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MEDICAL RECIPES IN TWO MIDDLE ENGLISH MANUSCRIPTS: LONDON, WELLCOME LIBRARY, MSS 404 AND 5262*

Abstract

Recipes in Middle English specialised texts have been the focus of study over the past few decades. In the studies conducted, attention is drawn to particular types of recipes (medical, culinary, etc.) or to the type of production and intended audience (remedyboks and learned texts, addressed either to lay or to learned audiences). The present study analyses a sample of common recipes taken from two apparently unrelated manuscripts holding recipe collections (London, Wellcome Library, MSS 404 and 5262) in order to unearth connections between both texts. To account for these similarities, the linguistic features and the recipe elements of the recipes examined are discussed adopting a contrastive perspective.
Keywords: Middle English, remedybook, medical recipe, Wellcome 404, Wellcome 5262, recipe elements.

1. Introduction

Recipes have formed part of the vernacular English tradition for a long time, going back to as early as the 10th century (Carroll 2004: 175). This lasting presence has not caused their features to change much, however, as put forward by Görlach (1992: 756). Among these, a common trait stands out: their instructional purpose. In other words, in recipes instructions are

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provided as to how to prepare a medicine, a meal or some other utility (Taavitsainen 2001: 86; Quintana-Toledo 2009: 24). Depending on the ultimate purpose that recipes seek to serve, different types can be found in early English – not only medical, but also culinary, magical, etc. The cookery recipe, for example, has been the object of study of contributions like those by Görlach (1992), Hieatt (1996) or Bator (2016), among others; alchemical recipes, on the other hand, have been studied by Grund (2003).

It has been widely reported in the literature that recipes can be analysed from two different perspectives: either as a text-type or as a genre. According to the former, linguistic traits are explored; as for the latter, their function is taken into consideration (Carroll 2004: 178, 186). As Taavitsainen has recently suggested, "text type features include imperative forms of verbs, measurements, and an optional efficacy part that may be realized in various ways", whereas the opening verb *take* or the abbreviation for recipe are "enough to trigger expectations of a text belonging to a genre whose function is to instruct in preparing something" (2016: 275). This twofold approach is applied, for example, in the analyses of Middle English (hereafter ME) medical recipes by Alonso-Almeida (1998–1999) or Marqués-Aguado (2014).

The focus of this article falls on medical recipes recorded in two ME manuscripts. Being medical, these recipes aim at describing substances, procedures and the like to help restore the balance of humours or a patient's general condition. Medical recipes have a long history, as they were already attested in Old English (hereafter OE) times, whereas, for instance, "no OE cookery recipe appears to be extant" (Görlach 2004: 126).

Scholarly research has also addressed the issue of where such mediaeval medical recipes are found, since there were different types of medical productions at the time. If in OE recipes typically appeared in remedybooks (Carroll 2004: 175), the options widen in the ME period, ranging from the said remedybooks to surgical and specialised/academic treatises. While the latter belong to the learned tradition of writing (Taavitsainen, Pahta and Mäkinen 2006: 87) with translations or adaptations from works in Latin, remedybooks represent "the oldest tradition of medical writing" (Bator and Sylwanowicz 2017: 26). As Voigts and McVaugh note, remedybooks were "made up mostly of treatment for ailments – or, more accurately, for symptoms – by minor surgical procedures, non-theoretical phlebotomy, cupping, dietary, prayers, charms, ritual action, and, of course, 'prescriptions'" (1984: 21). *A Fifteenth-Century Leechbook* (London, Medical Society, MS 136), edited by Dawson (1934), and the *Liber de diversis medicinis* (Lincoln, Cathedral Library, MS A.5.2.), edited by Ogden (1938), are among the most well-known remedybooks.

The learned and the remedybook traditions differed in several ways (as summarised in Marqués-Aguado [2014: 108]; see also Bator and Sylwanowicz [2017: 25–27]). On the one hand, remedybooks were normally intended for lay people and contained recipes that were usually more standardised and that could be read independently. On the other, learned materials were produced for surgeons and physicians, and the recipes that they included were less standardised and more likely to follow an organisational pattern or be integrated into the treatise, "which makes it difficult to discern them from the main body of the text" (Bator and Sylwanowicz 2017: 27).

