found it hard to relinquish power, obliging the city councillors to consult with him in his own home since his illness prevented him from attending their meetings. After the premature death of King Fernando on 22 October 1383, Álvaro's disgust at the political situation worsened forcing him to act in the best interests of his fellow citizens.¹

Our main source for these events is the chronicle of King João I of Portugal (1385–1433), written by Fernão Lopes (d. c. 1459). Commissioned in 1433 by João I's son Duarte (1433–8) to write a series of royal chronicles, Lopes' task was effectively to justify João's usurpation of the throne in 1383–5.² Lopes pinpointed the start of the uprising that led to João's rise to power in the moral dilemma faced by the sick Álvaro Pais.

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¹Lopes 1963–8, vol. 1, pp. 11–12. All translations are mine. Note that consistency in names has been attempted in accordance with Portuguese and Spanish conventions. However, the names of Leonor Teles, Maria Teles and Inês de Castro, all women of Castilian extraction, are spelled as they normally are in Portuguese historiography.

²The chronicles are Lopes 1963–8, Lopes 2007 and Lopes 2004. Translated extracts can be found in Lomax and Oakley (eds) 1988. For more on Lopes, see Amado 1991. I am currently involved in an international project headed by Teresa Amado and Âmelia Hutchinson to translate all three chronicles in their entirety into English. They are due to be published in 2014 by Boydell.



Fig. 1 Portugal

Previously Lopes had told us how the death of King Fernando had left a young heiress on the throne—Beatriz. She was married to Juan I of Castile under terms that allowed her mother, Leonor Teles, to rule Portugal until Beatriz’s first child came of age (see genealogical table). According to Lopes, this scandalised observers such as Álvaro since Leonor was believed to be having an affair with nobleman João Fernandes Andeiro. There was also the problem that Juan I was on his way to claim the throne in his wife’s name. Álvaro decided to conspire to kill Andeiro, arranging for the dead king’s illegitimate brother João, master of the military order of Avis, to visit him in his house since Álvaro was too ill to go out himself. He promised João of Avis the support of the city should he dispose of Andeiro. On 6 December 1383, João killed Andeiro, the city took up arms,

and Álvaro, despite his gout, 'was ready and armed ... riding a horse, which he had not done for years'.³ Eventually, after months of conflict, João I secured his place on the throne by defeating Castile at the battle of Aljubarotta on 14 August 1385.⁴

The above story is justly famous in Portuguese history but it has not been questioned why Lopes emphasised the ill-health of the key figure, Álvaro Pais, to such an extent. Did Álvaro's gout matter in Lopes' depiction of his deeds and character? The following study will argue that medieval chroniclers like Lopes used ill-health, sudden death and trauma as crucial narrative devices to frame their stories. There will be detailed analysis of Álvaro's gout and similar episodes in Lopes' chronicles, especially the illness of King Fernando whose 'dishonourable behaviour' and early death led to civil unrest in 1383. It will be argued that a narrative approach to the history of medicine can greatly improve our understanding of health and disease in past societies as well as providing insight into medical historiography.

A Narrative Approach to the History of Medicine

The paucity of sources for late medieval Portugal makes it difficult to challenge Fernão Lopes' representation of events in 1383. Historians cast doubts on the role of Álvaro Pais in the revolt, which is now linked to other social upheavals occurring across Europe in the wake of the Black Death, and they use archival documents to test Lopes' veracity.⁵ Rarely do they recognise that this pursuit of the 'truth' is problematic as it does not take into account why and how Lopes staged events the way he did. For example, it is possible to argue that Lopes used concepts of health and disease not only as 'real' facts of his story but as tools to construct a narrative that reflects specific ideological concerns. Rather than being incidental to the story given above, Álvaro's debility and subsequent vigour were crucial to the narrative. A clear link was made between Álvaro's physical health and his moral state; it was not just that he used illness as an excuse for retirement but that his disgust at the queen's behaviour corresponded to his physical pain. The illness also accentuated the gravity of the political situation. Such a link was not uncommon in medieval chronicles, in which 'illness' can often act as a political cipher. For example, in the early thirteenth-century chronicle by Geoffroi de Villehardouin, an elderly, blind Doge of Venice took the cross and later played an active role in the crusade which ended up sacking Constantinople in 1204. The question we should pursue is not whether the Doge really was blind, but how Villehardouin contrasted the Doge's commitment to the crusade, despite his physical condition, to the scandalous failure of others to turn up at all.⁶

Analysing the details of such passages as plot devices does not mean that they do not refer to events that took place. Nonetheless, as unsettling as it sometimes is, the post-modern insistence that we cannot 'know' or even 'reconstruct' the past, and even more unnervingly, that we actually create 'the past' through our interpretations, needs to be taken seriously by historians of medicine and the body. Although the concept of the 'social construction' of sickness and healing has become the predominant theoretical framework of medical history in recent years, and medical historians are becoming aware

³Lopes 1963–8, vol. 1, p. 24.

⁴Russell 1955; Gomes 2005; Coelho 2005.

⁵Arnaut 1959; Coelho 1981; Moreno 1983; Serrão 1985; Homem 1983–4; Viegas 1996.

⁶Villehardouin 1963, pp. 44, 122–3.

of how their sources help to construct the past, they are less aware of how they themselves write their own narratives.⁷ Historians and chroniclers alike use the same literary methods to make stories significant to readers: certain styles and tones, carefully selected examples, culturally relevant metaphors, almost indiscernible shifts in pace go together to make a piece readable. Analysis of these techniques is known as narrative theory or narratology. Well established in the field of literary criticism, it became known to historians through the controversial work of Hayden White on metahistorical techniques.⁸ Although some medievalists are critical of White's attitude towards chronicles, many have found the concept of 'emplotment' that he developed quite useful.⁹ Historians make their material meaningful to their audience by 'plotting' it in line with contemporary cultural modes such as romance, tragedy, comedy or satire. Amélia Hutchinson applied this approach to the chronicles of Fernão Lopes, arguing convincingly that Lopes structured João of Avis' rise to power by using motifs drawn from romance, comparing him to King Arthur, Christ and Moses, and his supporters to the Knights of the Round Table and the Apostles.¹⁰

What will be argued in the rest of this paper is that medieval European chroniclers, like Fernão Lopes, could also write in a 'medical' mode. By this is meant that they used health, healing, trauma and disease as framing devices for political drama and as a means of expressing their opinion of the event or people concerned. Exploring how chroniclers did this can illuminate our understanding of the significance of health and disease in medieval culture. However, it must be done with an equivalent understanding of how medical historians have constructed their own narrative of health and disease.

