A Performance of Disease and Its Cures: Lovesickness in Medieval Iberia

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Sara Ritchey, Major Professor

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A Performance of Disease and Its Cures:

Lovesickness in Medieval Iberia

A Thesis Presented for the
Master of Arts
Degree
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Lillian Sanders
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Abstract

In the context of late medieval Iberia, lovesickness as a real disease was both treatable and threatening to one’s lived experience. Different forms of lovesick cures, from both learned and vernacular healers, arose from the Galenic regime of the humoral body. Cures such as charms, mixtures, and verbal expressions helped heal lovesick patients, as is shown in the archive through sources like remedy books and literary texts depicting lovesick affliction. Much of the current scholarship on lovesickness focuses on medieval medicine through the archive. Through the lens of performance studies, I argue that medieval Iberians enacted cures on lovesick patients by crafting belief and efficacious therapy through sensorial knowledge and affect. Effective cures were performed through performative cures that demonstrated use of affect, trust, and belief to encourage healthy bodies, minds, and spirits. Therefore, performing cures extended outside of traditional medicine and into avenues such as devotional music, which healed through divine methexic imagery.
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Introduction

Under my guidance, young men will learn how to control their passions. With me as their experienced master, the ship and its crew will avoid the dangerous rocks and shoals. When you were acquainting yourself with the art of love, Naso was your instructor; let him instruct you now. I shall relieve the pains that gnaw at your hearts.¹

Ovid, Remedies

Lovesickness and its accompanying melancholic symptoms were a source of great concern in late medieval Europe. Ovid’s comment on the dangers of the passions was not hyperbole for those who lived with the sickness of love. Philosophers and physicians alike were aware of the threats that lovesickness posed to the afflicted and began in the early medieval period to counteract such risks. Generally, scholars of medieval history have discussed lovesickness as a poetic topos or as a subgenre in the study of melancholia. This thesis will explore, rather, how lovesickness appears as a topic of medical and social history in medieval Iberia. In this work I address Iberian literature developed in the twelfth to fourteenth centuries that reflects the ways in which physicians and healers attempted to cure lovesickness. Those involved in the healing process, such as physicians, healers, and patients, all participated in a performance of curing the body, mind, and soul. Many cures operated within the western Galenic tradition of medicine, while incorporating vernacular practices such as charms or verbal expression to treat lovesick patients. Other cures, such as music, functioned as affective healing and devotional therapy. Through performing medicinal cures, positive affect, and belief, one

could treat lovesickness while simultaneously reaffirming the patient’s desired, lived reality. Performance itself was a way of grounding the healer and patient in a sensorial, experienced understanding of the world, allowing belief in the cures and therapies that they crafted.

This paper aims to employ a framework of performance to understand how conceptions of love and medicinal cures are embodied within Iberian lived experience and knowledge. I intend to build on previous scholarship such as the work of Carmen Caballero-Navas, Montserrat Cabré, Veronica Menaldi, and Michael Solomon. Their work has allowed me to pull together sources such as medicinal charms, folk ballads, grimoires, and lyrical poetry to analyze lovesickness treatment as a reflection of broader themes, such as misogynistic expression and musical therapy. Additionally, Naama Cohen-Hanegbi’s discussions of the history of emotions and affectivity greatly influenced my understanding of emotions as an indispensable part of the medieval medical corpus. I hope to show the connections at play in the thought-world of medieval Iberia by situating discussions of lovesickness within each of these seemingly separate but rather complementary aspects of scholarship with their respective archives and research. As Iberian studies continues to expand, I anticipate performance studies will be a promising avenue for re-evaluating the archive.

I argue both for and against the idea of “the archive,” as performance studies scholar Diana Taylor has described, attempting to redefine the influence of the archive of Iberian literature and medicinal writings to instead emphasize the repertoire and performance that produced these. Taylor’s work challenges scholars to recognize the difference between the lived practices of the repertoire – whether that be a rehearsed set of behaviors such as devotional rituals or simply presentations of the self and everyday life – as opposed to the stagnant,
potentially incomplete record of what is written down or mirrored in a document.² Of course, in many ways the repertoire of Iberian lovesickness and its performances are not replicable beyond written records. However, I will show that there are some aspects of lovesick cures that have been transmitted through social memory of affective therapy and the curative effect of music.

While the archive is undeniably essential in the creation of a thought-world that conceptualized the reality of lovesickness, I argue that both the physician and patient’s performance of love and its cures helped embody an experiential, sensorial knowledge of lovesickness and love therapy that facilitated the success and belief in the cure, oftentimes through social expression and performance. The performance, or the actions and gestures that are involved with any intentional task, was just as important to the cure’s efficacy as the intended medicine. To do this, I first begin by looking at the history of lovesickness and the medicinal structure for treating it. The Galenic framework first and foremost, is the impetus for the sensorial model of medicine that overtakes much of the Middle Ages. Galen’s elaboration of humoral theory, as well as the impact of the passions through the accidents of the soul (the six non-naturals) expanded into medical practice and eventually, as I show, into folk medicine and charms through sensorial knowledge.³ From here, I look at how the performance of Galenic

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² Diana Taylor, “Remapping Genre through Performance: From ‘American’ to ‘Hemispheric’ Studies,” *PMLA* 122, no. 5 (2007): 1417. See also Carol Symes, “The History of Medieval Theatre / Theatre of Medieval History: Dramatic Documents and the Performance of the Past” *History Compass* 7, no. 3 (2009): 32-34. By archive, Taylor refers to the body of work that is tangibly evident – such as texts, documents, artifacts, and more. The archive often supersedes the importance of the repertoire in historical research, which refers to the traces of the past that are harder to record, such as dance, theater, song, spoken word, and more, that existed as performances. The repertoire, though it can be replicated through tradition and re-performance, can never truly be captured. Therefore, preservation bias for textual and concrete evidence sometimes skews our understandings of the past.

medicine engendered a type of belief, largely through the affect and trust expressed by the healer or physician. Belief is integral to the success of a cure. For this reason, I use charms such as those found in the thirteenth-century Arabic grimoire of the *Picatrix* to show how sensorially-based knowledge can engender a kind of belief that is complementary to an understanding of the non-naturals and their impact on the body. In medieval humoral theory, the non-naturals were understood to stimulate emotion and affect, which altogether are related to the cures presented by medieval scholars for lovesickness, such as rebalancing the humors and distraction of the mind. I discuss distraction as another way to demonstrate how performing affect – in many cases misogynistic expression or verbally degrading women – could generate belief and a lived reality. Finally, I show how affect itself was used as a form of healing in music or lyrical poetry, such as those found in the *Cantigas de Santa Maria*.

Whether the remedies existed in medicinal or literary form, performance encouraged an embodied knowledge of healing and self-expression. Yet, Taylor’s theory of the archive was not conceived in a vacuum. Scholar Judith Butler argues that *performativity* enables the construction of identity and gender, through acts or performances of “bodily gestures, movements, and enactments of various kinds” which construct a “social temporality,” constantly in flux.  

4 Those behaviors may change or compel the social or cultural environments that we study through the archives, as I will show with the effect of lovesickness on gender role expression or devotional roles in late medieval Iberia. Additionally, J.L. Austin is famous for coining the term *performative* in reference to statements or language that operate as verbal acts, such as marriage

vows or making a bet. Throughout this research I refer to performative acts and cures, largely to indicate the use of sensorial cures. Sensorial cures are made possible through the experience of the body’s senses and perceived changes. However, performatives are not just sensorial, they are multi-faceted and can indicate a wide range of actions, including but not limited to medieval medicine or verbal denigration of women. Performance studies scholars greatly inform the approach to my research. To discern lovesickness and its cures, one must recognize, as Victor Turner notes, that “make-believe” can often make belief. In this instance, the performance of cures, whether objectively efficacious or not, constructed the belief necessary to manifest healing.

Making belief is the focus of this project, largely inspired by Pablo Gómez’s Experiential Caribbean. While various other scholars of affective therapy inform this research, such as Matthew Milner’s work on the history of the senses, or Peter Murray Jones’ scholarship on musical therapy, Gómez was the catalyst for my conception of sensorial belief and knowledge. In The Experiential Caribbean, Gómez argues for the influence of sensorial knowledge, which “constituted the world itself,” allowing healers to operate with authority. The healers simultaneously constructed knowledge and developed belief about the natural world, which enabled their success. Similar to Gomez’s seventeenth-century ritual practitioners who

5 Taylor, “Remapping Genre through Performance,” 1418.


developed belief through practice, late medieval Iberian physicians and healers alike engaged in a sensorial healing performance of their own understandings of the body and health.

Finally, the fundamental core of sources used in this paper is largely based on scholars of religion and medicine such as Mary Frances Wack, Bissera V. Pentcheva, and Lea T. Olsan. Wack’s *Lovesickness in the Middle Ages* was foundational to my research and has provided many sources, allowing me to build on a strong record of learned medical knowledge in the medieval world.\(^8\) From there, I turn to the curative methods of the maladies of love, most prominently charms and ritualistic acts. I take inspiration from Olsan’s inclusion of charms and other incantatory acts as a rational, integrated aspect of the medieval medical field.\(^9\) Both vernacular and learned medicinal charms were predicated off of sensorial interpretations of the world, as well as the Galenic model.

Even further, inspired by Pentcheva’s scholarship in performative imagery, I contend that devotional music in late medieval Iberia was performed as a therapeutic measure through methexic imagery. Pentcheva demonstrates Byzantine use of affective, contemplative imagery through the sound of incantation and devotional music. According to Pentcheva, the liturgical singer as a leader of psalmody produces sound that encompasses the essence of the Holy Spirit, intertwining the singer, audience, and space in a production of “performative iconicity.”\(^10\)

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Performative iconicity through music was understood as being just as curative as charms and medicinal mixtures for lovesickness in late medieval Iberia. Through methexis the image “partakes” or shares in the essence of the Holy Spirit, therefore distinguishing methexic imagery from mimetic imagery, which only represents an illusion of the Holy Spirit. Therefore I argue that devotional music acts as a performative, methexic image that captures and partakes in the essence of the divine, working through the singer’s breath as an icon (much like devotional liturgical readings or saint relics) to help heal afflictions. Affective therapy and the use of the senses are the binding measures for lovesick remedies, highlighting the importance of performance theory in understanding the how, the why, and for whom lovesickness could be treated. The experience of disease is not easily extracted from the archives. Nevertheless, through this framework I argue that lovesickness was thought to be cured through a performance of belief that relied on sensorial healing and affective expression.