This apparently clear-cut division is not, however, that neat, since intertextuality among texts and writing traditions was commonplace. Indeed, individual texts, as Taavitsainen, Pahta and Mäkinen argue, usually have "complicated and layered transmission histories" (2006: 86). The transmission of theories, concepts and texts from the Antiquity to the mediaeval period, for instance, "involved successive stages of copying, translating, paraphrasing, commenting, excerpting, assimilating, adapting, and conflating" (Pahta and Taavitsainen, 2004: 12). In the process of creating new texts on the basis of previous ones, there was no need to refer to the sources, and originality was not a goal, particularly with recipe materials, in which intertextuality is even described as "striking" by Pahta and Taavitsainen (2004: 12, 14).

Our study delves into some recipes that are shared by two manuscripts held at the Wellcome Collection (London, Wellcome Library, MSS 404 and 5262; hereafter W404 and W5262, respectively) that are apparently unrelated, or whose connection at least has not been reported yet. In order to analyse the recipes selected, the manuscripts are first described (section 2). Then, the analysis tackles the sample of recipes from two perspectives (section 3): first, recipes are analysed linguistically (i.e. as a text-type); second, attention is paid to recipe elements (i.e. as a genre). Finally, the conclusion (section 4) closes the article.

2. Description of the manuscripts

No information on connections between the two manuscripts under study in this article has been found. In fact, the entries for both manuscripts in the Wellcome Library Catalogue have been checked, and so has been Voigts and Kurtz's search programme (2014), without positive results.[1] The recipes or

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[1] The individual links for the two manuscripts in the Wellcome Library Catalogue are http://archives.wellcomelibrary.org/DServe/dserve.exe?dsqIni=Dserve.ini&dsqApp=Ar chive&dsqCmd=Show.tcl&dsqDb=Catalog&dsqPos=0&dsqSearch=%28AltRefNo%3D%

fragments found in Keiser's manual (1998) only concern sections in W404 (see subsection 2.1), so no connections appear in this reference book either.

2.1. London, Wellcome Library, MS 404

The Wellcome Library Catalogue labels W404 as a *Leechbook*, the first in a series of manuscripts holding collections of recipes. In fact, the manuscript brings together various contents, including a description of urines, a series of medical recipes and remedies (along with some charms), some astrological tables and texts, etc. (see Moorat 1962: 271–272).

The text remains largely unidentified, although some connections have been established between excerpts in W404 and other already known texts. For example, a section on diet and bloodletting (f. 1r-v and ff. 34r-36r) has been linked to Galen's *De phlebotomia* (Keiser 1998: 3849), while a couple of charms aimed at staunching bleeding (ff. 19v-20r) have been placed in the traditions of the "Flum Jordan" and the "Longinus charm". As Mitchell notes, these two were "the most prevalent medical charms in the body of surviving charms", and "[m]anuscripts will often have both charms, or they will have multiple versions of the same charm" (2011: 63), as is the case of W404. This repetition could also be suggestive of how the manuscript was put together, i.e. that this was not a particularly well-planned collection of recipes.

The codex contains no table of contents to help identify the materials included in it. In total, W404 presents us with more than 350 recipes, a figure that comprises repeated recipes. Although at times the classical *de capite ad pedem* organisational pattern is followed, with recipes discussing head problems first and then moving downwards, such ordering is not always respected. Rather, recipes for the same ailment tend to cluster together, such as those for eye problems. Although most recipes are medical in character, around 20 provide instructions to prepare substances and preparations, or how to work with metals, which points at this being a varied collection.

The contents of the manuscript are rendered by four different hands, which may also help explain why some texts or excerpts are repeated. All of them can be dated back to the 15th century and show varying degrees of mixture of Anglicana and Secretary features. The recipes that will be analysed in section 3 are all written by the first hand. They lack rubricated headings, with the beginning of the heading being rather signalled by coloured initials, in which red and green tend to alternate.