As pointed out earlier, medical historians generally do not reflect on their own narrative techniques.¹¹ John Burnham's study of medical historiography is unusual in that it takes a thematic look at the various 'dramas' used by historians: stories of healers, diseases and patients.¹² This is as close as medical historians come to realising that, by and large, they emplot their histories in romance or tragic mode. In the former mode fall the studies of practitioners and institutions engaged in combating disease, as well as the trials of those suffering illness and negotiating treatment.¹³ It also includes the many anti-hero stories of disease itself.¹⁴ Medical history written in the tragic mode constructs a saga of ignorance, error, malpractice and inequality as in the controversial *Bad Medicine* by David Wootton.¹⁵ Where there has been much more reflection on narratives of illness, including how they are framed or 'emplotted' is in the burgeoning field of medical humanities. Here researchers view literature as a fundamental route into the minds of the sick, consider the writing of fiction and autobiography as therapeutic to practitioners and patients alike, and in recent years, mainly in the United States, have developed a form of clinical practice known as narrative medicine. This trains medical students in narrative theory, encouraging them to become more effective practitioners by listening to patients intently and decoding their words: learning from 'silences, metaphors, genres and allusions' what they cannot learn from X-rays or scans.¹⁶

⁷Harley 1999; Jordanova in Huisman and Harley Warner (eds) 2006.

⁸White 1973, 1987; Munslow 2007.

⁹Spiegel 1997; Partner (ed.) 2005.

¹⁰Hutchinson 2002, 2004.

¹¹However, for a reflection on style, see Loudon 1997.

¹²Burnham 2005.

¹³An excellent recent example is Henderson 2006.

¹⁴For example, Benedictow 2004.

¹⁵Wootton 2006. See <http://www.badmedicine.co.uk> for reviews, accessed 15 April 2009.

¹⁶Charon 2006, p. 107. See also Brody 2003.

Described by Flurin Condrau as 'the major methodological refinement of patients' history' over the last 20 years, narrative medicine has had an impact on some medievalists who now believe that 'listening' intently to the language and imagery of health and medicine in narrative texts of all kinds can help us improve our understanding of attitudes towards illness and healing during the Middle Ages.¹⁷ Historians of medieval medicine used not to be interested in how medicine and disease were represented in their sources. This was particularly the case with historians of the Black Death who exploited chronicles as transparent accounts of the spread of the plague; using them to 'plot' mortality rates, responses and consequences with very little consideration of how health and disease were 'emplotted' elsewhere in these narratives. Modern studies, on the other hand, demonstrate a much sharper awareness of context and methodology, and have problematised the disease in both medieval and modern times.¹⁸ This is particularly significant to the chronicles of Fernão Lopes, in which outbreaks of pestilence should not be taken at face value due to their political and symbolic significance. For example, in 1384 during the siege of Lisbon by Juan I of Castile, plague broke out only amongst the Castilians, not even affecting the Portuguese prisoners-of-war, and notably affecting Juan's wife Queen Beatriz, former Portuguese princess, thus firmly relocating her to the opposite camp.¹⁹ Attitudes towards medical practitioners can also be culturally loaded in medieval chronicles. For example, Carole Rawcliffe explores a story in the *Chronicon angliae* concerning the Dominican friar Palange Wyk, physician of Alice Perrers, mistress of Edward III of England, who was accused of black magic once she fell from grace in 1376, setting it in the context of medical and ecclesiastical stereotyping. She understands that the story is not a straightforward account of 'reality', but a representation of anxieties about the relationship between medical practice and political power.²⁰ The work of Peregrine Horden on early medieval chronicles also decodes the narratives to reveal underlying anxieties about disease and the community.²¹ Here, the model followed may be that of studies of hagiographical accounts of healing, which over the last 20 years have increasingly shown how medieval miracles can be decoded as complex guides to contemporary health care and religious practice.²² Similarly, analysis of the narrative structures and imagery of seemingly straightforward surgical case histories can reveal underlying religious beliefs and practices.²³ These examples show that all genres of medieval narrative should be understood as multi-layered, carefully constructed representations of anxieties and beliefs, often written a long time afterwards with specific political, intellectual or religious intent.

Health and Disease in the Chronicles of Fernão Lopes

The intention now is to apply some of these narrative approaches to the chronicles of Fernão Lopes, providing a preliminary analysis of how illness functions in these works, but focusing on one significant example of medical emplotment: the illness of King

¹⁷Condrau 2007, p. 527.

¹⁸Cohn 2002; Wray 2004.

¹⁹Lopes 1963–8, vol. 1, pp. 309–15.

²⁰Rawcliffe 1988, p. 73, note 56; Rawcliffe 1995, p. 91.

²¹Horden in Ranger and Slack (eds) 1992; Horden in Sheard and Power (eds) 2000.

²²Flint 1989; Mattoso 1993; Ziegler 1999; Pilsworth 2000; McCleery in Cooper and Gregory (eds) 2005.

²³Jones in García Ballester *et al.* (eds) 1994; Jones 2009; Álvarez Millán 1999.

Fernando, whose death cast the kingdom of Portugal into crisis in 1383. Lopes' chronicles have not been much studied by medical historians but as early as 1911, João de Meira argued that Lopes' pestilence of 1384 surely indicated bubonic plague.²⁴ In 1909, Júlio Dantas applied then-current theories of degeneracy to represent Lopes' King Pedro as an epileptic homosexual with a stutter, and in 1924 Asdrúbal de Aguiar published a deeply negative study of Fernando and Leonor which similarly argued for their degeneracy.²⁵ A more widely accepted theory is that Fernando suffered from tuberculosis, a diagnosis first suggested in the eighteenth century by the Cistercian chronicler Manuel dos Santos, but Fernando's most recent biographer suggests that he may have been poisoned.²⁶ In contrast, most medical historians are now reluctant to diagnose past health problems retrospectively, preferring instead to focus on how they were explained and treated in their own context.²⁷

It is important to note that many chroniclers do not have to mention health or disease at all. The only other Portuguese chronicle for the events of 1383–5 is the anonymous *Crónica do Condestabre* (written in the 1430s), which tells the deeds of Nuno Álvares Pereira, João I's staunchest supporter.²⁸ Fernão Lopes used this work extensively as a source, but in the *Crónica do Condestabre* battle injuries receive little attention and there is no mention of Fernando's illness until a few lines before his death.²⁹ Similarly, in the chronicles of the Castilian Pedro López de Ayala, another of Lopes' sources, illness and disease are rarely elaborated on to any great extent, and Lopes pounced on the few examples with great glee. For example, López de Ayala's claim that Pedro I of Castile persuaded a physician to murder his own patient, one of the king's political opponents, fitted perfectly into Lopes' extended contrast between this Castilian king, whom Lopes deemed cruel and unwise, and Portugal's own Pedro I, deemed wise and strong.³⁰ This contrast is crucial because subsequently Fernando of Portugal chose to support Pedro of Castile in his conflict against the latter's illegitimate brother, the future Enrique II, thus revealing his own lack of wisdom and moral judgement, and justifying the succession of his own illegitimate brother, João of Avis. As we shall see, it is possible also to connect Fernando's illness to his lack of judgement.

