The medical Cervantes

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El ingenioso hidalgo Don Quijote de la Mancha (Don Quixote), by Miguel de Cervantes Saavedra, is rivalled only by the Bible for the number of languages into which it has been translated. This masterpiece of world literature is considered to be the first modern novel. Part I was published in 1605 as a burlesque of contemporary chivalric romances; part 2 appeared in 1615 to counteract a plagiarized sequel. The hero is a lean, elderly man who, impassioned by romantic reading, thinks himself a knight. Riding on his starved horse, Rocinante, and in the company of Sancho Panza (a fat peasant whom he takes for a squire), Don Quixote leaves on a journey in which he rewrites reality as a chivalrous utopia. He fights giants that are simply windmills, rescues damsels who are simply whores, and courts Dulcinea del Toboso, who is not exactly a "lady."

Cervantes (1547–1616) was the son of an itinerant surgeon who struggled to maintain his practice and his family by travelling around Spain. The family finally settled in Madrid, where the young Cervantes received some early formal education. After travelling to Italy in 1569 to serve in the household of a nobleman, he joined the Spanish Legion. He was injured in the Battle of Lepanto (1571), losing the use of his left hand. During his return he was captured by pirates and was imprisoned in Algiers from 1575 to 1580. This experience was a turning point; numerous references to the themes of freedom and captivity would later appear in Cervantes’ work.

On his return to Spain he worked at a series of government jobs that involved extensive travel in Andalucia (the area in which the characters of his novel wander). Only at the end of his life was he able to obtain a patron and to devote full attention to his writings. Don Quixote, his most famous production, was translated into French and English literature. The salutary effects of bloodletting might even extend, for which purpose the local barber, if the community is large enough to support one:

For many ailments, the standard cure appears to have been bloodletting, for which one might apply to the local barber, if the community is large enough to support one:

In that neighborhood there were two villages, one of which was so small that it contained neither shop nor barber, but the larger had both: so the barber of the larger village served also the smaller. It now happened that in the latter there lay a sick man needing a bloodletting, and another who wished to have his beard trimmed, for which purpose the barber came, bringing with him his brass basin. (part 1, ch. 21)

The salutary effects of bloodletting might even extend, we learn, to the chastening effect of losing a little blood during a whipping:

But for the present, make up your mind to agree to this whipping penance, and believe me, it will be of much profit both to your soul and your body: to your soul, because of the charity with which you perform it; to your body, because I know that you are of sanguine complexion, and it will do you no harm to draw a little blood. (part 2, ch. 35)
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Among the ailments that arise in the course of Cervantes’ epic are the following:

Syphilis: “He forgot to tell us who was the first man who ever had catarrh and who was the first to use ointment to cure himself of the French pox” (part 2, ch. 22). In Cervantes’ day, syphilis was called “the French disease” in Spain and “the Spanish disease” in France; in Italy, it was known as both.

Leprosy: “By God,” said Sancho, “but your worship got me a nice fellow as a witness of what you say, this gaffer with his whorish amputation or I know not what” (part 2, ch. 29). Cervantes’ word here was “gafo,” which originates from “gafed,” the Spanish word used to describe involvement of the hands in leprosy.

Trichofolliculoma: “I never noticed her ugliness but only her beauty, which was enhanced in value by a mole that she had above her right lip, like a moustache with seven or eight red hairs like threads of gold and more than a span in length.” (part 2, ch. 29)

Acute gastroenteritis: “[T] he poor squire discharged so swiftly and copiously at both ends that neither the rush mat on which he had thrown himself nor the blanket with which he covered himself were of the slightest use to him. He sweated and sweated in such a paroxysm of strains and stresses that not only himself but all present thought he was on the verge of death.” (part 1, ch. 17)

Hirsutism: “I shall speak without tears — where, I ask you, can a duenna go with a beard? What mother or father will take pity on her? Who will give her aid? And even when she has a soft skin and tortures her face with a thousand sorts of lotions and cosmetics, she can scarcely find anyone to like her, what is she to do when she discloses a face like a jungle?” (part 2, ch. 10)

Rhinophyma: “But hardly had the light of the day allowed things to be seen and distinguished, when the first object that Sancho Panza caught sight of was the squire of the Wood’s nose, which was so big that it almost overshadowed his whole body. It is said, indeed, that it was of huge size, hooked in the middle, all covered with warts, and of a mulberry color like an eggplant, and that it hung down two fingers’ length below his mouth.” (part 2, ch. 14)

Somatization: “A physician was sent for, who, after feeling his pulse, took a rather gloomy view of the case and told him that he should provide for his soul’s health, for that of his body was in dangerous condition.” “The physician was of the opinion that melancholy and mortification had brought him to death’s door.” (part 2, ch. 74)

Of course, Cervantes’ medical descriptions are simply a part of the variegated background of 16th-century Spain against which his story flows. The character of Don Quixote represents an idealized and fictional world (with clear psychotic features); Sancho Panza, representing the natural world of biological existence, is a sobering exemplar of normality. These ironies challenge readers, medical or otherwise, to ask themselves to discern the differences between the fiction and the reality of experience itself.

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References


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Home Remedies

Patching things up

I was sitting behind the desk at a nursing station the other day writing up charts when a man approached a nurse at the other end of the desk. It seemed that an elderly relative had just been admitted and the man was bringing in the old fellow’s medications, one of which was a patch that he applied every day “for his heart.” The relative had brought the patch but could not find the package. No one could recognize the patch, however, and finally they asked me if I knew what it was. They were rubbery, orange patches with a black centre on a foil sheet. They didn’t look like any nitroglycerine patch I had ever seen. But, thanks to a yard full of hawthorne bushes I had no trouble identifying them as patches for bicycle tires. I wonder whether hardware-store medicine will one day be recognized as a form of alternative therapy. I remember the original copper bracelets made from pipe strapping, and the local widespread use of WD 40 for arthritis. More Home Hardware remedies than home remedies, and apparently they don’t cause headaches! — Dr. John McCleave, Rexton, NB