27404%27%29 (W404) and http://archives.wellcomelibrary.org/DServe/dserve.exe?dsqIni=Dserve.ini&dsqApp=Archive&dsqCmd=Show.tcl&dsqDb=Catalog&dsqPos=0&dsqSearch=%28AltRefNo%3D%275262%27%29 (W5262) (date of access: June 2019). In Voigts and Kurtz's database of *Scientific and Medical Writings in Old and Middle English* (2014), the reference numbers are .vk 5726.00 for W404 and .vk 3449.50 for W5262.

2.2. London, Wellcome Library, MS 5262

W5262 is a one-volume codex which contains a medical recipe collection. It dates from the early 15ᵗʰ century and displays a West Midlands dialect, being the most likely place of origin a bordering area between the counties of Herefordshire and Worcestershire (Esteban-Segura 2014). It includes a list of contents (ff. 3v-7v) recording 133 recipes (ff. 8r-53v), which is not accurate as some recipes do not appear later in the text. It is interesting to note that the missing recipes contain two dealing with childbirth ("Medic*ine* for wo*m*man þat t*ra*ueleþ" [Medicine for a woman that is in labour] and "Med*icine* to deliu*er*e wo*m*ma*n* of ded childe" [Medicine to deliver a woman of a dead child]), which can be an indication of the intended user(s) of the manuscript for whom the original text may have been adapted.

The manuscript consists mainly of recipes in English for affections, injuries and ailments dealing with human complaints, held in ff. 8r-61v. There are some fragments in Latin and practical recipes not necessarily relating to medical issues such as, for example, those concerning the preparation of drinks (turning wine into vinegar), reading in the dark, catching fowls, etc.

The arrangement intends to follow the mediaeval *de capite ad pedem* structure, from head to foot, presenting first those remedies for affections in the head and then moving downwards. As with W404, however, the grouping is sometimes quite arbitrary and closely related remedies may appear separated; those for the eyes, for instance, can be found scattered throughout the book, occurring at the beginning and at the end. Most recipes are therapeutic, that is, they discuss a remedy for a specific disorder. Prognostic recipes, which predict the likely outcome of a disease, and cosmetic ones are also found. As usual in manuscripts of the period and type, the magical and divine elements are present with incantations and charms, and the reliance on God's aid or grace to heal the patient.

Indications to employ repulsive substances, as we will see later in the analysis, together with the occurrence of charms, explain why remedybooks were considered to form part of the tradition of folk and popular medicine, lacking on many occasions a scientific basis.

Concerning script and decoration, W5262 was written using the calligraphic script known as Textura, the one generally employed in mediaeval times for formal and expensive books. The section headings in red and the rubricated initial letters, which function as textual markers to help the reader find information, also prove the careful making of the book.

3. Analysis of some common recipes

The present analysis stems from previous work carried on each individual text, both of which belong to *The Málaga Corpus of Late Middle English Scientific Prose*.[2] The corpus consists of medical writings from the Hunterian Collection at Glasgow University Library and the Wellcome Collection at the Wellcome Library in London (see Calle-Martín and Miranda-García 2012). In addition, the digitised images of the manuscripts can be freely consulted together with their diplomatic transcription. It is possible: (a) to amplify the images, to search for the occurrence of words and to check the transcribed text against the transcribed image; (b) to view the KWIC concordances and the lemma-sorted KWIC occurrences generated from the corpus; (c) to retrieve morpho-syntactic information from the texts; (d) to POS-tag ME texts; and (e) to mark dialectal features.