Neither López de Ayala, nor Jean Froissart, another contemporary though much more distant observer of Portuguese events, suggest that Fernando was ill for much more than a year before his death, and they do not comment on the illness beyond its immediate political consequences.³¹ Froissart does have quite a lot to say about medicine, as he wrote during the reign of the mad Charles VI of France.³² However, the other major Portuguese chronicler of the late Middle Ages, Rui de Pina (d. 1522), is rather bland in matters of health, except in a few striking cases.³³ It is striking how limited his discussion

²⁴Meira 1911; Meira 1912.

²⁵Dantas 1909; Aguiar 1924; Duarte 2005, pp. 22–4.

²⁶Santos 1973–88, p. 401; Gomes 2005, pp. 159–75.

²⁷Arrizabalaga 2002; Cunningham 2002.

²⁸Anon. 1991.

²⁹On Lopes' sources, see Amado 1991.

³⁰López de Ayala 1991, p. 120; Lopes 2007, p. 81.

³¹López de Ayala 1991, pp. 542, 549; Froissart 1967, vol. 9, p. 493.

³²Guenée 2004.

³³For example, Pina discusses the sudden deaths of Duarte in 1438 (plague, fever or 'sadness') and Queens Leonor and Isabel in 1444 and 1455 (perhaps poison). He was also interested in royal fertility, suggesting that Afonso V and his wife's difficulties in conceiving a son were removed once her emerald ring, which had the virtue of preserving chastity, shattered on her finger. See Pina 1977, pp. 572–4, 768–9; McCleery 2009.

of royal health is, even for João II under whom he held a privileged position as royal scribe. Perhaps Lopes' distance from events enabled him to develop a more sophisticated interpretation of health, disease and injury. Or perhaps there were other factors, such as his son Martinho being a royal physician.³⁴

If we place health and disease in as broad as possible a spectrum, which also encompasses birth, death and attitudes towards both the body and the soul, we can get some idea of the value of Fernão Lopes' writing to the history of medicine and the role of health and disease in his construction of history. Lopes' range of interests includes pregnancy and children; physical and psychological characteristics; the sufferings of those tortured, executed and murdered; food shortages and epidemics; battle injuries and emotional stress during attacks. Some of these episodes could be explained as fine examples of a renaissance scholar at work, acutely aware of humanist principles. Human beings matter in these chronicles, whether it is a case of the four year-old princess whom King Duarte is said to have refused to marry lest over the next nine or ten years she become blind, leprous or paralysed; or that of the pregnant woman lowered to safety from a besieged tower in a basket; the innocent young hostages whose throats were cut because their father would not surrender his castle to Castile; or the two young men who died fighting for Portugal, described respectively as 'small but perfectly formed', and having 'one of the most ... beautiful man's bodies in the kingdom'.³⁵ The physical form of people intrigued Lopes: King Pedro of Portugal had a stutter; Álvaro Pais, our gouty citizen of Lisbon, was bald; and Enrique II of Castile was red-haired, and surely we should take these descriptions at face value.³⁶ However, the physical ordeals endured by people add suspense to the narrative and are much less straightforward to interpret.

Some of these violent passages are celebrated. For example, the graphic murder of Maria Teles (the sister of Leonor, Fernando's queen), killed by her husband the Infante João, another ambitious illegitimate son of Pedro I. Lopes secures sympathy for Maria by describing her exposed white body (*seu mui alvo corpo foi descuberto*), her pitiful tears and cries, and her horrendous injuries: stabbed between the shoulder and breast near the heart and in the groin.³⁷ An even more famous death was João Fernandes Andeiro's: an action-filled scene as suits a murder which threw Portugal into civil war. João of Avis, the future king, first stabbed Andeiro in the head with a short knife: 'however, the wound was not of a size that could kill should there be no more'. Realising this, the attackers threatened Andeiro with swords as he tried to flee to the queen's chamber. Stabbed a second time with a rapier he fell dead to the ground and João forbade anyone from injuring him further.³⁸

On one level, these murders are straightforward, moving the narrative on in dramatic fashion; but on another level Lopes used them for his main task to justify the usurpation of João I. His choice of language established Maria's innocence ('her very white body'), in contrast to the political manoeuvrings of her sister Queen Leonor, and painted a very negative picture of Maria's husband, the Infante João, whose claim to the throne was arguably much better than that of João of Avis. The latter's chivalric treatment of the dead Andeiro greatly enhanced the image of Lopes' hero. For a medical historian, there is yet a further

³⁴Duarte 2005, p. 216.

³⁵Lopes 1963–8, vol. 2, pp. 40, 357, 367–8, 446.

³⁶Lopes 2004, pp. 85, 246; Lopes 1963–8, vol. 1, pp. 50–1.

³⁷Lopes 2004, pp. 369–73.

³⁸Lopes 1963–8, vol. 1, pp. 19–22.

level of analysis. Like many writers of medieval literature, Lopes appears to have a practical understanding of what it took to kill somebody, and often mentions the severity of wounds.³⁹ Injuries in a battle near Vila Viçosa in 1384 were so bad that no surgeon could treat them, and during the naval conflicts which took place in the Tagus estuary in 1384, Rui Pereira suffered a fatal wound from a crossbow bolt because he raised his visor.

Around the same time, Alfonso Gutierrez de Padilla got four bolts in the face but continued fighting, and was then hit in the mouth with another which knocked him overboard. Later in the narrative, another individual was injured so badly that blood poured from all orifices, including 'the shameful parts below'.⁴⁰ This awareness of the bloodiness of warfare means that when Lopes refers to the absence of wounds or the unlikely survival of the injured, it surely has moral significance. The heroic Nuno Álvares Pereira was apparently protected from great injury; he was allowed to be ill for a while but only endured slight wounds, much as James Bond does today.⁴¹ Many of the dead at the battle of Aljubarrota in 1385 appear to have no wounds at all, thus emphasising the righteous victory of the Portuguese.⁴² Lopes knew that wounding was never simply physical, a point he made with a bitter sense of humour. Suffering from a small, probably poisoned, arrow wound in the upper arm, Rui Mendes de Vasconcelos was convinced that he was going to die; King João tried to reassure him, recommending and demonstrating the therapeutic drinking of urine; the man however could not be persuaded and died shortly afterwards.⁴³

It is possible that the spiritual dimension of wounding attracted Lopes to a healing theme. The sufferings of the aforementioned Rui Pereira, shot in the face while fighting for his country, are compared to those of Christ, and the immense struggle of João of Avis to save Portugal from Castilian invasion was also presented in messianic terms.⁴⁴ The first coins minted by João I were believed to have healing power, and the chronicles are saturated with sermons and stories of pilgrimage, portents and prophecies.⁴⁵ It should be remembered that the events of 1383–5 took place within the context of the schism between the popes of Rome and Avignon, which began in 1378 and caused havoc to the ecclesiastical and political fabric of Portugal. Lopes represented João I as a divinely ordained hero chosen to heal the rift that had opened up in Portugal. Many of his examples of heroic and beautiful deaths serve to underline the chivalric and courteous nature of the Portuguese people in contrast to the conniving and discourteous Castilians and treacherous and weak Portuguese, such as King Fernando and Queen Leonor. These episodes cannot simply be taken at face value, as they are cleverly crafted examples of Lopes' narrative style, showing evidence of medical 'emplotment', taken in its broadest sense.