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Section 1: Galen, the Passions, and amor eros

In the West, lovesickness first bloomed in Greek and Roman conceptions of love and logic. Mary Frances Wack outlines the history of lovesickness in her influential monograph, *Lovesickness in the Middle Ages*. Wack notes that from an early period, the Greeks and Romans “mistrusted passionate love” which was considered illogical and dangerous. Closely related to mania and melancholy, philosophers of antiquity discussed love as a threat to social order and often depicted it in terms of Sappho, who leapt to her death due to lovesickness. Lovesickness, an illness associated with love and the threats that could accompany it if left untreated, was a psychological illness with lived consequences. Often mistaken for a form of lovesickness in early medieval treatises, melancholy was not an umbrella term but a symptom of lovesickness as it became recognized as a distinct, separate issue.

Not until Galen (ca. 130-200 CE) did conceptions of lovesickness become medically treatable in a manner that would continue to the medieval period. Galen wrote on curing the passions, a term he employed to refer to love and various other affects like wrath, anger, lust, and fear that he said were the diseases of the soul. Inspired by Hippocrates’ *Epidemics*, Galen wrote a case summary on one Justus’ wife, outlining the first example of lovesickness in a woman. She suffered from “physiological and somatic responses to love,” such as insomnia,


fever, and sorrow. The passions of the soul (sometimes called accidents of the soul, roughly corresponding to the emotions) were non-naturals, factors that could affect the body’s internal humoral balance from the outside. The six non-naturals – “air, food and drink, waking and sleeping, motion and quiet, evacuation and repletion, and emotions” – were the aspects of therapy that one used to regain control of humoral balance. The theory of the four humors, which Galen is best known for elaborating, were the four substances that Hippocrates believed made up the body: blood, black bile, phlegm, and yellow bile. The Galenic model included a focus on the four elements (fire, earth, water, air) as well, which became a part of understanding how to treat certain symptoms, like dryness as a result of an overabundance of black bile. In fact, an excess of black bile was the main indicator of melancholy, which would later be used to define lovesick symptoms. Despite Galen’s reputation, he did not indicate specifically that humoral imbalance was a cause of lovesickness. However, Galen’s work cites the operations of the soul as reflections of the humors, and therefore it stands to reason that they are connected, whether causative or not. Should the humors be interrupted by the passions, the body would exhibit signs of illness and discontent.

15 Wack, Lovesickness, 8.

16 Wack, Lovesickness, 41.


18 Wack, Lovesickness, 7-8.

Accordingly, the passions of the soul were connected to the causes and cures of lovesickness. Wack shows how Galen’s description of “love-sorrow,” as treated in Justus’ wife, connects love to the passions and humoral theory. To be sure, there was a strong network of medical writers and physicians who both promoted Galen’s humoral theory and questioned the methods necessary to treat lovesickness. Constantine the African (d. 1098/1099 AD) was the first to compile Greek, Roman, and Arabic texts in the West for general use in the Viaticum. Constantine often cited the desire for beauty as a cause for lovesickness, stating that beauty disrupted the mind and unbalanced the humors. This compilation of scholarship incorporated a span of work on the topic, making the Viaticum influential for the growing medical scholarship at the time. Constantine the African compiled information from major sources like Julian the Apostate’s physician, Oribasius (c. 320 – 403 CE), and Arabic physicians such as Ibn al-Jazzar (ca. 895-979 CE), who were well-known as medical scholars. Arabic writers like Ibn al-Jazzar changed the course of medical lovesickness and promoted intercourse as a common cure as early as the ninth century. Constantine the African recorded various causes and cures but altogether believed that lovesickness was a disease involving desire and affliction of the mind’s faculties. His work, according to Wack, “gave Western physicians, patients, and readers a theoretical framework and a technical vocabulary with which to discuss passionate love.”

20 Wack, Lovesickness, 8.
22 Wack, Lovesickness, 32.
The term lovesickness, sometimes called *amor eros*, or *amor heroes*, derives from the Arabic and Greek form of love called *eros*. *Eros* means “greatest pleasure,” which Gerard of Berry and later Peter of Spain cite is a type of luxury that only the courtly elite (predominantly men) could afford. The term *eros* is frequently conflated in the record. Gerard of Berry refers to “heroic” love because it designated lovesickness as a singularly aristocratic disease. See Wack, *Lovesickness*, 60-62 on the terminology.

Gerard of Berry and Peter of Spain, scholars belonging to the network of knowledge in western circles like the universities of Salamanca and Montpellier, expanded the discussions on why and how lovesickness could potentially threaten noble men. In the late twelfth century, Gerard believed that mental attention, along with the body’s desire for the beloved, created a type of melancholic “fixation” that affected the mind and body. On top of this, he further developed the Galenic model by outlining how Constantine’s theory of beauty caused humoral imbalance. Even in the case of lovesickness, the humors as a conceptual framework stood at the forefront of medical writings in the Middle Ages in Iberia and parts of Provence and Italy.

The work of scholars at universities like those in Salerno, Salamanca, and Montpellier impacted work that spread throughout Iberia in the late medieval period. Peter of Spain (ca. 1215-1277 CE), in his *Questiones super Viaticum*, questioned and critiqued the writings of previous scholars in an effort to further clarify the disease of love and its mechanics. He re-emphasized the melancholic nature of lovesickness and situated it more medically than Constantine or Gerard, locating part of the problem with *amor eros* in the imaginative and

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judgement faculty of the mind. Peter stated, “Every disease consisting of depressed and disordered imagination is a disease of the brain, where thoughts and imaginings flourish.”

Due to the nature of the ailment, he argued, mania could occur in the afflicted if left untreated. The cures ranged in form, covering both physical and mental symptoms due to the duality of the sickness (affecting both mind and body), while still stemming from humoral theory. Most important for the gendered dimensions of lovesickness, the Questiones emphasized men as the primary victims of this affliction and argued that gender had a play in the intensity of symptoms present in the victim.

Recognizing the importance of cures for men especially, Peter of Spain’s Questiones recounts the cures of Arabic writer al-Rāzī as most effective, including intercourse, wise counsel and stories, baths, travel, wine, and the purging of black bile through medicinal concoctions. These cures worked through therapies of restoring the mind and body, so as to restore the overall health of the afflicted.

Eros as the “greatest pleasure” links the emotional state of lovesickness to the health and wellbeing of the body and soul, according to the Galenic model and the various writings from learned physicians. That it affected the soul means that love was treated as an affectus, much in the way that Esther Cohen has described pleasure in the Middle Ages. An affectus, or as Cohen defines it, “a passion that touches all aspects of our being,” was a framework for understanding


27 Wack, Lovesickness, 55, 89-90.


29 Peter of Spain, “Questiones super Viaticum (Version A)” in Wack, Lovesickness, 221-27, 244-499.
how the humors became unbalanced and disrupted the body, mind, and soul. The four affects are commonly known as fear, sadness, love, and happiness. In humoral theory, experiential knowledge derived from partaking in the performance of healing and medicine was the prevailing method of understanding the body. If one could experience a cure, one could believe in a cure and vice versa, as I will show. The affectus especially helps explain the causes of lovesickness as affectations of the body, such as rejection, beauty, jealousy, or lust; though they may come from outside interference, these affectations change “our inner self and formation of the self.” Little difference existed between the psychic and somatic, meaning that diseases of the soul were physically embodied and the cures for them reflect the framework as well. Anything that could potentially affect the humoral imbalance may be considered a valid experiential cure, which affects the combined mind, body, and soul.

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33 Wilcox, Judith, and John M. Riddle, "Qustā Ibn Lūqā's Physical Ligatures and the Recognition of the Placebo Effect", Medieval Encounters 1, 1 (1995): 6. Galen repeatedly noted the role of mental health in affecting the body, and later, Qustā Ibn Lūqā makes the explicit connection to the soul.
Section 2: Making Belief and Affective Medicine

The foundation for a successful cure was based on trust in the physician and belief that the therapy was effective. Scholars such as Maaike van der Lugt, Judith Wilcox, and John M. Riddle have noted the importance of belief in the practice of medieval healing. Where the professional literature often centers on cures to treat the humors through wine and literature, healers without professional training treated the humors through their own experiences of care and belief. Though learned writings on lovesickness therapies are typically the most researched form of sources on the subject, scholars tend to overlook vernacular remedies and their connections to the learned tradition. The practice of the learned physician was limited to very few individuals. Van der Lugt notes that, in the case of twelfth-century book-learned physicians, they “only ever represented a small elite among all medieval practitioners.”34 In late medieval Iberia, the exchange of medical practices was possible through not only different cultural interaction (such as Jewish and Arabic traditions) but also through both learned and vernacular forms of healing.

Vernacular, or perhaps “popular” methods, were commonly utilized in Iberia, despite the seemingly large gap in the archives. As Montserrat Cabré and Carmen Caballero-Navas show, care and healing most often took place in the home, frequently by wives and mothers. Lovesickness studies should include both learned and vernacular knowledge, as these systems often interacted and reflected one another. The network of knowledge exchange between women played a major part in the dissemination of vernacular healing - separate but altogether not

disconnected from the learned tradition. Jean Dangler discusses the role of women as healers of a variety of illnesses like “eye ailments, skin diseases, and lovesickness,” often through oral confabulation or orally transmitted knowledge.\textsuperscript{35} Caballero-Navas’ scholarship, as well as the work of Monica Green on the \textit{Trotula}, show the importance of orality in medieval healing. Many healing recipes or cures passed between women of various cultures by word of mouth, as well as in the form of ephemera or scribbled notes on the edge of manuscripts later to be compiled for future use.

To be sure, the rise of literacy and reform movements in the late eleventh and twelfth centuries fostered a greater community of scribal culture and medical writing. However, vernacular culture continued to prevail throughout the premodern period in western Europe through oral cures, vernacular poetry, and affective experience. Continued orality was especially the case for lay women, who likely did not have broad access to literacy until well into the fifteenth and sixteenth centuries.\textsuperscript{36} Of course, as scholars who are forever reliant on the archive, text and compilations are still crucial to unearthing how performance of oral culture shaped medical therapy. The repertoire exists in between the ephemera and written compilations. Women’s cures, depicting both audience and performer in predominately oral cultures, are available to us through the writing of compilers. Recipes compiled of women’s work show the

\textsuperscript{35} Jean Dangler, \textit{Mediating Fictions: Literature, Women Healers, and the Go-Between in Medieval and Early Modern Iberia} (Bucknell University Press, 2001) 20, 36.

\textsuperscript{36} Wack, \textit{Lovesickness}, 32. See also M.T. Clanchy, 13, \textit{From Memory to Written Record: England, 1066-1307}, 3rd ed. (Chichester, West Sussex, UK: John Wiley & Sons, 2013) 190-192. Clanchy mentions that some women did learn to read around the thirteenth century through Book of Hours and prayer books, but oftentimes it was a luxury afforded to elite circles and even then, writing was out of the question.
strength of oral culture at the time, as well as a connected web of information from across Iberia and the west.  