As mentioned above, many mediaeval texts still remain unidentified, including the two under scrutiny. Furthermore, the relevant literature has reported on frequent exchanges between texts (even between those that belong to different writing traditions, as mentioned in section 1), and so the issue of textual transmission still requires further research. A survey of both the table of contents and the rubricated headings in W5262, and the sequence of recipes in W404 (through the coloured initials introducing headings) has revealed, at least, some thematic correlations in terms of subjects addressed, and this has led us to study a sample comparison of some common recipes for the same diseases. The body of recipes related to eye diseases and to dysentery (called "menisoun" in the ME texts) has been selected for the purpose. From these, those recipes that did not show correlation in both manuscripts have been discarded. In total, the recipes under analysis amount to fifteen in the case of eye diseases and five in the case of dysentery.

As noted above, the order in which the recipes appear in remedybooks seems to be of relatively little importance. As Carroll states, "the fact that recipes may be read in any order or indeed individually, means that organisational ideals are rarely met" and this apparent lack of organisation represents "a point of contrast between remedybooks and academic treatises" (2004: 184). A noticeable difference between W404 and W5262 concerns precisely this aspect, as mentioned above. W5262 is preceded by a table of contents which is not totally accurate, since some of the recipes listed there are not found later on in the body of the text, such as those for curing eyelid problems or for red eyes. W404, on the contrary, shows no table of contents, but it is more systematic insofar as remedies aimed at

addressing a particular ailment are presented one after the other, whereas those in W5262 are scattered across the text. Thus, this bears witness to the flexibility of the ordering of remedies in this type of books.

The ensuing analysis of the recipes is twofold and focuses on linguistic features and recipe elements.[3] This brings together earlier work on the identification of recipe elements such as composition, application, procedure, etc. (see Stannard 1982 and Hunt 1990), and more recent research on the linguistic elements of recipes (e.g. Görlach 1992, Carroll 1999 and Taavitsainen 2001).

3.1. Analysis of linguistic features

In terms of their linguistic features, recipes can be easily characterised by their overall structure (with a "very clear communicative principle") or the sequencing of "short paratactical sentences" (Taavitsainen 2001: 98). More specifically, attention will be paid to the following features, in line with Carroll's (1999, 2004) and Taavitsainen's (2001) previous research: form of the title or heading, 'telegrammatic' style, verb forms, personal and possessive pronouns, object deletion, and temporal structuring and parataxis.

a) Form of the title or heading

According to Taavitsainen, the typical form of a heading in a remedybook is that of "a noun phrase accompanied by a prepositional phrase or an evaluative adjective", but also *for* + NP/VP or a clause (2001: 99), while Carroll suggests *to*-infinitives as an alternative (2004: 181). In learned treatises, however, the heading may be "less conventionalised" (Taavitsainen 2001: 99) or even missing (with its content inferred from the context) (Carroll 2004: 181).

As has already been explained (see section 2), there are evident palaeographic differences as to the form of the headings in both W404 and W5262: the latter is very systematic in its use of rubricated headings to set off recipes, whereas the former only highlights the beginning of a new recipe heading by way of an enlarged initial (either in red or in green).

Curiously enough, our study reveals that headings of recipes for eye problems show a mixture of the patterns reported to be typical of both traditions of writing (learned and remedybooks), but with a preference for standardised, conventional patterns. In the case of W404, 6 recipes use "Another for the same" or simply "Another" (more usual in learned treatises) (example 1a); 5 recipes stick to this pattern but add specific information (e.g.

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the purpose that the remedy serves) (example 1b); 2 recipes begin with "A medicine for" + NP (example 1c); and 2 are headed by "for" (example 1d), followed in both cases by the condition affecting the patient:[4]

(1)
(a) **A nother** for the same euel / Take celidonye ... [W404, f. 12r]
(b) **A nother medycyn** for wormes that eteth me*nn*es | lides of ther yn / Take salte and bren ... [W404, f. 12v]
(c) **A Medicyn for** blered ey3en / take ... [W404, f. 12v]
(d) **For the perel** in a ma*nn*es eyen take ... [W404, f. 13v]

W5262 is similar to a certain extent inasmuch as the formula with "Another" prevails, but in this case 3 recipes are headed by "Another" or "Another for the same" (example 2a) and up to 6 show "Another" plus specific information (example 2b). 4 of them, in turn, begin with "A medicine for" + NP (example 2c), and just 1 with "for" followed by the disease (example 2d). There is only 1 recipe lacking heading or title (example 2e):