The Illness of King Fernando

A more focused medical plot developed by Fernão Lopes is the illness of King Fernando. Fernando is not the only king whose health is of interest to Fernão Lopes. Both Juan I and Enrique II of Castile were ill from time to time, and usually these illnesses were presented as pivotal to

³⁹Citrome 2007; McCracken 2003.

⁴⁰Lopes 1963–8, vol. 1, pp. 194–5, 263, 278; vol. 2, p. 27. Alfonso Gutiérrez de Padilla was a Castilian fighting on the Portuguese side.

⁴¹Lopes 2004, p. 485 (where Nuno's virility and endurance are also compared to King Fernando's physical weakness); Lopes 1963–8, vol. 2, pp. 149, 353.

⁴²Lopes 1963–8, vol. 2, p. 116.

⁴³Lopes 1963–8, vol. 2, p. 247.

⁴⁴Ventura 1992.

⁴⁵Lopes 1963–8, vol. 1, p. 101.

the story.⁴⁶ For example, Juan's death after a fall from a horse in 1390 brought closure of the kind that Hayden White argues is essential for full historical narrativity.⁴⁷ Lopes copied the account of Juan's death from Pedro López de Ayala, including the detail that the Archbishop of Toledo tried to cover it up by erecting a tent around the body and calling in physicians as if the injury were treatable. However, he also appears to link it to an event in the first part of the chronicle when a Castilian herald bearing the combined coat of arms of Portugal and Castile (a result of Juan and Beatriz's marriage) fell off his horse, leading to a prophecy that Castile would never rule Portugal, which later came to pass with Juan's early death.⁴⁸ It is therefore not surprising that Lopes mentioned Fernando's illness at frequent intervals and made it politically important. However, rather than just a feature of the period before his death, the illness formed a backdrop to events as far back as 1376.

Lopes first described Fernando as unlikely to live a long life in the context of his half-brother João's marriage to Queen Leonor's sister Maria Teles, Maria's murder, and João's exile to Castile, events datable to the period 1376–80.⁴⁹ João was the fruit of Pedro I of Portugal's possible clandestine marriage to Inês de Castro, herself murdered in 1355, and therefore a more suitable heir to the throne than his younger and definitely illegitimate half-brother João of Avis. Lopes presented Fernando's illness as pivotal to João's career, since Leonor became jealous that her sister might become queen instead of her and suggested instead that João marry her own daughter, his niece. He disposed of Maria but Leonor then decided that her daughter should marry in Castile so that she herself could remain in power. Thus the stage was set for the treaty with Juan I and Portugal was on the path to civil war, none of which would have happened without the royal health scare.

In later chapters, Lopes clearly relates Fernando's debilitating illness to his weak kingship. It is not just that he was unable to lead his army, but in contrast to the sick Álvaro Pais he was singularly unable to make decisions. Perhaps the most striking example of this was when English soldiers billeted in Lisbon ran amok and cut a baby in half while in its mother's arms. The family took the corpse to Fernando seeking justice, but he could only pass the matter on to the Earl of Cambridge, nominally responsible for the English troops.⁵⁰ A medieval audience surely would have seen a parallel between Fernando and King Solomon who ensured that a baby was not cut in half! The link between Fernando's health and his disastrous involvement in the Hundred Years War on the English side can also be seen in a joke made about how Fernando had been pregnant with the English for nine months and then given birth to them.⁵¹ Fernando was unable to defend his kingdom, unable to produce a male heir, and not even able to accompany his daughter to the border with Castile in the summer of 1383, because he was too sick.⁵² All the preparations for the treaty with Castile and the wedding between Beatriz and Juan I were overshadowed by concerns about Fernando's illness. By focusing on the illness, Lopes builds up tension about the treaty, since without the mortal illness it would be rendered invalid by the birth of heirs whom Fernando could still hope to have.

One could argue that all the tension must surely have been 'real' since Fernando died prematurely at not quite 38 years old. However, there are no independent sources for the

⁴⁶Lopes 2004, p. 545; Lopes 1963–8, vol. 2, pp. 61, 82, 108–9, 266–7.

⁴⁷White 1987, pp. 1–25.

⁴⁸Lopes 1963–8, vol. 1, p. 109; vol. 2, pp. 318–19; López de Ayala 1991, pp. 695–6.

⁴⁹Lopes 2004, pp. 355–84.

⁵⁰Lopes 2004, p. 466.

⁵¹Lopes 2004, p. 464.

⁵²Lopes 2004, p. 559.

chronic nature of his illness; no other sources mention an illness before 1382–3, and some manuscripts of Lopes' chronicle make Fernando as old as 53 when he died.⁵³ It is possible that Fernando's grant of property in Santarém to his blood-letter in 1376 indicates that he was indeed ill as early as this.⁵⁴ However, this does not necessarily follow since most Portuguese kings rewarded physicians, barbers and surgeons throughout their reigns.⁵⁵ There is also no reason why the representation of a physician on Fernando's tomb should be connected to his death as Rita Costa Gomes suggests, theorising that he was killed through poison or malpractice.⁵⁶ It is possible that the text of an earlier marriage treaty betrothing Beatriz to an illegitimate son of Enrique II of Castile in 1376 suggests that Fernando was unlikely to see the children reach the age of majority or have more children of his own, but this is uncertain.⁵⁷ The problem is that Lopes says very little about what was actually wrong with Fernando. The only royal symptoms are *door* (used to describe all pain and suffering throughout the three chronicles) and *eibado de doores* ('overwhelmed by pains'), the latter strangely translated by Lomax and Oakley as 'his belly was swollen painfully'.⁵⁸ There is very little to go on for a physical diagnosis, and it is much more fruitful to speculate on the connection between the illness and Fernando's relationship with his wife.

A major theme of Lopes' 'trilogy' is the nature of marriage: inappropriate and badly-arranged marriages are disastrous, and well-organised, appropriate ones are beneficial. Not surprisingly, Leonor and Fernando's marriage falls into the first category. When they met, Leonor was married to someone else, and Fernando was supposed to marry a Castilian princess. As a provincial noblewoman Leonor was not a suitable queen. Lopes made citizens of Lisbon strongly critical of the secrecy surrounding the liaison, its legality, and the rejection of the Castilian marriage. According to Lopes, both Lisbonenses and Portuguese exiled in Castile claimed that Leonor bewitched Fernando.⁵⁹ However, in order to explain Fernando's choice, Lopes also resorted to a language which Amélia Hutchinson describes as made up of 'metaphors verging on metonymies and synecdoches from the field of disease'.⁶⁰ Thus, Fernando was 'wounded' (*ferido*) by his love for Leonor, each day his 'sore' (*chagua*) increased, and indeed he suffered 'pain' (*door*). It is possible to go further than Hutchinson and describe the king's passion as a form of lovesickness, as described in medical treatises of the period, on which Lopes must have based the following:

all men in love suffer from a form of madness, and this is ... because the virtue of judgement, which is the empress of all the other powers of the soul concerned with sensory matters, is so sick in such men that it does not judge the object of desire as it is but as it appears to it; for it judges the ugly to be beautiful, and that which causes harm to be beneficial. And therefore all judgement of reason is overturned concerning such an object, so much so that advice on any other thing will be well received, but when it

⁵³See older edition of the text: Lopes 1989, p. 476.