The prevalence of orality in vernacular recipes calls for an analysis of lovesickness cures and medicinal formulas as read through the healer’s performance (i.e., intentional touch, soothing speech) and the parties’ belief in the competence of the healer. Vernacular healing operated on a praxis of performing experiential knowledge and ritual care. Collections of recipes and formulas for the care of various maladies from common illnesses to cosmetic procedures show the way that women created knowledge through the performance of cures.  

The work of Dangler, and more recently Veronica Menaldi, highlights the figure of the go-between or mediator in curing lovesickness and love magic in Castilian literature. The female medianera (mediator) was a heavily sought-after figure in early medieval Iberia, whether she existed as a medical aid or, as I will show later, in the form of the Virgin Mary acting as an intercessor for the sick. As Dangler noted, even the aforementioned Arabic medical writer al-Razi (d. 925 CE) described women’s practical knowledge as particularly efficacious in his own work. 

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38 Caballero-Navas, “Care of Women’s Health and Beauty,” 150.

Beyond Christianity, there is evidence that Sephardic women in medieval Iberia used charms and vernacular formulas to both induce and cure lovesickness. In the *Book of Women’s Love*, an anonymously authored thirteenth-century Sephardic recipe compilation from the Catalonia or Provence region, the author shares several formulas compiled for the use of women practitioners in health and magic. One recipe in particular promises, “A love formula… that is so strong” the afflicted would “run after you.”\(^{40}\) The formula instructs that the user write the name of the performer and the phrase: “‘ēnō dē pari qarēquor qaraṭōm pē lōgēnan pēripōṭiyesh mī dagēran” on an apple for the woman to eat in order to make her “immediately do everything you wish.”\(^{41}\) Then, the author includes the cure as well, noting that the performer must touch the herb *qyṭwfl* to the woman and say “qūrēg ‘aṭ’an shōnā’ babē’ōr” three times. The charm is followed by various recipes for encouraging passionate love from a woman.\(^{42}\)

The book includes love formulas meant to induce love, or lovesickness, in women as opposed to men. A pattern is visible in collections of charms like the *Book of Women’s Love* in which the writer often conflates love with lovesickness and vice versa. In cases like these, I choose to treat them as one and the same because the writer includes actions to cure love, therefore categorizing love as an affliction that needs medical and/or therapeutic attention. The fact that love itself needs a cure is enough to make it lovesickness. Yet, it is important to remember that love as an *affectus* – that which affects all aspects of one’s being- can induce


\(^{41}\) Navas, *Book of Women’s Love*, 108. Please see the original transcription from Navas for a more accurate representation of the charm. There is no listed translation of the phrase.

lovesickness and therefore in the text the terms often overlap. Peter of Spain similarly conflates love with amor eros from time to time in his Questiones, in which he leans toward the implication that the reader or lovesick patient was predominantly male. Peter’s discussion of melancholic love refers to therapies for male sex organs exclusively when arguing against others’ interpretations of where the disease resides.\textsuperscript{43} Despite his own admission that women can fall ill with love in Version A of the Questiones, by the time Peter wrote Version B there was less discussion of women and more focus on treatment for men only. Perhaps this is a commentary on the notion that women were unlikely to fall ill with lovesickness. Or, the likely explanation is that lovesickness in men was a more pressing matter because it was a threat to the established gender hierarchy, as I will show later.\textsuperscript{44}

Vernacular healing, nevertheless, features the broad experiences of both women and men, as opposed to professional writings. The recipes throughout the Book of Women’s Love codify the importance of previous iterations by other practitioners, thus lending them as credible sources of knowledge for the performer. The author states, “A love formula that has been tested, has no equal and is invaluable,” therefore anchoring the performance of repeated experience as important for the result of the recipe.\textsuperscript{45} Notably, the materials used in the Book of Women’s Love tend to be readily available items that are determined useful by previous experience and are incorporated with the senses in mind. Examples of recipe materials such as the apple utilized in

\textsuperscript{43} Wack, Lovesickness, 95, 237.

\textsuperscript{44} Wack, Lovesickness, 113-116, 151-152.

\textsuperscript{45} Navas, Book of Women’s Love, 108.
the love charm above, or the herb *qyțwfl*, may have been easily acquired based on the description of the formula. The author presumes the *materia medica* in the charm does not need further explanation because it is common knowledge what *qyțwfl* is, or what it represents. Therefore, the community making use of the love formula was likely familiar with medical practices using the herb, further emphasizing how experiential knowledge was necessary to the practice.

The choice to touch the patient worked as a visual for demonstrating the effect of the charm on the body – the patient feels and sees the charm performed, thereby acknowledging the charm’s efficacy. The senses were a vehicle for the patient’s conception of the healing process. Moreover, as Jocelyn Wogan-Browne has argued, physical objects such as books or even apples were often incorporated into popular medicine as amulets. Wogan-Browne states that transmission of knowledge in non-literate communities frequently took the form of “seeing, wearing, touching, carrying, and eating.”46 She categorizes amulets as a “species of contact relic,” allowing access to the divine in the way that biblical texts impart knowledge or relics impart healing.47 A pregnancy charm from thirteenth-century Anglo-Norman medical customs uses the invocation of Holy names through carving them on an apple and eating it, much like the charm above.48 More accessible recipes call for *materia* like eggshells, blood, milk, toenails, hair, spiders, bread, and so on, which indicates other formulas likely existed and were practiced


in similar manner. As such, charms or amulets could incorporate both sensorial and religious conceptions of healing when filtered through the use of accessible *materia medica*. The interpretation of the apple through the senses – touch, taste – enabled those without access to textual healing to envision a believable cure.

Ritualistic charms, formulas, and recipes all fall under an umbrella of practices that incorporate vernacular conceptions of the lived experience and medicinal understandings of the body. Though the humors are not explicitly named, nor the work of previous physicians, many empirical cures in late medieval Europe relied on processes that were based on the sensorial application of the non-naturals. Common practices such as suspensions or ligatures involved hanging herbs, written charms, symbols, and materials from various parts of the body or weaving knots to ward off danger and promote healing. Typically, amulets and ligatures were not considered valid cures in the eyes of the church, some even being relegated to associations with women only, though this was not the case. Augustine specifically condemned “the business of hanging certain things up and tying things to other things,” in his work *On Christian Doctrine*. Thomas Aquinas only provided approval of verbal cures while criticizing almost all other methods, calling them “superstitious and unlawful” in his treatise *Summa Theologica*.


Contrastingly, though Bernard of Gordon rejected “suspended herbs around the neck… sorceries, incantations, and numerous other things,” he did not completely deny other medical charms or astrological talismans. Arnau de Vilanova, participating in the same circles, agreed with Bernard on suspensions and astrological talismans as effective practices. Though amulets were frequently associated with nontraditional practices, both aristocratic and clerical circles were known to employ them in quotidian practice. Amuletic charms were likely more common than not, considering certain leaders’ efforts to condemn them. As I will show later with my discussion of the Picatrix and the Cantigas de Santa Maria, amuletic charms were a deeply ingrained aspect of the many forms of performative cures and practices circulating throughout late medieval Iberia.

The charms and ligatures practiced by both learned and vernacular healers in Iberia and western Europe demonstrate that “the mere belief in the efficacy of a remedy will indeed help in a cure.” Physicians like Qusṭā ibn Lūqā (ca. 830-910 CE) translated Greek medical works on vernacular healing methods and recognized what Wilcox and Riddle describe as the placebo effect. Wilcox and Riddle state that the history of belief as practical healing originates back to the works of Galen as well. However, the history of belief should not be discounted or

53 Rider, “Medical Magic and the Church,” 92.

54 Wogan-Brown, “The Apple’s Message,” 50. Wogan-Brown cites Royal French women’s desire to use text-amulets at childbirth and St. Hugh of Lincoln’s “biting off fragments of Mary Magdalen’s arm at Fécamp” in Adam of Eynsham’s vita.

55 Wilcox and Riddle, “Physical Ligatures,” 2.

56 Wilcox and Riddle, “Physical Ligatures,” 3.
attributed to the “occult,” the “hidden,” or even placebo, as they term it. These terms reduce the
agency of the practitioner and gloss over the intentionality behind curative and ritual acts.

We might theorize, then, that make-believe made belief in Iberian curative practices. Matthew Milner highlights the value of understanding belief, chiefly because healing acts such
as the one outlined in the Book of Women’s Love “were a point of negotiation” between learned
knowledge systems and embodied experience.\(^{57}\) Though oftentimes knowledge did not spread
directly between the two communities (as many vernacular healers were non-literate and did not
participate in professional medical discussion), both learned and vernacular practitioners used
embodied methods of healing. The points of negotiation for vernacular healers, like the charms,
were predicated on sensorial knowledge that constructed belief. Pablo F. Gómez describes the
contentious push and pull between the “authoritative and sensorially defined” worlds of medicine
in The Experiential Caribbean. Gómez outlines how Caribbean ritual practitioners used sensory
knowledge and values to legitimize their work in the face of the growing European rationalist
models of science in the seventeenth century.\(^{58}\) “It was on a basis of a new sensorial language,”
he notes, “that Caribbean people perceptually understood and explained the physical world - how
they developed belief.”\(^{59}\) Gómez astutely describes the notion that belief came from an embodied
experience of the world that did not require further explanation beyond sensorial understanding.

\(^{57}\) Matthew Milner, “The Physics of Holy Oats: Vernacular Knowledge, Qualities, and Remedy in Fifteenth-

\(^{58}\) Gómez, Experiential Caribbean, 13.

\(^{59}\) Gómez, Experiential Caribbean, 13.
Thus far, I have argued that we can understand Iberian lovesick healing through practitioners’ combination of humoral theory and medieval conceptions of the senses as instruments for knowledge. This perspective highlights lovesickness cures as not just an attempt to obtain the “placebo” effect, but as genuine endeavors to shape an experienced, lived reality. The Sephardic love charm above used a performative touch, or sensorial cure, to release the lovesickness in the infected with the *qywfl* herb. Thus, like the practitioners chronicled in Gómez’s *Experiential Caribbean*, the performance of charms in early medieval Iberia captured a sensorial knowledge for the healer that could only be discerned through experience. In other words, the performance of charms allowed the healer and patient to ground belief in curative acts that incorporated their own experiences of the world and therefore crafted an effective cure.

Appreciating how sensorial experience of the world created belief for medieval Iberian practitioner, therefore, underscores other instances of healing performance, especially in cases where we observe shared knowledge among learned and empirical healers. Other charms, like those described in the *Picatrix*, exhibit a long history of experiential healing in the Iberian Peninsula. The *Picatrix*, an Arabic-Andalusian grimoire translated into Spanish in the late thirteenth-century court of Alfonso X, includes many talismanic charms, astrological formulas, symbols, and ritual recipes that treat psychological and internal illness. The *Picatrix*, written by an Andalusian hadith scholar named al-Qurtubī, was meant to stay in academic or elite circles but has since been recognized as having a part in a larger system of circulating knowledge. The

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formulas listed by these Iberian sources indicate a system of knowledge being circulated throughout different communities (physician versus healer, Sephardi versus Muslim). Though the *Picatrix* never mentions lovesickness by name, it offers various charms to create lovesickness, destroy it, and heal melancholy.