(2)
(a) **An | ob*ur* for wormes** i*n* ma*nn*es eÿne*n* ... [W5262, f. 11r]
(b) Anob*ur* for wormes | þat eten þe ledes ... [W5262, f. 11r]
(c) **Medicine for** bleren eÿnen . | Nÿme ... [W5262, f. 12v]
(d) **ffor þe perle** i*n* mo*nn*ÿs i3e . | Nÿm ... [W5262, f. 48r]
(e) **Nÿme** a clene skured ... [W5262, f. 12v]

In the case of recipes discussing dysentery, a similar tendency is found, since "Another" / "Another for" + NP with the name of the disease / "Another for the same" are the most frequent linguistic formulae for headings (4 examples in each manuscript, same recipes) (examples 3a to 3d). Only 1 recipe (examples 3e and 3f) is headed in both texts by a clause including a relativiser:

(3)
(a) **A nother for the mencyon** a good medycyn take ... [W404, f. 14v]
(b) **An oþer for þe M*enisoun*** . | Nÿm ... [W5262, f. 20r]
(c) **A nother medycyn** for the same / take ... [W404, f. 14v]
(d) **An*oþer*** .| Nÿme þe mÿlke of a kou// | we þat ... [W5262, f. 20r]
(e) **For** a --- man or woma*n* **that haith** the me*n*cion | a medicine / take ... [W404, f. 14r]
(f) **Who so haþ** þe Me// | nisoun ... [W5262, f. 19v]

The analysis of the recipes selected, then, points at a preference for the patterns including "Another". These are more commonly associated with learned treatises, despite some divergences between texts.

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4   In the examples presented, changes of line are indicated by means of upright lines (|) and italics reproduce expanded abbreviations; bold is used for emphasis throughout. For recipe headings, underlining reflects coloured material (rubrications or initials).

b) 'Telegrammatic' style

The so-called 'telegrammatic' style (Carroll 1999: 29) refers to the absence of complete sentences, as Görlach contended (1992: 746). Yet, as Carroll herself argues, sentences tend to be complete, as the examples in the following subsections will clearly evince.

c) Verb forms

The use of the imperative is commonplace in instructional texts like recipes, as has already been pointed out (see section 1) and frequently reported in the literature (Carroll 1999: 30; Carroll 2004: 180–181). Although the verb "take" is the "conventional formula" to signal the beginning of a recipe (in learned treatises), other verbs might be used (see Taavitsainen 2001: 99–100). Verb forms like "shall" or the subjunctive mood are rare (Görlach 1992: 748), with the indicative being present to some extent.

   The verb forms in the recipes in both manuscripts comply with the expected patterns, since the imperative clearly prevails and the typical verbs of cooking are found, such as "smere", "wring", "stamp", "drynk" or "take". This last verb is rendered consistently "nẏm(e)" in W5262 (examples 2c, 2d, 2e, 3b and 3d), a verb which is "not found in surgical tracts", as indicated by Taavitsainen (2001: 100). Instances of verb forms are supplied in examples 4 to 7 below. In subordinate clauses (typically expressing time or when something has to be done) tensed verb forms are employed (examples 4 and 5). In turn, "shall" (or, more frequently, "will" in W5262) is used to signal a prediction or to indicate the ultimate purpose of the remedy described (examples 6 and 7):

(4)
(a) and **when** | **thou haist don** ther w*i*t*h* then **take** a litell theroff *and* | **temp***er* hitt w*i*t*h* eisell and this is truwe … [W404, f. 12r]
(b) *and* **wha***n***//** | **þou hast so ẏ don** þ*er* wiþ **nẏme//** | alitel þ*er* of *and* **temp***re* hit wiþ eẏ// | sel *and* **do** aleẏtel in þẏn eẏe … [W5262, f. 10v]