⁵⁴Arquivos Nacionais da Torre do Tombo (hereafter ANTT), *Chancelaria de D. Fernando*, bk. 1, fol. 173.

⁵⁵Fernando rewarded medical practitioners in 1373, 1381 and 1382, and sought papal preferment for another in 1378. João I made grants to his physicians or sought preferment for them in 1384, 1388, 1391, 1418 and 1423, and household records (c. 1400) show that he maintained a number of practitioners. See ANTT, *Chancelaria de D. Fernando*, bk. 1, fol. 121; bk. 3, fols 2^v, 31^v; *Chancelaria de D. João I*,

bk. 2, fols 37, 62^v; bk. 3, fol. 170; bk. 4, fol. 73^v; Dias (ed.) 2004, pp. 35, 69, 132–3; Faro (ed.) 1965, pp. 66–117; Costa (ed.) 1968–70, vol. 2, p. 32; Sá (ed.) 1966–2003, vol. 3, pp. 153, 274–5.

⁵⁶Gomes 2005, p. 166. I am currently analysing this image, arguing for a spiritual interpretation.

⁵⁷Lopes 2004, p. 340.

⁵⁸Lopes 2004, p. 533; Lomax and Oakley (eds) 1988, p. 139.

⁵⁹Lopes 2004, pp. 219–21, 232.

⁶⁰Hutchinson 2002, p. 173.

concerns some woman pleasing to him, something which is said in good counsel will not be received if the advice is that he leave her and not care for her; it causes him first an increase of pain which is beyond all good judgement.⁶¹

Normally, in a case of medieval lovesickness, once the lover obtained the object of his desire he recovered his health. Fernando did not do so, remained deprived of good sense, and, Hutchinson suggests, eventually withered away. She believes that Lopes reversed the ages at death of Fernando and João Fernandes Andeiro, giving the queen an older husband and a younger lover as befits a romance emplotment, but also emphasising how his illness aged him.⁶² Lopes clearly had some knowledge of contemporary medical discourses on lovesickness, but he chose to twist the normal plot-line. For Lopes, passion like Fernando's for Leonor, or indeed his father's for Inês de Castro, who made Pedro so sick with love that he was deprived of speech and sight, was disruptive for a kingdom and had no place at all within a marriage.⁶³ In contrast, Lopes depicted the marriage of João I and Philippa of Lancaster as sober, devoted and perfect; they produced plenty of fine heirs; and the kingdom was at peace.

This is not to say that João and Philippa did not experience serious health problems. Philippa was pregnant nine times, giving birth to eight children, two of whom died in childhood. Lopes chose not to take his chronicle as far as her death in 1415, but said that she did not omit her religious duties even when 'hindered by illness or constrained by the burden of childbirth'.⁶⁴ Another chronicler, João Álvares, said that her last pregnancy was so difficult that an abortifacient was advised, which the queen refused.⁶⁵ Lopes also noted that Philippa miscarried her first child, in distress at João's serious illness shortly after their marriage.⁶⁶ This should be taken as a sign of her marital devotion, in sharp contrast to her predecessor, who Lopes implied gave birth to another man's baby while her husband lay dying. Leonor did not even go to Fernando's funeral, saying that she felt unwell, much to the people's discontent.⁶⁷ It is perfectly possible to construct another version of these events. Leonor's role at Fernando's side can be reassessed through consideration of the considerable powers and the enormous dower she was given (both greater than any queen since the late thirteenth century), and it is likely that Lopes' negative depiction of her had something to do with the power struggles that took place during the regency of another Queen Leonor, mother of Afonso V, in the late 1430s when he was writing his chronicles.⁶⁸

Archaeologists have also noted that Leonor's coat of arms was incorporated into the architecture of the mausoleum Fernando built for himself in São Francisco de Santarém, implying that they intended to be buried together, and a seventeenth-century Franciscan chronicle states that when Fernando's tomb was opened in 1588, it was found to contain the remains of two infants.⁶⁹ These were presumably the babies Leonor gave birth to towards the end of her husband's life, who Lopes insinuates were not his, and one of whom he even suggests was murdered by the jealous king.⁷⁰ It is also possible to show that the image of the contented family of João I projected by Lopes, other chroniclers and even by

⁶¹Lopes 2004, pp. 220–1; Villanova in McVaugh (ed.) 1985, pp. 11–54; Wack 1990.

⁶²Hutchinson 2004, pp. 174, 191.

⁶³Lopes 2007, p. 200.

⁶⁴Lopes 1963–8, vol. 2, p. 226.

⁶⁵Álvares 1960, vol. 1, pp. 6–7.

⁶⁶Lopes 1963–8, vol. 2, pp. 256–7.

⁶⁷Lopes 2004, pp. 591–2.

⁶⁸Duarte 2002, p. 21.

⁶⁹Ramalho 1998, p. 91; Esperança and Soledade 1656–1721, vol. 1, pp. 467–9.

⁷⁰Lopes 2004, pp. 523–4.

João's own sons was probably far removed from a more turbulent 'reality'.⁷¹ We know virtually nothing about Philippa, independently of the chronicles.⁷² What we do know, however, is that illnesses and deaths can be used to construct enduring images, both positive and negative.

It is worth concluding with another 'medical' plot which reinforces the contrast between Fernando and João and their wives. As if plucked from the genre of the fabliaux, one story tells of how a young, highly favoured squire, the epitome of the romance hero, was savagely castrated after the king discovered that he was sleeping with a married woman of the royal court: 'in such a way that no flesh remained down to the bone that was not all cut'. Despite this, he recovered on receiving care and lived the rest of his days fattened in legs and body and beardless.⁷³

This story works on several levels. For a medical historian, this episode can be used as evidence for the physical changes of castration in the Middle Ages. It has also been interpreted as evidence that Pedro was a ferocious homosexual, based solely on the line: 'the king loved him very much, more than one ought to say here'.⁷⁴ Perhaps less anachronistically, it is possible to explain the story politically. Lopes represented Pedro's reign as a golden age, so this cannot be a story of barbarity, even if it seems to us to portray him in a very similar light to his contemporary Pedro I 'the Cruel' of Castile. Pedro of Portugal was exercising appropriate moral justice according to the standards of his time, reacting as if the woman in question were his wife or daughter. It is therefore not surprising to find a similar story in the chronicle of João I, viewed by Lopes as Pedro's worthy successor. João caught his chief chamberlain with a lady of the court when he was supposed to be on pilgrimage; he seized him from the church where he had taken sanctuary, later presenting gifts to the church to atone for sacrilege, and had him burned at the stake and the lady disgraced.⁷⁵ The point being made in these stories is that the marriage vow was absolute and that it was a king's duty to monitor sexual behaviour.⁷⁶

Pedro and João were able to exercise this moral justice effectively but Fernando was unable to control his own wife's infidelity with a courtier. This failure was both a cause and a consequence of his mysterious illness. In widespread medieval understanding, passionate love was a disease of the soul. Fernando might have achieved the object of his desire, but his passion did not abate and hence he declined into an illness that was both physically and spiritually debilitating, rendering him unfit to rule and eventually depriving his throne of a legitimate heir. João married a woman for political reasons, obeying all formalities such as papal dispensation and insisting the ceremony took place before Lent.⁷⁷ As a result of such restraint, both his marriage and his reign could be represented as an astounding success, and any illness was short and spiritually beneficial.