One example of such a charm is labeled, “So that a lover may forget his beloved.” The charm requires soaking beans in wine overnight and then cooking them to serve to the lover. By soaking the beans in wine, the healer performs an act based on their knowledge of the contraries, a theory of healing that surfaced from the Galenic model of the non-naturals. Lovesickness, according to physicians like Arnau de Vilanova, dried out the body. The “dryness” of the body became evident in symptoms such as dry eyes (perhaps from an excess of crying) caused by an overheated *spiritus* (spirit). Constantine the African, al-Rāzī, and Peter of Spain, among others, applaud wine for both its ability to rehydrate the body and to encourage distraction. The Galenic model stressed the application of contraries as the most useful rule for healing the body, as is seen here in the use of wine. By enacting a cure of contraries, learned physicians operated on a framework of knowledge very close to the *Book of Women’s Love* in which the senses are a basis for understanding what will or will not be effective. To effectively cure *amor eros* one must counteract the symptoms – dryness of the body – and thus, rehydration is used based on the physician’s experience of the sensorial qualities of dry versus wet. Both

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63 Wack, *Lovesickness*, 63. See also, 103-4.
learned and unlearned healers enabled belief through a performance of practical, sensorial knowledge. By using wine as a cure, the practitioner uses their senses like the healer addressed in the *Book of Women’s Love*. The healer recognizes the dry quality of the patient and treats it by proscribing hydration. Each cure uses a sensorial approach (touch, taste, sight) to identify the illness and cure it using the treatment deemed most suitable.

Iberian healers also used fumigation as a sensorial approach to healing afflictions related to love. A set of formulas for a “suffumigation of love” precede the lovesick cures in the *Picatrix*. The author writes that the suffumigation will “move the spirits of her own heart with love and desire toward that man by preventing her any sleep or rest” - symptoms which resemble those connected to lovesickness, such as insomnia and restlessness.64 Like the *Book of Women’s Love*, the source lists a variety of ingredients for the recipe. Where the *Picatrix* calls for chicken or human blood, the Sephardi text lists the blood of a black or white hen or menstrual blood in several recipes meant to induce love.65 Following the love charms, recipes entitled, “So that a man may have no desire for a woman,” follow the theme of lovesickness, now in terms of a curative formula. The charms promise simply to “strip the desire for a woman,” or “generate discord and enmity” using similar ingredients, and a performance of either imbibing the mixture or inhaling it through suffumigation.66 The suffumigation allows the patient to take in the cure

66 Attrell and Porreca, *Picatrix*, 199-201. Ingredients are more materials like cat’s blood and pig’s blood.
through the sense of smell, enacting an experience of the cure. An example of one of the love charms states:

*For the same [love].* Take 2 oz. of white dog’s blood and just as much of its brain; and 4 oz. each of gazelle brain and human blood. Suffumigate whomever you wish with those things blended and mixed together. That person’s spirit will feel love toward you.\(^{67}\)

Another charm following the above, meant “for generating discord and enmity,” seems intent on breaking love charms. The author states:

*For the same.* Take 4 oz. each of black cat’s blood and of chastetree; 2 oz. each of kite brain and blood and fox blood; and 4 oz. of chastetree. Pulverize the chastetree, then mix everything together. If you suffumigate someone with this, their love will be purged, and their desire and spirit will fall away from love.\(^{68}\)

As the above examples show, the *Picatrix*, and the *Book of Women’s Love*, include both charms to cause and cure lovesickness using a variety of items to attain the desired effect. The *Picatrix* employs embodied performative cures to create a believed reality, affecting the experience of the cure through inhalation.

As an example of how this healing process would work, consider sitting by a bonfire. The effects of the warmth of the fire and the smell, taste, sight, and feel of the smoke inhabit a change in how one experiences the event. Maybe it is too cloudy to see, or the smoke burns the eyes. Though there is no evidence for scale of the recipes used in the *Picatrix*, one may assume it is relatively small in contrast to a bonfire because of the formulas’ personal use. Nonetheless, the senses used to enact the charm are necessary to understand the patient’s experience of the cure.

\(^{67}\) Attrell and Porreca, *Picatrix*, 199.

\(^{68}\) Attrell and Porreca, *Picatrix*, 200.
By changing the experience of the patient, the healer was making the cure more believable, more tangible, and real. The experience of the cure not only affected the patient’s senses but also the cure’s efficacy, as the patient’s belief – not just in the therapy, but also the smoke, the fire, the aroma - made the cure a reality. In many ways this cure also demonstrates an interpretation of the non-naturals (like air, food, drink, rest, waking), exemplifying how the world can have a direct effect on one’s health. Thus, each practitioner uses a method that negotiates the body’s experience, its senses, and the humoral method. Just as Gomez describes Caribbean practitioners making use of sensorial knowledge, medieval Iberian physicians and vernacular healers alike molded a system of healing that allowed them to perform experience and craft belief.

Through these glimpses into how a patient or healer enacted performative cures such as the *Picatrix*’s Arabic love formulas translated in Alfonso X’s court, I have pulled the repertoire out of the archive. Still, the most compelling aspect of sensorial lovesickness cures is their ability to treat a patient through emotional, affective work in conjunction with treatment of the senses. Physicians’ treatments stemmed first from the Galenic model, and second from how the patient felt, whether it be physical discomfort, emotional and mental pain, or spiritual distress. In other words, “the humoral body, the very locus where medieval medicine acted, was also the experiential body of the patient.” The patient’s embodied state, whether it involved dry eyes or insomnia, ultimately informed the physician on how to enact a cure to rebalance the humors and change the patient’s live experience. The *passions*, which were essentially emotions, could be similarly manipulated through the theory of non-naturals and considered in terms of contraries to

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69 Salmón, “Pleasures and Joys,” 50.
affect the patient’s wellbeing. In Arnau de Vilanova’s *Regimen sanitatis ad regem Aragonum* (ca. 1306-1307 CE), the author outlines how a performance of positive affect, like joyful emotion or a skillful healer’s ability to soothe the patient, warms the heart and restores the humors, healing the body.

Late medieval Iberian healers comprehended lovesickness through the theory of the non-naturals, and specifically through the effects on the body of the passions of the soul. In the case of lovesickness, too much love was understood to lead to an overheating of the *spiritus* and therefore an unbalanced humoral system. The same went for an excess of the other passions of the soul like anger and sadness, which negatively affected one’s health. Sadness, in particular, caused cooling in the body, and could therefore harm the heart or center of the *spiritus*. According to Arnau, if the heart contracts from cold affect, the *spiritus* emitting from the heart will be dark and heavy, causing alteration of the senses and good judgement.\(^{70}\) For instance, Arnau prescribed against negative humoral change when treating King Jaume II of Aragon. As part of his treatment, Arnau explained to the king that he must avoid sadness and anger. Sadness could cause exhaustion, weight loss, and even alter the sensory perception of an individual, putting them at risk for lapses in judgement not unlike the irrationality often associated with lovesickness. Instead, Arnau told the king to seek joy and happiness to revive his spirits and uplift his constitution. King Jaume II took to this information easily, recognizing the benefit of avoiding negative emotions for his physical wellbeing.\(^{71}\)

\(^{70}\) Salmón, “Pleasures and Joys,” 50-51.

\(^{71}\) Salmón, “Pleasures and Joys,” 50-53.
Because so much of healing was tied up in affects, the success of therapies in the Iberian Middle Ages required the practitioner to give a convincing performance. A physician’s speech or attitude was of the utmost importance. Fernando Salmón has called attention to one comment from the thirteenth century on the Hippocratic *Aphorisms*, which states: *Speret qui metuit. Morituros vivere vidi, spe duce victuros, spe morientie mori.* In other words, medieval practitioners understood that hope can lead to a promising life, but life without hope will be deadly. These words were more than just inspirational prose. Arnau taught his students that handling negative emotions and performing the cure in a manner that encouraged positivity could effectively heal in its own right, enabling humoral change through the theory of contraries and relieving the spirit. If the patient experienced concern or fear over their condition, the physician had an obligation to perform a cure that reinstated humoral harmony, whether it be a tincture, the performance of joy and hope in the therapy’s success, or a combination of these therapies. As a result, Arnau’s connection between the *passions* and the body’s health were applicable to many of the prescribed methods for curing *amor eros.* The patient may experience a change in the body through a cure but *feeling* that change internally was just as essential to the efficacy of the cure because belief was thought to be constructed through positive affect.

Certain medieval physicians recognized that speech had the power to create positive affect and influence healing. For instance, the writings of Urso of Salerno (ca. 1160-1200 CE)

72 Salmón, “Pleasures and Joys,” 51.

73 Salmón, “Pleasures and Joys,” 52.

offered rational or naturalistic explanations for the trust between healer and patient. Urso’s *Aphorisms* address incantations and the affect that healers give to incantations through their speech. Stating that the healer exhales pure spirits as a means of cleansing the air, he played off the senses and the four elements, relating them to the trustworthiness of the healer. For Urso, the spirits operated as a reflection of the soul and body. If the healer was not good-natured and trustworthy, then their exhalations of breath would not operate as pure or healing.\(^7^5\) In the words of Urso of Salerno, “[They have effect] through the nature of the speaker, when a physician who is born from pure matter and whose life functions are ensured by pure spirits frequently addresses the patient with soothing speech… And thus it happens that the humors and members are purified by the diffusion of pure spirits throughout the members, leading to an alleviation in the patient.”\(^7^6\) Like the cures above, the physician’s soothing speech was critical to the performance of the cure and the parties’ belief in the act. The *Picatrix* author offered the same logic in terms of efficacy and intention; the grimoire states, “to link one’s whole will and belief to the operation… only then will everything actually be fulfilled.”\(^7^7\) To both physicians, efficacy was contingent on trust and the skill required to positively affirm the cure.

\(^7^5\) Van der Lugt, “Learned Physician as Charismatic Healer,” 314.

\(^7^6\) Van der Lugt, “Learned Physician as Charismatic Healer,” 342-343, lines 87-98; “Ex natura proferentis, dum medicus ex pura materia generatus, puris spiritibus vegetatus, aegrum blando sermone frequenter alloquendo… Sicque fit, ut purioribus spiritibus per membra diffusis, humorum et membrorum fiat depuratio, unde aegri sequitur allevatio.”