(5)
(a) and **turne** hitt by the fyer **forto the wax be** | **al molton** a waye … [W404, f. 14v]
(b) *and* **turne** | hẏm **til þe wax beo al ẏ** | **multo***u***n** a waẏ … [W5262, f. 20v]

(6)
(a) and **smere** thy eyȝen and eu*er* | more **thei schalbe** the bytt*ur* … [W404, f. 12v]
(b) þer wiþ **smere** | þẏn eynen *and* eu*er* **þeẏ schele***n* | **beo** clere … [W5262, f. 11r]

(7)
(a) and hitt **schal restreyne** thy wombe … [W404, f. 14v]
(b) *and* hit | **wol streẏne** þẏ wombe … [W5262, f. 20r]

d) Personal and possessive pronouns

Personal pronouns, Taavitsainen states, show "[a] more personal attitude to instructions" (2001: 100), with first person pronouns appearing in the efficacy sections of surgical treatises and second person pronouns being used "frequently in remedybooks" (Taavitsainen 2001: 100). Possessive pronouns also "make the recipe more personalised" (Carroll 2004: 182), although they are not as common as articles (Carroll 1999: 30; Carroll 2004: 182).

The data from the recipes explored correlate with Carroll's claim that articles (both definite and indefinite) prevail over possessive pronouns (see example 8). As discussed above, verbs are usually in the imperative (and hence lack personal pronouns as subjects), as shown in examples 4 and 5 above, but second person pronouns are found in finite clauses referring to "further specifications and modifications" (Taavitsainen 2001: 100), as in example 8b, taken from W5262 and missing in W404 (see also example 4). In example 9, together with second person pronouns for specifications, possessives are used along with body parts (see also examples 6 and 7 above): in 9a the singular and plural forms of the second person pronoun alternate (see also Carroll 1999: 30), while W5262 (example 9b) is more consistent:

(8)
(a) *and* grynd **the** coop*er*esse … [W404, f. 13r]
(b) *and* grẏnd **þe** | coperose **as smal as þou mẏȝt** | *and* melt **þe** caponus gres … [W5262, f. 51v]

(9)
(a) and do therto solidẏue Jus and **when yu** | **goiste** to slepe do theroff yn **thyn** eyȝen … [W404, f. 14r]
(b) *and* do | þer to þe celidoẏne ius *and* | **whanne þou gost** slepe do// | þ*er* of in **þẏn** eẏe … [W5262, f. 12v]

e) Object deletion

As opposed to modern conventions, ME texts rarely show the deletion of the object (Carroll 1999: 31; Taavitsainen 2001: 100). The two manuscripts surveyed follow the expected pattern, since there is only one exception to preserving the object (example 10a). It has been suggested that with null objects "incomplete messages would have been rendered, possibly producing severe consequences on patients" (Marqués-Aguado 2014: 115):

(10)
(a) and **do ther in** and lett hitt stond long … [W404, f. 13r]
(b) *and* **do hit þer inne** *and* lete | hit stonde iij daẏes *and* iij nẏghtus … [W5262, f. 12r]

f) Temporal structuring and parataxis

Although these two features have been tackled separately in the relevant literature (e.g. Carroll 1999: 31), both temporal structuring and parataxis are presented together here due to the interrelations that they show.

The order in which the instructions are given mirrors that in which they should be implemented (Carroll 1999: 31; Taavitsainen 2001: 98); i.e. the procedure is presented chronologically and does not contradict medical practice. Such logical ordering may be reinforced by the presence of adverbs like "then" or "after", although in the two manuscripts under analysis coordination is preferred to link the subsequent stages in the preparation of a remedy (examples 11 and 12). Indeed, finding long series of coordinated short clauses has been described as a typical feature of mediaeval recipes (Carroll 1999: 31):

> (11)
> (a) **Take** salte **and bren** hitt **and** | **do** honye therto **and then distemp***er* them to gether ***and*** | **do** therof in thy eyȝen … [W404, f. 12v]
> (b) **Nẏme** salt ***and* bre***m*e hit **and do** | honẏ þer to ***and* temp***re* hit ẏ fe// | re ***and* do** on þyn eẏnen … [W5262, f. 11r]