Conclusion

Medical historians traditionally isolated examples of disease from the context in which they found them. In the case of chronicles, this was unhelpful since most of these texts had religion and politics for their subject matter, and the role of health and disease on this stage could not

⁷¹ Coelho 2005; Duarte 2005.

⁷² Goodman 1998; Hutchinson 2002, pp. 242–57.

⁷³ Lopes 2007, pp. 35–7.

⁷⁴ Marques 1971, p. 181.

⁷⁵ Lopes 1963–8, vol. 2, pp. 301–3.

⁷⁶ Lopes made it very clear that João's illegitimate children were born before his marriage: Lopes 1963–8, vol. 2, pp. 320–2.

⁷⁷ Lopes 1963–8, vol. 2, pp. 218–19, 221–4.

be ignored. Rather than just mining chronicles (and other genres of narrative) to plot the spread of disease, more recent scholarship has tried to relocate health and disease in their narrative context. In so doing, it has become apparent that health and disease played a crucial role in the characterisation and the construction of events. In medieval chronicles such as those of Fernão Lopes, illness could often be presented negatively to symbolise moral weakness and dishonour, as in the case of King Fernando of Portugal. Illness could also, however, be used positively to symbolise moral integrity, wisdom and honour. This was the effect it had in the representation of Álvaro Pais, the doughty old citizen of Lisbon with whom this study began. His gout can be interpreted on a number of different levels. On one level, Portuguese royal officials did request retirement because of gout throughout the fifteenth century, suggesting that Álvaro's plight might have seemed plausible to Lopes' audience, eliciting sympathy and praise for his endurance.⁷⁸ At the same time, suffering from gout probably emphasised Álvaro's patrician status since over many centuries the condition was usually associated with rich diets and expensive lifestyles.⁷⁹ This could have had the double effect of enhancing his prestige as a supporter of João of Avis and also enhancing the righteousness of João's bid for the throne since it had the backing of a wealthy statesman. On a third level, the physical pain that gout caused Álvaro paralleled his moral pain regarding the political situation of the kingdom after King Fernando's death. The sudden physical recovery at the moment that João of Avis began his revolt against the regime, allowing Álvaro even to mount a horse and ride into the fray, symbolised the imminent healing of the kingdom by the messianic João.

None of these interpretations should be seen as contradictory or competitive. They illustrate instead how Lopes skilfully introduced illnesses, deaths and healings into his narratives at opportune moments in order to add multi-layered complexity, drama and symbolic meaning to the tale he was telling. This is what is meant by the term 'medical emplotment' in this study, drawing on the influential work of Hayden White on historical technique. White has caused many historians dramatically to reconsider how they themselves write history, framing and shaping their narratives to suit their purpose. Although medical historians are very much aware of the constant (re-)construction of the nature and meaning of illness over time, and are increasingly influenced by narrative medicine, especially for the history of the patient, they are much less aware of how they themselves write and how their source materials are put together. It is essential that future researchers reflect much more on these issues, and continue to view their narrative sources as dynamic and complex texts, in many of which the rhythms of life and death are not simple facts but integral to the overall dramatic framework constructed by the author. Taking this approach will have a profound effect on the way in which health and illness are believed to function in medieval society.

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⁷⁸Unfortunately, most of the surviving Portuguese royal chancery records for the fourteenth century are fifteenth-century copies that rarely preserve retirement letters. However, there are hundreds of original examples from the fifteenth century recording many debilitating conditions, including those of João Adraz of Santiago de Cacém who in 1446 asked to be able to retire because he was old and weak, 70

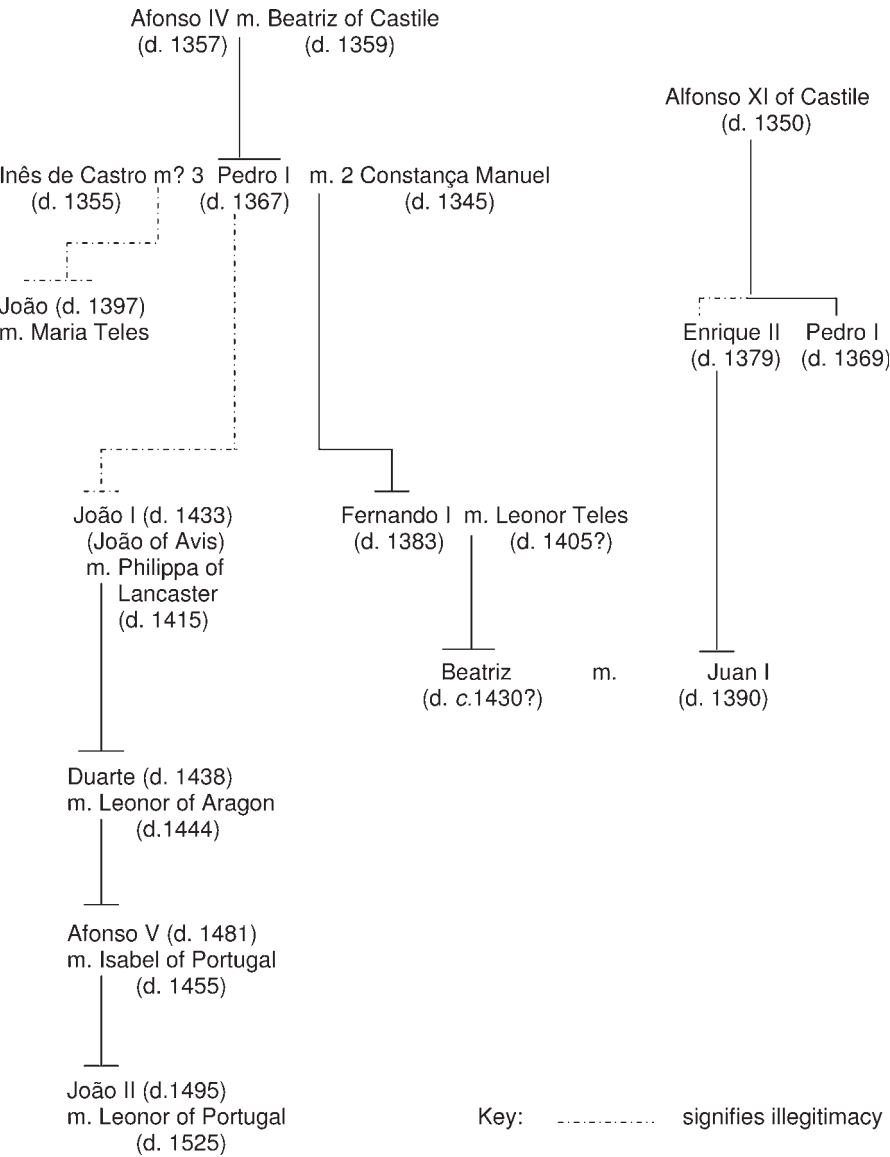
years old and suffering from gout (*doente de gota*); and in 1445 a royal vassal, João Vaz, asked to be able to retire because he was suffering from a hernia. The royal physician who examined him confirmed this, adding that he also suffered from bladder stones. See Azevedo (ed.) 1915–34, vol. 1, pp. 305 and 341.