\(^7^7\) Attrell and Perreca, *Picatrix*, 60.
Therefore, as I have shown with the _passions_ as well, bodily therapy alone was not enough for Iberian healers - trust, performance, and faith in the cure worked in tandem to help the performer construct a cure that was believable. Arnau and Urso’s writings emphasize how the body’s reactions to emotions are physically experienced, integrating emotions as a part of curative therapy. Performances of speech with positive affect (i.e. positive emotion) were believed to warm the body and aid the physician in their efforts to heal. For late medieval European practitioners, these aspects of performance were the key ingredients to how and why lovesickness must be treated through certain pathways. To be sure, restoring the humors was the primary aim in many of these cures. However, it was the use of the senses and the power of affect that made the cures possible and effective. These tools, when used in a practical manner, enabled change for the body, mind, and soul.
Section 3: Performance and Charms for Lovesickness

To further illustrate the use of performance in lovesick cures, I intend to examine a set of cures that focus more on verbal charms and less on herbal remedy. Scholars Peter Murray Jones and Lea T. Olsan identify rituals like verbal charms and touching or tying things to the body (ligatures) as “communicative acts,” which helped to create a different reality for the performer of the ritual, much like soothing speech can. Jones and Olsan note the importance of repetition in charms for establishing trustworthy knowledge. Repetition aids in giving the charm authority, as “the accumulation of prior acts creates the illocutionary force or power of the ritual.”78 In other words, cures were more credible and believable if performed previously by others. Therefore, the charm or ritual derived power from the authority of previous iterations, as well as trust between the performer and the audience (or, healer and patient). Jones and Olsan build on J.L. Austin’s “performative acts,” transforming Austin’s framework to include a more communal approach to the idea of shared knowledge. By acting out the “tradition of previous performances,” the ritual performs an embodied understanding of change in the experienced reality, while simultaneously giving it authority as an efficacious practice.79

Efficacy was crucial, after all; from the perspective of gender, \textit{amor eros} reflected a larger societal pattern of anxieties surrounding hierarchy and power. It is not surprising that the learned medical texts on lovesickness in late medieval Europe exist solely from and for the male perspective. Peter of Spain always indicated that his reader was male, and more often than not,

\footnotesize{\begin{itemize}
\item 78 Jones and Olsan, ”Performative rituals,” 408-410.
\item 79 Jones and Olson, “Performative Rituals,” 409.
\end{itemize}}
Peter’s discussion of melancholic love referred to therapies for males almost exclusively despite his own admission that women could fall ill with love. Similarly, Gerard of Berry indicated that lovesickness was a “noble” disease, affecting courtly men with a tendency for love to become aestheticized in the eyes of the elite. Wack argues that the idealization of male lovesickness is due to the growth of “noble love” as a social behavior that became recognized from the twelfth to fourteenth centuries. Lovesickness in men, she notes, was a “social and psychological response to historical contradictions in aristocratic culture.” The contradictions Wack references were the arising conflicts between gender and power, namely that men who fell ill with lovesickness idealized the beloved above all other things. The rise in medical lovesickness literature reflects the anxieties of men who felt that love for women interrupted the men’s “self-rule” as lords of their own actions. Lovesick men became feminine in their symptomatic “infantile” behavior of wasting, crying, and insomnia, leading medieval physicians to read lovesickness as a type of weakness and irrationality. For instance, the Andalusian love poet Ibn Zaydūn (d. 1070) famously wrote, “Love wasted him and he became too thin to see. / He became, for desires, the prey. From him, all eyes were pulled away.” Prioritizing women

80 Wack, Lovesickness, 95, 237.


82 Wack, Lovesickness, 146-7. See page 150 on noble men as the focus. Wack states that this does not undermine lovesickness as a disease because lovesickness traces back to the pre-medieval period.

83 Wack, Lovesickness, 151-152.


emasculated men, according to Wack, as they became helpless in their illness and unable to control their emotions and reason.\textsuperscript{86} When physicians depicted love as a sickness, a disease that needed treatment from the contagion of women’s bodies, they imagined lovesickness as a factor closely related to idealized masculinity and control of the social order.\textsuperscript{87} Irrational lovesickness was dangerous; it threatened to disrupt the established gender hierarchy of the Middle Ages, and as a result, healing the mind was crucial to re-establishing it.

Therefore, many of the remedies for lovesickness do not reflect positive affect in the manner that Urso and Arnau maintained, such as soothing speech. The last set of cures throws a small wrench into the analysis provided for understanding sensorial, experienced cures. As I have argued, many of the above cures were possible through a performance of affect and the senses, which infused trust and belief into the performative therapy. Through the senses, positive affects emerged and were embodied, allowing salubrious change in the humoral system and encouraging healthy minds and bodies. Furthermore, repetition and incantatory charms were considered successful because of their authority and illocutionary power. Yet, many of the writers such as Peter of Spain and Constantine the African recounted distraction through travel, lively discussion, and recited poetry as compelling curative procedures for \textit{amor eros}. Distraction, as it turns out, often surfaces in the texts as denigration of women through discussion and literature.

\textsuperscript{86} Wack, \textit{Lovesickness}, 151- 152.

\textsuperscript{87} Mary Douglas, \textit{Purity and Danger: An Analysis of Concepts of Pollution and Taboo} (Florence: Taylor and Francis, 2013) 3.
Consequently, when medical cures or herbal remedies did not work, distraction became the most accessible cure. The literary historian Glending Olson has shown how medieval health handbooks, such as the *Tacuinum sanitatis* by Ibn Butlan, recommend therapies such as “reciting poetry, acting out anecdotes and fables,” and “telling stories” to friends.\(^{88}\) The methods described by Solomon encompass an explanatory model of performance. Methods of distraction like poetry and acting were not only performative acts but were also meant to “maintain in the patient’s body a cheerful disposition” to encourage health, much like Urso of Salerno’s theory of pure spirits and positive affect.\(^{89}\) Nonetheless, performance of discourse intimated consequences that reached further than just good-natured distraction. One of the most prevalent cures was the performance and embodiment of misogyny. Emerging partly as a form of distraction, Peter of Spain argued that “the beloved ought to be scorned before the lovesick patient.”\(^{90}\) Similarly, Bernard of Gordon, a physician and scholar from the University of Montepellier, also testified to disparaging women as a rhetorical cure.\(^{91}\) At the font of these misogynistic remedies was Ovid, one of the earliest writers on lovesickness in the Roman world, who wrote in his *Remedies for Love*:

> If she has full and round breasts, call her a fat pig; if she’s slender, thin as a rail; if she’s dark, black as the ace of spades. If she has city ways, label her stuck-up and bitchy; if she

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\(^{88}\) Solomon, *Literature of Misogyny*, 60. See also Jones, “Music Therapy in the Later Middle Ages”, 135.

\(^{89}\) Solomon, *Literature of Misogyny*, 60.

\(^{90}\) Peter of Spain, “*Questiones super Viciatum*: Version A” in Wack, *Lovesickness*, 228-9; “Item dicit actor in littera quod res dilecta debet vituperari coram paciente amorem hereos…” He also later confirms this, saying “Ad alud dicendum quod quamvis vituperium faciat patientem rememorari sue amasie, verumptamen retrahit mentem vel cogitationem patientis a re dilecta [To the next it must be said that although scorn makes the patient remember his beloved, in fact it withdraws the mind or thought of the patient from the beloved object.]”

\(^{91}\) Solomon, *Literature of Misogyny*, 62.
is simple and good, call her a hick from the farm. Whatever talent she lacks, coax and cajole her to use it; if she hasn't a voice, try to persuade her to sing; if she trips over her feet, make her dance; if her accent’s atrocious get her to talk; all thumbs? - call for the zither or lyre. If she waddles or limps, be sure to take her out walking. If she has bulging breasts, don’t let her wear a brassiere. If her teeth aren’t too straight, tell her a comical story.  

The long history of misogyny is indicative of deeply ingrained anxieties about gender and power. Solomon has shown that the works of Boccaccio, Juan de Mena, and more depict therapies like the one written by Ovid. Even further, Bernard of Gordon advised that the healer get an old or ugly woman to confabulate remarks about the beloved to further distract the lovesick patient. Ironically enough, the use of a confabulator holds to the medical practices of the time in which women (oftentimes older women) were used as medianeras, or intercessors, as part of the healing process. Educated Iberian women treated patients with a variety of remedies, as the Book of Women’s Love demonstrates, operating as not only confabulators to the sick but also as doctors, surgeons, medicine women, and more. Not unlike the Virgin Mary in the Cantigas de Santa Maria as discussed in the following section, women provided continuous physical and affective treatment, even in cases where women themselves were treated as the contagion.


93 Solomon, Literature of Misogyny, 63.

94 Dangler, Mediating Fictions, 9, 20-21, 77.
The above passage from Ovid complicates the previously stated cures, such as positive affect, soothing speech, trust between parties, and belief. If pure spirits and joy were meant to help heal patients, then the modern reader might consider misogyny as a type of negative spirit that would not promote healing. This does not seem to be the case for a few potential reasons. First, many of the misogynistic therapies were performed in communal, social settings, between friends or like-minded individuals. For distractive cures, trust and belief were created through the sharing of the performance, or partaking in the cure together, thus making it a more believable reality. The social nature of distractive, performative cures is especially evident when it is a “lively discussion” among friends who are simultaneously reinforcing their perceptions of the intended social order. Frequently poetry recitation or discussion was accompanied by wine, as is evidenced in the anonymous thirteenth-century Andalusian poem, “Pass to us the cups / with which sorrow is forgotten, / And summon [our] companions / since love is at an end.”95 Second, one must consider that this practice, though recorded as a type of serious medical therapy among respected writers was likely, simply, enjoyable. It is not a far leap to imagine that even though the speech being uttered is negative on the surface to modern readers, the embodied experience of sharing these feelings of frustration was therapeutic in itself, and thus still sits within a framework for performing positive affect. By performing misogyny, the speaker reinforced the desired reality of the gendered hierarchy for both performer and audience, restructuring the perceived imbalance that lovesickness projects onto the afflicted.

Distractive misogynistic cures were also performed for defensive or preventative measures, similar to the protective incantations of charms or talismans. An example of protective incantations exists in the thirteenth-century poem *Razón de amor*. In his monograph *Inscribed Power*, Ryan D. Giles indicates a prayer preceding this poem that scholars have often considered unrelated to the story. Giles shows that the prayer, set in Latin as opposed to the vernacular Spanish *cuaderna via* of the poem, is an “exorcistic prayer against bad weather,” a pre-emptive protective measure for the reader reciting the *Razon de amor*.96 Full of sexual imagery, the poem indicates that the two lovers’ interactions are depicted as corrupting the body and the Spirit, through the imagery of mixing water with wine. The preceding poem uses “liturgical elements, and a series of petitions, divine names, and scriptural citations” to warn against “encantaciones o conjurios por mulleres [the incantations and conjurations of women].”97 Thus, almost explicitly, the literature offers a protective verbal charm for the contagious elements (i.e., love, women) presented in the literature. Therefore, as Michael Solomon argues, it is not entirely unheard of to consider the “distractions” of literature to also operate as discursive protection. The poem included its own version of protection, knowing that the literature could influence the reader much like verbal charms or incantations do through the non-naturals. Discursive distractions therefore become performatives – verbal acts that constitute a change in the desired reality. The literature’s misogynistic undertones identify women and love of women as dangerous for the healthy, noble man and provides a performative cure for the contagion.