> (12)
> (a) **and stamp** hit | wat*er*les yn a morter **and then wryng** out the Jus | **and take** that Jus **and do** hitt yn a possnett … [W404, f. 14v]
> (b) ***and*** pone hit waturles *and* in a | mort*er* ***and* wrẏnge** out þe ius | þer of ***and* do** hit in a posnet … [W5262, f. 20r-v]

Coordination is even used between clauses that contain a subordinate clause, as in example 13, which also reflects the fact that recipes in one or the other manuscript can occasionally be more specific as to the procedure or other recipe elements (discussed in subsection 3.2 below):

> (13)
> (a) ***and* grynd** the coop*er*esse **and meng** them well y | fere **and when thou goost to sleppe do** yn thy eyȝe | as muche as halfe a weett corne of that **and do so** | iij nyȝthes … [W404, f. 13r]
> (b) ***and* grẏnd** þe | coperose as smal as þou mẏȝt | ***and* melt** þe caponus gres . ***and* do** | þer to þe poudur of coperose | ***and* menge** hem wel i fere . ***and* whe***n* | þou gost **to slepe do** in iȝe þe | mountas of half a whet corn | of þat . ***and* do** so . iij . nẏȝtes … [W5262, f. 51v]

3.2. Analysis of recipe elements

According to Stannard (1982: 60–65), the types of information or *Fachinformation* that can be found in recipes are: (i) purpose; (ii) ingredients, equipment and procedure; (iii) application and administration; (iv) rationale; and (v) incidental data.

The purpose of a remedy may appear either at the beginning or at the end of the recipe. In the texts at hand, this appears at the beginning, in the title or heading (example 14):

(14)
(a) **A nother for who so haith the webbe or the pese | in the eye** / Take stronge eisell and do hitt in a | lampe of brasse and the blake sloye of the wod *and* lede | and wermott and do ther in and lett hitt stond long | and as nede is do therof to thy eye and hitt shal | brecke the webbe ... [W404, f. 13r]
(b) **An oþ*ur* for hem þat | habbeþ þe webbe oþ*ur* þe hawe** | N̈ym strong ¶ i*n* eÿnen . | eÿsel *and* do hit in a vessel of | brasse *and* þe blake slo of þe | wode oþ*ur* of þe ȝerde *and* tak war// | mot *and* do hit þer inne *and* lete | hit stonde iij daÿes *and* iij nÿghtus | þanne do hit in þÿn eÿnen *and* | hit schal breke þe webbe ... [W5262, ff. 11v-12r]

When the purpose is similar to that of the previous recipe, W404 tends to use the formula "Another for the same evil", whereas in W5262, this is usually reduced to "Another" (example 15), as has also been discussed regarding recipe headings (see subsection 3.1):

(15)
(a) **A nother for the same euel** / take turmentyne *and* ruwe | and celidonye and fenel and ribbwortt and | stamp them to gether and then smere thy eyȝen y*er* | w*i̅t*h when that thou goost vnto thy reste ... [W404, f. 12v]
(b) **Anoþ*ur*** | N̈ym tormentine *and* ruwe | *and* celidoÿne *and* fenel and rib | wort *and* stampe hem to ge// | dre *and* smere þÿn eÿnen þer w*i̅t*h | whan þou gost to bedde ... [W5262, f. 11r-v]

The ingredients making up the recipes are in the main herbal (example 16), although animal-derived ingredients, including *Dreckapotheke* or filth pharmacy (example 17), may be contained in the suggested cures as well:

(16)
(a) take **turmentyne** *and* **ruwe** | and **celidonye** and **fenel** and **ribbwortt** ... [W404, f. 12v]
(b) N̈ym **tormentine** *and* **ruwe** | *and* **celidoÿne** *and* **fenel** and **rib** | **wort** ... [W5262, f. 11r-v]

(17)
(a) take the **blod of | smale byrddes** ... [W404, f. 12v]
(b) N̈yme **þe blod of smale | brÿddus** ... [W5262, f. 11r]