⁷⁹Porter and Rousseau 1998.

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Appendix

Genealogical table: The Portuguese Royal Family in the late middle ages



Source: Compiled by the author from various sources

Bibliography

Primary sources

- Arquivos Nacionais da Torre do Tombo, *Chancelarias Régias* Lisbon.
- Álvares J. 1960, *Obras*, de Almeida Calado A. (ed.), Coimbra: Acta Universitatis Conimbrigensis.
- Anon. 1991, *Estoria de Dom Nuno Alvrez Pereyra*, de Almeida Calado A. (ed.), Coimbra: Acta Universitatis Conimbrigensis.
- Azevedo P. de (ed.) 1915–34, *Documentos das Chancelarias Reais Anteriores a 1531 relativos a Marrocos*, 2 vols, Lisbon: Academia das Ciências.
- Costa A. D. de Sousa (ed.) 1968–70, *Monumenta Portugaliae Vaticana*, Rome and Oporto: Livraria Editorial Franciscana.
- Dias J. J. Alves (ed.) 2004, *Chancelarias Portuguesas: D. João I*, Lisbon: Centro de Estudos Históricos, Universidade Nova.
- Duarte, King of Portugal 1998, *Leal Conselheiro*, Lopes de Castro M. H (ed.), Lisbon: Imprensa Nacional/Casa da Moeda.
- Faro J. (ed.) 1965, *Receitas e Despesas da Fazenda Real de 1384 a 1481: Subsídios documentais*, Lisbon: Publicações do Centro de Estudos Económicos.
- Froissart J. 1967, *Oeuvres de Froissart*, de Lettenhove K (ed.), Osnabrück: Biblio Verlag.
- Lomax D. W. and Oakley R. J. (eds) 1988, *The English in Portugal, 1367–87*, Warminster: Aris and Phillips.
- Lopes F. 1963–8, *Crónica de D. João I*, 2 vols, Oporto: Livraria Civilização.
- Lopes F. 1989, *Crónica de D. Fernando*, Oporto: Livraria Civilização.
- Lopes F. 2004, *Crónica de D. Fernando*, Macchi G. G. (ed.), 2nd edn, Amado T. Lisbon: Imprensa Nacional-Casa da Moeda.
- Lopes F. 2007, *Crónica de D. Pedro*, Macchi G. (ed.), 2nd edn, Amado T. Lisbon: Imprensa Nacional-Casa da Moeda.
- López de Ayala P. 1991, *Crónicas*, Martín J. L. (ed.), Barcelona: Planeta.
- Pina R. de 1977, *Crónicas*, Lopes de Almeida M. (ed.), Oporto: Lello and Irmão.
- Sá A. Moreira de (ed.) 1966–2003, *Chartularium Universitatis Portugalensis*, Lisbon: Instituto de Alta Cultura, Instituto Nacional de Investigação Científica, Fundação para a Ciência e a Tecnologia.
- Villanova A. de 1985, *Tractatus de Amore Heroico, Epistola de Dosi Tyriacalium medicinarum*, in McVaugh M. R. (ed.), *Arnaldi de Villanova Opera Medica Omnia*, García Ballester L., Paniagua J. A. and McVaugh M. R. (eds), vol. 3, Barcelona: Publicacions i Edicions de la Universitat de Barcelona.
- Villehardouin G. de 1963, *Joinville and Villehardouin: Chronicles of the Crusades*, Shaw M. R. B. (ed.), Harmondsworth: Penguin Classics.

Secondary sources

- Aguiar A. de 1924, *O 'Rei Formoso' e 'A Flor de Altura': Estudo Medico-Psychologico*, Lisbon: Instituto de Medicina Legal de Lisboa.
- Álvarez Millán C. 1999, 'Graeco-Roman Case Histories and their Influence on Medieval Islamic Clinical Accounts', *Social History of Medicine*, 12, 19–43.
- Amado T. 1991, *Fernão Lopes, Contador de História: Sobre a Crónica de D. João I*, Lisbon: Editorial Estampa.
- Arnaut S. Dias 1959, 'A crise nacional dos fins do século XIV', *Biblos*, 35, 51–79.
- Arrizabalaga J. 2002, 'Problematizing Retrospective Diagnosis in the History of Disease', *Asclepio*, 54, 51–70.
- Benedictow O. 2004, *The Black Death, 1346–1353: A Complete History*, Woodbridge: Boydell Press.
- Brody H. 2003, *Stories of Sickness*, 2nd edn, New York: Oxford University Press.
- Burnham J. 2005, *What is Medical History?*, Cambridge: Polity Press.
- Charon R. 2006, *Narrative Medicine: Honouring the Stories of Illness*, New York: Oxford University Press.
- Citrome J. 2007, *The Surgeon in Medieval English Literature*, Basingstoke: Palgrave Macmillan.