In fact, the popular Catalanian ballad *La gentil dama y el rústico pastor* may help illuminate the benefits of performative discursive protection even further. Often referred to as the first known written romance, the work dates back to 1421. The author, Jaume d’Olesa, was a Majorcan law student from Bologna, Italy. The version he copied down incorporates a mixture of Spanish and Catalan vernacular and has been found in various different forms throughout the late medieval to early modern period.\(^98\) The ballad depicts a woman attempting to seduce a shepherd, who rejects her and attempts to resist her verbal temptations. The song begins, “Estase la gentil dama passeando en su vergel los pies tenía descalços que era maravilla vera hablárme desde lexos, no le quise responder.” [A gentle lady was strolling barefoot through her garden. What a marvel to see! She spoke to me from afar but I did not want to respond.]\(^99\) The ballad continues with a banter between the two, the man repeatedly refusing the young woman despite recognizing her beauty. She taunts the shepherd, and beckons him, but he refuses to follow.

The young Spanish woman embodies what Solomon calls the “poetics of infection,” as her body and speech are representative of what men should avoid in order to be healthy. The man’s repeated rejection serves as armor against her advances, preventing any harm to his well-being.\(^100\) Therefore, the source recognizes the speech of women as contagious, warranting misogynistic speech or action in defense of the healthy male body. Again, lovesickness and its cures were embodied in a lived experience of knowledge about health. By defending himself, the


\(^{100}\) Solomon, *Misogyny*, 74.
shepherd performs a discursive, preventative measure to protect his body and mind. The ballad, though playful and meant for distraction, invoked a discursive “battlefield” in which the shepherd defends himself from the contagious utterances of the young woman.\textsuperscript{101} Yet, unlike the previous poem, the ballad did not have to specifically provide a way to protect the reader because the therapy was built into the writing. By including the imagery of the shepherd refusing the young woman, the singer of the ballad (or perhaps even performer, acting out the ballad, as was sometimes the case) is provided with a preventative measure against lovesickness, while also reinstating women as the sites of infection.

\textsuperscript{101} Solomon, Misogyny, 74.
Section 4: Alfonso X’s Dis-ease and Methexic Imagery

In the case of lovesickness especially, I argue that a key aspect of performing cures was not just the ability of the non-naturals, such as passions of the soul or ambient air, to affect the body, but that it was the methexic image transmitted through communicative acts which made Iberian practitioners believe that these verbal and performative cures worked. The methexic image refers to the repertoire’s ability to take precedence over the archive. Previously, scholarship concerning lovesickness noted the role of the archive, or medical discourse, in perpetuating lovesickness and its cures. Wack argued that medical texts themselves “made it possible for the literary representations of erotic passion to be interpreted mimetically or realistically, as representations of real life.” While the archive's value is immeasurable in allowing further scholarship (and allowing our glimpse into the fleeting world of the repertoire), I hope to build on the previous work that overlooks the role of performance in circulating knowledge and creating medical ritual. Also, I intend to demonstrate how literary cures can and should be examined through a performance lens. The methexic, or something which “partakes in” the image according to Bissara Pentcheva, can serve as a way of analyzing how trust and belief were interpreted by patient and physician. As the sources show, much of the work European physicians practiced was heavily based on belief and affect – such as soothing speech,


103 Pentcheva, “Performative Images,” 409. The definition of methexic according to Pentcheva originates from the Greek μετέχω meaning “to partake, to share;” meaning participation in the way that one partakes in the Eucharist. In Greek theatre methexic refers to the audience’s participation as a part of “group sharing,” which helps explain the use of methexic here. The representational is not the full extent of the way the host interacts with the object, ritual, or practice. In the Eucharist the bread is not just representational, it is transformed through transubstantiation, therefore making it a methexic image of God. Methexic conveys that the image, or in this case the breath of the singer, acts and partakes in the Holy Spirit itself.
repetition, and trust. This type of work was not a representation of lovesickness and healing but rather an ingrained aspect of it. Without these embodied acts of care, which must be performed only in the moment, the patient would not have understood themselves to experience a cure. The same can be said for performances of lovesickness as an illness. Medical discourse and texts only represent the cure; the performance transformed the encounter which partook in the essence of the cure and thereby transcended the representational.

As such, I turn to one literary cure to outline how all these aspects – sensorial qualities, belief, repetition, performance, and misogyny – were enacted through methexic healing. Misogynistic literature like the famous *Libro de Buen Amor*, also exhibits disparaging descriptions of women to discourage marriage and love. The *Libro de Buen Amor*, written in the early fourteenth century in the didactic genre of the *mester de clerecía* (ministry of the clergy) by Juan Ruiz, the Archpriest of Hita, contains a series of moralistic tales intended to instruct men on good versus bad love. The work is both satirical and allegorical in many sections, often invoking *exempla* or moral lessons for the reader. Much like the earlier descriptions from Ovid, the *Libro de Buen Amor* exhibits derogatory descriptions of women, perhaps in an effort to discourage men from falling into lovesickness too easily.

For instance, Ruiz warns, “Su boca de alana et los rostros muy gordos:/ dientes anchos et luengos, asnudos e muy mordos,/ las sobreçejas anchas e más negras que tordos: los que quieran casarse aquí, non sean sordos.” [Her mouth and face are flattened and fat, with widened and elongated teeth, biting and horsy, with thick eyebrows, blacker than those of thrush/ Listen to me
those who want to marry, don’t be deaf]. Much like the passage from Ovid’s *Remedies*, the nature of the *Libro de Buen Amor* relies on performing a type of superiority against women, thus embodying it, and re-establishing a sense of gender hierarchy. If methexic imagery, as Pentcheva describes, partakes in - thus having and expelling the essence of the image - then disparaging women does the same for the cures above. With belief and intention, performing the cure of misogyny fixated the image of ugly or evil women in the minds of men while expelling it as well. Therefore, the communicative act of disparaging women was a methexic image, both containing and expelling misogyny, giving the cure the power to heal the mind.

Distraction and performed misogyny became methexic images that men transmitted for their own healing, or the sake of others. Performance of the distraction as a curative therapy often involved an audience, or at least the participation of multiple parties. There may have been the performer/healer, as well as an audience, who aided in the healing process. Furthermore, misogynistic literature reinforced the performed behavior. Texts such as the *Libro de Buen Amor* or Andalusian poetry, whether performed or not, coached a male audience on the type of behavior that could cure male weakness, namely degradation and defensive discourse. By enacting verbal attacks, or defense, the performer transmits the image of the ideal he wishes to achieve and take part in, such as re-establishing the gender hierarchy of male dominance. Methexic imagery is a key to understanding how lovesick cures in Iberia manifested, as it incorporates the senses, affect, and belief in the cure.

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St. Isidore demonstrates as early as the seventh century that Iberian sources recognized music as an affective experience, capable of moving one’s emotions and experience. Influenced by Augustine’s *Confessionum*, Isidore wrote that,

The custom of singing was instituted in the church, in order that those whom the words do not inspire with devotion would be moved by the attractive modulations… For our souls are more religiously and ardently moved toward the flame of piety through these sacred words when there is singing than when there is not. All our emotions are more excited through some mysterious kinship to the diversity or novelty of sounds when [something] is sung by an attractive and technically skilled voice.  

Therefore, it is not surprising that music as medicine was a well-respected source of therapy in the Middle Ages. As Isidore implies, music easily stimulated the non-naturals and *passions of the soul* – fear, joy, sorrow – that affected the four humors. Other medical authorities, such as Averroes (Ibn Rushd), believed that the strings of an instrument could contain intentional qualities to move those who heard its sound. Arnau de Vilanova recommended music as a way to promote a cheerful and gladdened mind (*laetus et gaudens*) for one’s health. Writing a commentary on the *Regimen sanitatis salernitanum*, Arnau acknowledged music’s power to work through the *passions*, much like Ibn Butlan’s translation of the *Tacuinum sanitatis*. The

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105 Isidore of Seville, *De ecclesiasticis officis* 1.5.2, in Emma Hornby, “Musical Values and Practice in Old Hispanic Chant,” *Journal of the American Musicological Society* 69, no. 3 (2016): 600, Table 2; “consuetudo cantandi est instituta ut, quia uerbis non compunguntur, suauitate modulaminis moueantur… Nam in ipisis sanctis dictis religiousus et ardentius mouentur animi nostri ad flammam pietatis cum cantatus quam si non cantetur. Omnes enim affectus nostri pro sonorum diuersitate uel noutate nescio qua occultu familiaritate excitantur magis cum suaui et artificiosa uoce cantatur.”


treatise regards musical instruments as “aids to health,” which allowed physicians to “employ tones for the sick mind, just as they do medicines for the sick body.” Avicenna (Ibn Sīnā) wrote commentaries on using the technical aspects of music such as meter and harmony, which allowed one to read the pulse of the patient, whose bodies reacted to the effects of music on the spiritus. Music, then, was a recognized curative therapy in Iberia that warrants further analysis, especially for a disease such as amor eros that affects all aspects of one’s being – mind, body, and soul.

Lyrical poetry, such as Alfonso X of Castile’s Cantigas de Santa Maria, further demonstrates the performance of lovesickness cures from a Christian literary perspective. King Alfonso X’s court produced various works of educational, religious, and cultural content like the Cantigas, which incorporated centuries of interaction between Christianity, Islam, and Judaism in Iberia. Composed in the thirteenth century, the Cantigas are the most famous work from Alfonso’s court. Encapsulated in four manuscripts, the set of 420 canticles, composed as both praises and miracles of the Virgin Mary, serve as a reminder of the steps Alfonso X took to promote his court as a cultural center. The canticles epitomize a growing body of work in the troubadour genre in Spain and the surrounding regions as well. The Cantigas were composed in Galician-Portuguese vernacular as opposed to Latin, demonstrating the growing use of vernacular during the period in elite circles and literature.


110 Ritchey, Acts of Care, 203.

111 Alfonso X, Cantigas de Santa Maria, 2nd ed. Edited by Jesús Montoya Martínez, (Madrid: Cátedra, 1997) 14-16. See also, Veronica Menaldi, Love, Magic, and Control in Premodern Iberian Literature (New York, NY:
In fact, it was in Alfonso’s court that various languages and literary genres were exchanged. Scholars such as Josiah Blackmore and Samuel G. Armistead argue that the genres of Castilian and Galician-Portuguese poetry such as the cantigas de amor and cantigas de amigo of the twelfth through fourteenth centuries had similar influences as the Cantigas de Santa Maria. The two styles were impacted by Andalusian-Arabic poetic themes and forms, echoing the influence of Arabic medical and poetic texts on western medicine as well. The cantigas de amor and amigo exhibit a theme akin to lovesickness called coita de amor, or affliction of love. The cantigas de amor and amigo prioritize love as a form of suffering, calling upon “a kind of experience generated by love, a poetic reveling in sorrow and anguish that emerges as the more accomplished form of amorous effect.”