Common ingredients found in every household, such as honey, butter, salt, milk, wine or cheese appear frequently. This suggests that the recipes might have been designed to be used by relatively lay people or rural doctors, not specialised doctors or surgeons. This is also reflected in the type of equipment needed to make the recipes, which could also be found in any kitchen or household (example 18), such as cooking pots, pans, boxes, etc.:

(18)

(a) bacyn, potte, lampe of brasse, cloȝth, pan of brasse, rounnd stayffe, boxces, morter, possnett, etc. [W404]

(b) basseẏn, pot, paẏle, vessel of brasse, cloþ, apanne, round pebble, boxes, morter, posnet, etc. [W5262]

As for the procedure, this starts with the verb "take" or a synonym followed by the ingredients. Then several actions are to be carried out; they usually involve the verbs "do", "stamp", "smear", "burn", "seethe", "make", etc. The procedures are, in general, similar in the recipes under analysis in both texts, although on occasions one text shows more specificity, as exemplified above in 5, 8, 10 and 13.

Regarding measurements and quantities, they are not generally given or, when provided, are very general ("full of", "small", etc.). This happens even when, as Bator and Sylwanowicz suggest, "the lack of precision in the medical context might have had much more serious effects" (2017: 48). Learned productions usually display more specific measurements and quantities (Taavitsainen 2001: 103), although in general terms 15th-century medical texts are more prone to include specific measures than earlier texts (Bator and Sylwanowicz 2017: 40).

The element of application and administration comprises information regarding dosage, frequency and time of application (Mäkinen 2006: 91). This is also similar in both texts, although in a few cases one of them includes more detailed information. In example 19, for instance, the frequency is indicated by the adverb "long" in W404, whereas W5262 specifies "3 days and 3 nights":

(19)

(a) lett hitt stond **long** | and as nede is do therof to thy eye and hitt shal | brecke the webbe … [W404, f. 13r]

(b) lete | hit stonde **iij daẏes *and*iij nẏghtus** | þanne do hit in þẏn eẏnen *and* | hit schal breke þe webbe … [W5262, f. 12r]

As far as the rationale is concerned, this has to do with the arguments supplied to support the potency of a remedy and can be optional. In the eye recipes examined in W404 we find 4 instances of efficacy phrases, which are a subtype of tags or phrases that "attest to the value of a given remedy" (Jones 1998: 199–200) (example 20), whereas none is found in the same recipes in W5262:

(20)

(a) this is ryght | true and good … [W404, f. 12r]

(b) this is truwe … [W404, f. 12r]

(c) for hit is full good … [W404, f. 12v]

(d) and this is a good thyng … [W404, f. 12v]

Finally, incidental data comprise anecdotes or citations to other scholars. It has been claimed that the recipes in remedybooks rarely provide detailed references to the source from which they derive, whereas those in learned treatises are fairly exact (Taavitsainen 2001: 100–102). This is the case in both manuscripts, since not a single source is mentioned in the recipes surveyed.

4. Conclusion

One of the main findings of our research is the identification of shared material in the texts of two different manuscripts housed at the Wellcome Library. Their related content has not been recognised in the catalogues describing the manuscripts. The analysis has allowed us to find evident similarities in their recipes, notwithstanding differences in dialect, script and other palaeographic issues. The extent to which both manuscripts are connected could be further explored with a more exhaustive analysis of the recipes accounting for other ailments.

The analysis has also pointed out that in the sample of recipes analysed both the learned tradition of medical texts and remedybooks influenced or borrowed from one another, as traits of both traditions appear together. That is the case of the headings in both manuscripts or of the structure of recipes in W5262 following a *de capite ad pedem* structure.

Further investigation on other manuscripts containing recipes or parts of them is mandatory in order to find out more about the transmission of the texts. On the other hand, analyses of the language of the different copies, and more specifically, of their dialects are also necessary to shed light on the production and circulation of medical texts during the Middle Ages.

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