- Coelho A. Borges 1981, *A Revolução de 1383: Tentativa de Caracterização*, 4th edn, Lisbon: Caminho.
- Coelho M. H. da Cruz 2005, *D. João I: o que Recolheu 'Boa Memória'*, Lisbon: Círculo de Leitores/Centro de Estudos dos Povos e Culturas de Expressão Portuguesas.
- Cohn S. K. 2002, *The Black Death Transformed: Disease and Culture in Early Renaissance Europe*, London: Arnold.
- Condrau F. 2007, 'The Patient's View Meets the Clinical Gaze', *Social History of Medicine*, 20, 525–40.
- Cunningham A. 2002, 'Identifying Disease in the Past: Cutting the Gordian knot', *Asclepio*, 54, 13–34.
- Dantas J. 1909, *Outros Tempos*, Lisbon: A. M. Teixeira.
- Duarte L. M. 2005, *D. Duarte: Requiem por um Rei Triste*, Lisbon: Círculo de Leitores/Centro de Estudos dos Povos e Culturas de Expressão Portuguesas.
- Duarte M. M. 2002, *Leonor Teles: Ensaio Biográfico*, Oporto: Campo das Letras.
- Esperança M. de and Soledade F. da 1656–1721, *História Seráfica da Ordem dos Frades Menores de S. Francisco*, Lisbon: Oficina Craesbeeckiana.
- Flint V. I. J. 1989, 'The Early Medieval "Medicus", the Saint—and the Enchanter', *Social History of Medicine*, 2, 127–45.
- Gomes R. Costa 2005, *D. Fernando*, Lisbon: Círculo de Leitores/Centro de Estudos dos Povos e Culturas de Expressão Portuguesas.
- Goodman J. R. 1998, 'The Lady with the Sword: Philippa of Lancaster and the Chivalry of Prince Henry the Navigator', in Goodman J. R. (ed.), *Chivalry and Exploration, 1298–1630*, Woodbridge: Boydell Press, 134–48.
- Guenée B. 2004, *La Folie de Charles VI: Roi Bien-Aimé*, Perrin [no place given].
- Harley D. 1999, 'Rhetoric and the Social Construction of Sickness and Healing', *Social History of Medicine*, 12, 407–35.
- Henderson J. 2006, *The Renaissance Hospital: Healing the Body and Healing the Soul*, New Haven and London: Yale University Press.
- Homem A. L. de C. 1983–4, 'Em Torno de Álvaro Pais', *Estudos Medievais* 3–4, 93–130.
- Horden P. 1992, 'Disease, Dragons and Saints: The Management of Epidemics in the Dark Ages', in Ranger T. and Slack P. (eds), *Epidemics and Ideas: Essays on the Historical Perception of Pestilence*, Cambridge: Cambridge University Press, 45–76.
- Horden P. 2000, 'Ritual and Public Health in the Early Medieval City', in Sheard S. and Power H. (eds), *Body and City: Histories of Urban Public Health*, Aldershot: Ashgate, 17–40.
- Hutchinson A. P. 2002, 'Leonor Teles and the Construction of Female Characters in Fernão Lopes', unpublished PhD thesis, University of London.
- Hutchinson A. P. 2004, 'Leonor Teles: Representations of a Portuguese Queen', *Historical Reflections*, 30, 73–87.
- Jones P. M. 1994, 'John of Arderne and the Mediterranean Tradition of Scholastic Surgery', in García Ballester L., French R., Arrizabalaga J. and Cunningham A. (eds), *Practical Medicine from Salerno to the Black Death*, Cambridge: Cambridge University Press, 289–321.
- Jones P. M. 2009, 'The Surgeon as Story-Teller', *Poetica*, 72, 77–91.
- Jordanova L. 2006, 'The Social Construction of Medical Knowledge', in Huisman F. and Harley Warner J. (eds), *Locating Medical History: The Stories and their Meanings*, Baltimore: Johns Hopkins University Press, 338–63.
- Loudon I. 1997, 'On Talks', *Medical History*, 41, 1–5.
- McCleery I. 2005, '*Multos ex medicinae arte curaverat, multos verbo et oratione: Curing in Medieval Portuguese Saints' Lives*', in Cooper K. and Gregory J. (eds), *Signs, Wonders, Miracles: Representations of Divine Power in the Life of the Church*, Studies in Church History 41, Woodbridge: Boydell, 192–202.
- McCleery I. 2009, 'Both "Illness and Temptation of the Enemy": Understanding Melancholy in the Writings of King Duarte of Portugal (1433–38)', *Journal of Medieval Iberian Studies*, 1, 163–78.
- McCracken P. 2003, *The Curse of Eve, the Wound of the Hero: Blood, Gender, and Medieval Literature*, Philadelphia: University of Pennsylvania Press.

- Marques A. H. de Oliveira 1971, *Daily Life in Portugal in the Late Middle Ages*, Madison: University of Wisconsin Press.
- Mattoso J. 1993, 'Saúde corporal e saúde mental na Idade Média Portuguesa', in Mattoso J., *Fragmentos de uma Composição Medieval*, 2nd edn, Lisbon: Editorial Estampa, 233–52.
- Meira J. de 1911, 'A Peste de 1384 e as Diversas Palavras Empregadas para Designar o Bubão Pestilencial', *Arquivos de História da Medicina Portuguesa*, new series 2, 179–92.
- Meira J. de 1912, 'Da peste de 1415 e da Palavra "Trama" significando bubão pestilencial', *Arquivos de História da Medicina Portuguesa*, new series 3, 178–82.
- Moreno H. Baquero 1983, 'Reflexos da peste negra na crise de 1383–5', *Bracara Augusta*, 37, 373–86.
- Munslow A. 2007, *Narrative and History*, Basingstoke and New York: Palgrave Macmillan.
- Partner N. (ed.) 2005, *Writing Medieval History*, London: Hodder Arnold.
- Pilsworth C. 2000, 'Medicine and Hagiography in Italy, c. 800–c. 1000', *Social History of Medicine*, 13, 253–65.
- Porter R. and Rousseau G. S. 1998, *Gout: The Patrician Malady*, New Haven: Yale University Press.
- Ramalho M. M. B. Magalhães 1998, 'O convento de S. Francisco de Santarém: história e arqueologia de um monumento', unpublished MA dissertation, University of Oporto.
- Rawcliffe C. 1988, 'The Profits of Practice: The Wealth and Status of Medical Men in Later Medieval England', *Social History of Medicine*, 1, 61–78.
- Rawcliffe C. 1995, *Medicine in Late Medieval England*, Stroud: Alan Sutton.
- Russell P. E. 1955, *The English Intervention in Spain and Portugal in the Time of Edward III and Richard II*, Oxford: Clarendon.
- Santos M. de 1973–88, *Monarquia Lusitana*, edited by da Silva Rego A. and Banha de Andrade A. A., Lisbon: Imprensa Nacional/Casa da Moeda.
- Serrão J. 1985, *O Carácter Social da Revolução de 1383*, 6th edn, Lisbon: Livros Horizonte.
- Spiegel G. 1997, *The Past as Text: The Theory and Practice of Medieval Historiography*, Baltimore: Johns Hopkins University Press.
- Ventura M. Garcez 1992, *O Messias de Lisboa: um Estudo de Mitologia Política (1383–1415)*, Lisbon: Cosmos.
- Viegas V. 1996, 'Uma revolução pela independência nacional nos finais do Século XIV', unpublished PhD thesis, University of Lisbon.
- Wack M. 1990, *Lovesickness in the Middle Ages: The Viaticum and its Commentaries*, Philadelphia: University of Pennsylvania Press.
- White H. 1973, *Metahistory: The Historical Imagination in Nineteenth-Century Europe*, Baltimore: Johns Hopkins University Press.
- White H. 1987, *The Content of the Form: Narrative Discourse and Historical Representation*, Baltimore: Johns Hopkins University Press.
- Wootton D. 2006, *Bad Medicine: Doctors Doing Harm since Hippocrates*, Oxford: Oxford University Press.
- Wray S. K. 2004, 'Boccaccio and the Doctors: Medicine and Compassion in the Face of the Plague', *Journal of Medieval History*, 30, 301–22.
- Ziegler J. 1999, 'Practitioners and Saints: Medical Men in Canonization Processes in the Thirteenth to Fifteenth Centuries', *Social History of Medicine*, 12, 191–225.