Blackmore’s theory of lovesick suffering can be seen in the emphasis on lovesick suffering in the Cantigas, such as the story of the priest in Cantiga 125, or even the loor refrains depicting Alfonso’s longing for the Virgin, as I will show.

Indeed, Alfonso X’s patronage to honor the Virgin Mary is perhaps the most popular work among the collection of commissioned pieces from his court. Unlike his predecessors, Alfonso X never authorized an official biography, though some believe that the Cantigas effectively encapsulate specified narratives from his life and the history of Castile. Known for his court’s translations of Islamic science and learning, as well as his commissions of poetry and

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Routledge, 2021) 21. I will refer to Alfonso X as the author, though many scholars recognize that Alfonso X likely only authored a few of the canticles.


literature, Alfonso X “el Sabio” (the Wise) earned a reputation for being the ultimate patron of medieval Castile.¹¹⁴ His patronage facilitated collaborative efforts to compile and develop texts, music, and more, through the collection and translation of Latin and Arabic sources, often with the help of Jewish translators. Latin sources such as the popularized miracles of the Virgin Mary can be found in both the Cantigas, alongside original stories about Castile and the king. The endeavor to produce a standardized source of references from the king’s court shows that Alfonso intended this work to both aid in administration of the kingdom and to promote his status as a patron of the arts.¹¹⁵

Alfonso X promoted the image of himself as patron, sovereign, and lovesick devotee through the Cantigas, which scholars like Joseph O’Callaghan contend held more compelling significance to the king. Alfonso X claimed to be the Virgin Mary’s troubadour and vowed to never do the same for another woman, almost like he was lovesick himself. Alfonso’s vow points to the popularization of courtly love during the period, and in the Cantigas as well, which precedes our understanding of lovesickness in the poems. Courtly love poetry often depicted lovesickness as a theme, and the Cantigas are no different. Many of the tales in the Cantigas depict moments of mental anguish, melancholy, and lovesickness, employing “infirmities and psychological conditions to set the stage for the Virgin Mary… to display Her power and mercy upon the suffering.”¹¹⁶ Alfonso X declared his love for his Sennor onrrada (honored liege),


applying a power dynamic common in courtly love poetry that “stressed the superior social 
standing of the beloved to the lover.” Alfonso X venerated the Virgin and looked to her for her 
healing and intercessory powers to heal the divine lovesickness that plagued him. By 
commissioning the Cantigas, Alfonso X used this opportunity to display his authority as a ruler 
of secular and learned knowledge by fusing courtly love poetry with his performance as the 
ultimate patron of the Virgin Mary. The Cantigas’ portrayal of healing cures and love magic 
illuminate thirteenth-century notions of the body and medicine. I use the collection to 
demonstrate how performative ritual acts, courtly love hierarchies, and lovesickness come 
together in the canticles, allowing the performer to create methexic images that partake in the 
creation of experiential healing.

Despite the fount of legends and miracles that comprise the bulk of the songs of the 
Cantigas, much of the information in the manuscript is biographical and of considerable 
historical merit. Alfonso X integrated various elements of his own life into the Cantigas. One 
illustration in the MS Banco Rari collection even depicts Alfonso X using the physical 
manuscript book to heal himself from injury. Cantiga 209 details the story of Alfonso’s 
miraculous healing from the book’s touch. The canticle portrays a bedridden, gravely injured 
Alfonso X. The miniature, which is intricately detailed in its portrayal of the canticle, displays

117 O’Callaghan, Alfonso X and the Cantigas de Santa Maria, 14-16. Quote on 16; O’Callaghan chooses to translate Sennor as liege instead of lord in this instance to indicate the power the Virgin holds over Alfonso X.

the power of Alfonso’s story and the king himself as a devotee of the Virgin. The bed he lies in is surrounded with motifs of castles and lions, the icons of Castile-Leon, signifying his royalty alongside his golden crown. The imagery connects these two overarching powers by presenting the king of Castile-Leon as both devotee and supplicant to the Virgin Mary. In spite of their efforts, the physicians of the court cannot seem to heal Alfonso’s mysterious injury. The court attendants weep for him, afraid that he will surely die if nothing more can be done. A brightly colored peacock feather fans the king as he lies in bed, praying for relief. Alfonso X, steadfast in his devotion, orders for the attendants to place the bound compilation of the Cantigas, open, upon his wound. Noticeably, the red of the castle motifs echoes the red of the bound Cantigas in Alfonso’s hands, perhaps a minor way to signify the connection between the two forces. Incredibly, the pain subsides and the king praises Mary for her healing touch by prostrating on the ground alongside the rest of the court, demonstrating his own obedience and submission (Figure 1).  

King Alfonso’s use of the book’s healing powers depicts a performance of healing that incorporates touch and sensory knowledge much like the “contact relic” of the apple in the Book of Women’s Love. The text as a contact relic transmits affect and allows the performer to heal through an experienced sensorial cure. Medical scholars Peter Jones and Lea Olsan similarly characterize performative rituals as, “verbal charms, prayers, ligatures, amulets, as well as

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Figure 1. *King Alfonso is Healed by the Virgin’s Book* 120

120 Alfonso X, re di Castiglia e di León, *King Alfonso is Healed by the Virgin’s Book Cantigas del Rey D. Alfonso el Sabio*, facsimile; mm 450 x 314 (Firenze, BNCF, Banco Rari 20) F95, Archive.org, January 15, 2022.
physical gestures and sequences of actions utilizing special objects.”

Performative rituals as “verbal and physical acts” also “reiterate prior uses,” giving them authority as previously practiced actions. Thus, performative ritual is applicable to a broad spectrum of practices that are acting upon the “illocutionary force” of all the previous performances. The rituals create a new, believable reality. Performative rituals come in many forms from charms to amulets and often resemble other forms when written down, such as medical recipes. The most noteworthy difference between items like recipes and charms is that charms tend to exhibit patterns that either repeat or can be found in other places of note, such as church liturgies. Additionally, in performative rituals the performer intends to complete the action for reasons beyond performing.

In the case of Alfonso X, the Cantigas become part of the performative ritual that calls forth the Virgin Mary and her intercession.

Alfonso X’s efforts in the Cantigas reflect how he turns his performance as a lovesick devotee into an Sennor onrrada (honored liege) by calling forth the Virgin’s intercession. During the twelfth to fourteenth centuries, a spectrum of folktales, legends, and miracles about the Virgin Mary’s intercessory powers circulated throughout Iberia. For instance, Gonzalo de Berceo writes his collection Los Milagros de Santa Maria around the same time as the Cantigas, including many well-known miracles in the same didactic genre as the Libro de Buen Amor. The miracles, meant to instruct others on the intercessory powers of the Virgin, exhibit similar beliefs

121 Jones and Olsan, “Performative Rituals,” 407.
about Mary’s abilities to cure any and all afflictions. The Cantigas recognize the authority of previous iterations of the Virgin’s power, such as those in Los Milagros, and infuses belief into the rituals performed like Cantiga 209. Therefore, the canticles display a performative ritual of devotion, allowing Alfonso X’s image to transcend the role of devotee and become an example of the Virgin’s power. When Alfonso X uses the physical book to heal himself, he performs actions to construct a reality based on his knowledge of previous intercessions from the Virgin.

Beyond the Cantigas’ ability to exhibit Mary’s powerful imagery and narrative is the use of sound to convey the message of the Cantigas. Sound is integral to the effect and creation of lyrical poetry, which constructs new realities through performative acts and methexic imagery. For example, Esther Cohen has shown that music and singing were important pleasures for monastic communities in the Middle Ages. Monastic singing was a pastime that could reflect on the sound of the heavenly choirs, thus making it worthwhile for affective spiritual embodiment. Treating devotional music as an affective experience, much like Cohen, can illuminate the way that one performed cures for amor eros from poetry.

Bissera Pentcheva discusses devotional music and methexic imagery, or what she calls cosmic sound, in her article “Performative Images and Cosmic Sound in the Exultet Liturgy.” Pentcheva separates spiritual methexic imagery from mimetic by proclaiming that methexic images transcend the representational, as they partake in the essence of God through breath and


spirit. Pentcheva notes that the singer, in this case the deacon leading the Exultet liturgy, “is an example of this nonrepresentational, performative image; he is both ‘filled with the Spirit’ (impletus Spiritu) and expels some of its energy in song.”¹²⁶ She recounts how singing was crucial to performing liturgical ritual in late antiquity, as Christian song and chant attune the faithful with the imago Dei.¹²⁷ Pentcheva’s observations about Byzantine liturgical breath recall our discussion of Urso of Salerno in the previous chapter. Urso’s writings on smooth speech as positive affect, as well as the repetitive nature of musical performance are demonstrations of how music can enable both performer and audience to experience embodied change. Unlike other performative rituals, the audience and performer are both a part of the experienced change because music’s resonating quality. For lovesick cures, healing of the body was typically connected to healing of the mind and soul as well. Therefore, looking at devotional music as a therapeutic affective experience highlights how medieval practitioners understood transformative performance and crafted belief.

The repetitive sound in prayers, hymns, and praises invoked the experiential change necessary to heal through performative ritual. The Cantigas incorporated breaks between the stories of the canticles with praises to the Virgin to signify the desire for her divine love. By singing the repeated praises, or loors, as the refrains of the canticles, the repetition called back to previous utterances of prayer and devotional ritual which enable the performer to create a


¹²⁷ Pentcheva, “Performative Images,” 408; meaning “image of God.”
methexic image of devotion being shared with the audience. For instance, Cantiga 100 repeats the phrase, “Santa Maria/ estrela do dia/ mostra nos via/ pera Deus e nos guia [Santa Maria/ star of the day/ show us the way/ for God and guide us].” The refrain in canticle 100 was repeated over and over, creating an incantatory performance much like the hymns performed during mass or repeated daily prayer.

The singer released breath and emitted sound, becoming a methexic image that encapsulated the emotion in which one intended to partake and portray, namely devotion. The performance of the refrains was instructive to the audience – the performer displays the image of devotional love through the cyclical, overlapping *loors* (praises) as a sensorial experience, indicating that Marian devotion is equally as “cyclical,” or forever, and echoed the image of the heavenly choirs. The image transported the performer into this eternal real, where a divine source of healing may be accessed. Pentcheva calls this type of chanting an “aural experience structured on the principle of repetition,” noting that it can create a “mesmerizing and disorienting effect” that encapsulates the performer and the audience. Thus I argue that Alfonso X’s canticles both depict and act as performative rituals, imbuing performer and audience with spiritual devotion and the effect of the sound. Performative sound, and the hymns in between each canticle, show


130 Pentcheva, “Performative Images,” 442-443, 447-48. The idea that hymns can echo heavenly choir is also Pentcheva’s.
how music lends itself to creating a sonic experience that existed as more than notes on a page. Rather, the canticles incorporated the most important aspects of an effective charm as I have shown: sensorial affect, embodied experience, repetition, authority, and constructed belief.
Section 5: The Breath, the Soul, and Musical Remedies

Music was regarded as an effective therapy for the king and the patrons of Castile. The breath that was so integral to the performer’s hymn was connected to a recognition of the body and the *spiritus*, and how they are moved by sound. Music also worked through the *passions* and held the potential to realign the harmony of the body. Galenic-inspired regimens of thirteenth-century medicine emphasized the role of positive affect and emotion in promoting wellness.\(^\text{131}\) It was not uncommon, as this study has shown, to treat the body as a direct representation of the soul. Arnau de Vilanova discussed the importance of warming the heart to affect the *spiritus*. With the connection of the body and soul, treatments of positive affect and emotion tend to aim towards healing the soul, while affecting the body.

I propose that music is more connected to medieval mentality on health than previously considered. Devotional music, in particular, used methexic imagery as a means of imparting therapeutic healing on the individual. While previous scholars such as Peregrine Horden and Peter Murray Jones note that music has its history as a medical treatment, most have fairly pointed to its basis in the Galenic model.\(^\text{132}\) Other scholars, like Martin West, have noted music’s intended qualities to lift the spirits, or create positive affect, just as I have.\(^\text{133}\) West, along with others like Christopher Callahan, Gabriela Ilnitchi, and Oliver Huck have recognized the *musica*


mundana as a connection to the heavenly spheres, according to the patterns of the universe, as the Pythagoreans believed.\textsuperscript{134} These are all important facets to the history of music, and its understood effects. Yet, I assert that Iberian devotional music built on Galenic models of healing and goes beyond just a recognition of the heavenly spheres, incorporating aspects of devotion connected but distinct from many of these theories. Music allowed the singer, or performer, to incorporate the divine through methexic imagery. Additionally, the audience participated in the performance and experiences affect through changes to the passions and the image expressed through the breath.

The breath as a representation of the spirit was crucial to the way that Iberian people thought that images could be transmitted through singing. According to folklorist Francisco Vaz Da Silva, old Portuguese folktales spoke of the fear of “bad air.” Because many people believed the soul was like the breath, Portuguese folktales insisted on closing windows as night fell to ensure the protection from “bad air.”\textsuperscript{135} Iberian sources frequently refer to bad air, especially as plague treatises became more available in the early modern period. According to ancient belief, the air had the potential to corrupt one’s health and wellbeing because demons and evil spirits operated the “lower air,” the space between the moon and the earth.\textsuperscript{136} Contemporary amulets

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\textsuperscript{136} Rampton, \textit{Trafficking with Demons}, 65-66.
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still used commonly in Portugal depict crescent moon symbols, sometimes accompanied by images of the Virgin, given to babies to prevent what is now considered a form of colic or stomach malady called *luada*. The moon’s close association with the tides likely informs the Portuguese suspicion that “bad air” harmed one’s health. The ocean ebbed and flowed, accompanied by strong winds, giving the appearance to ancient geographers that the earth was “breathing.” The moon amulet was an attempt to control the “bad air” that affected one’s health. Medieval European philosophers believed that the moon’s phases, in connection with the tides, affected the “atmosphere” as well. Therefore, to save one’s health and *spirit*, the amulet was given to affect the breath.

Other Western sources support the position that the breath was associated with the spirit. Renata Pieragostini covers an interesting case concerning a late fourteenth-century letter sent on behalf of a sick man named Carlo of Bologna. The Commune of Bologna recognized the poor state of Carlo’s mental health and in turn prescribed music for his recovery, sending a renowned (yet unnamed) musician to help him heal. Grief, like other *passions*, could be dangerous to the body in that the sorrowful emotions could overheat the *spiritus* and cause inflammation and fever. Like lovesickness, grief could also result in shortness of breath and loss of appetite. The


139 Cartwright, “On the origins of knowledge of the sea tides,” 120.

letter states that they worried about his mental hardships and hoped he could “find rest in the rejoicing of the soul,” because grief and worries could “deprive individuals of their vital breath [in exultatione animi coniquescat. Equidem premeditationes assidue homines a vitali aura totaliter alienant].” Pieragostini notes that inflammation of the spiritus could be fatal to the body. The therapy prescribed for saving Carlo’s body – or spiritus governing the body – was actually intended to treat the mind. By treating Carlo’s worries, the music restored the breath and healed the soul.

The medieval theory of the soul as capable of being affected by the breath is upheld by the multitude of charms found in the Picatrix. The Picatrix, which was also translated in the court of Alfonso, contains various Arabic charms, formulas, and astrological formulas that I have shown may have influenced medical treatments for amor eros during this period. Many of the love charms in the Picatrix use the method of suffumigation to enact the charm, often with the intent of inhalation. Suffumigation made the charm effective through the senses through the inhalation of fumes into the body. The altered state that suffumigation likely provided is reminiscent of the effect of sound on the body and how it can be physically experienced. This method builds on Galenic models of health; the air as an affect or non-natural stems from the belief that the spirit is affected through breath, and thus can be affected through other inhalations, similar to processes we’ve seen in the Picatrix and Portuguese folktale. The breath


143 Attrrell and Porreca, Picatrix, 28, 195-197.
as *spiritus* may even derive from or relate to the idea of the Word of God in Christian thought. The breath encapsulates the message of God, as is delineated in the incarnation. As Walter J. Ong has shown, “God the ‘Father’ speaks to his Son: he does not inscribe him. ‘Faith comes through hearing,’ we read in the Letter to the Romans (10:17). ‘The letter kills, the spirit [breath, on which rides the spoken word] gives life’ (2 Corinthians 3:6).”144 Therefore, multiple cultures and Western influences proclaim beliefs of the breath encapsulating the spirit. The Galenic model, though not originally Christian or Islamic in origin, became encapsulated within the frameworks of healing circulating throughout Iberia.

Seen from the perspective of humoral links between the spirit and the breath, Pentcheva’s notion of the methexic image of the heavenly chorus becomes more comprehensible. The methexic image *partakes* in the essence of the image. The use of chant, hymn, and song is not just for entertainment in the case of spiritual performance. Music may represent one being “filled with the Spirit,” the exhaled breath being a manifestation of that Spirit.145 We can examine the performance of the singer of the *Cantigas* through Pentcheva’s proposed lens of the methexic image – the exhalation of breath during the performance exhibits a methexic image of what the singer intended to transmit and take part in. Importantly, music as a transformative experience that affects one’s emotions and heals all aspects of one’s being, must be performed to affect change. For the *Cantigas*, the devotional nature of the song aided in its performative ritualization, as the methexic image calls forth the divine to enact the changes necessary to cure

144 Ong, *Orality and Literacy*, 73.

or mediate. I will show how the *Cantigas* rely on methexic imagery transmitted through the breath to convey the divine healing powers of the Virgin, especially in the case of healing lovesickness.

The mechanics of healing through performative rituals are evident in *Cantiga* 125. In *Cantiga* 125, commonly known as the “The Priest Who Used Magic to Seduce a Maiden,” the narrative describes the use of magic as a source of lovesickness, as well as a method for a lovesick man to attempt to obtain his beloved’s affections. Love magic, especially in the form of charms or talismans, was a common method for gaining control of social situations in the Middle Ages, like those in the *Book of Women’s Love*. In this case, a priest of Auvergne becomes enamored with a young woman who worships the Virgin. In the canticle the young woman prays to the Virgin for advice on protecting herself from the devil. The Virgin appears to the woman during her prayer and advises that she always recite “Ave Maria.” After the woman receives instruction from Mary, the priest approaches her and attempts to seduce her, yet she refuses his advances. In response the priest conjures demons and bids the demons to capture the young woman, which they attempt to do twice.

The accompanying illustrations show the priest performing a charm, using a flask and a five-pointed star symbol to control the demons and their powers. The first time is unsuccessful, but upon the second summons, the demons make the young woman forget her prayers to the Virgin, who had been protecting her through repeated “Ave Maria” praises.\(^{146}\) The miniatures

included in the Cantigas display an ominous sight of the priest surrounded by the demons, who crowd the corners of the pentagram, or five-pointed star (see Figure 2). The Castilian legal code, the Siete Partidas, forbade necromancy explicitly for its ability to cause great harm to the world and the user. The law code specifically condemned necromancy as well as, “otros fechizos para enamorar los omes con las mugeres [other spells to make men fall in love with women],” highlighting the anxieties in Castile concerning love magic.

The Siete Partidas states that those who used necromantic magic would “mueren, o fincan locos, or desmemoriados [they die, or go crazy, or forget themselves],” which is reminiscent of the warnings against lovesickness symptoms. Even further, the restriction implies the threat of women and the repercussions that falling in love with them entailed. Lovesickness was threatening enough to warrant a mention in both the Castilian law code and the Cantigas de Santa Maria. In the story, the priest completely defies the orders of the Siete Partidas and uses a form of necromancy to sway the heart of the woman and move her affections. The damsel becomes afflicted with lovesickness as a result, “mad with love for him,” and threatens harm to herself if her parents do not allow her to marry the priest. Eventually, Mary intervenes and


\[149\] Riva, “De Morte Anime,” 256; my translation.
Figure 2. *The Priest Who Used Magic to Seduce a Maiden*  

chastises the priest for consorting with devils. The priest joins a religious order to repent. The Virgin then appeared to the young woman in her sleep and willed her to join a convent, separating the two parties and effectively healing the lovesickness plaguing them both.\footnote{Menaldi, \textit{Love, Magic, Control}, 29. Menaldi uses the word \textit{necromancy} and I follow her lead. See Attrell and Perreca, 10-11 on the use of \textit{necromancy} as a term. For the story of the canticle, see also “The Oxford Cantigas de Santa Maria Database: CSM Number 125,” CSM, https://csm.mml.ox.ac.uk/index.php?p=poendata\_view&rec=125.}

Here, we see how lovesickness was performed on many levels: the priest exhibits lovesickness in his irrational use of necromancy to gain the affections of the damsel, and the damsel exhibits lovesickness because of the ritual charm performed by the priest. In fact, the priest’s love charm may have been influenced by the knowledge circulating the region at the time, such as that of the \textit{Picatrix}, which collected various types of rituals frequently labeled as necromancy. We know that this magical text was available and influential in late medieval Iberia because Romance and Latin versions of the \textit{Picatrix} were produced alongside the \textit{Cantigas} in Alfonso’s court.\footnote{Attrell and Porreca, \textit{Picatrix}, 4-5, 10-11.} For example, a spell from the \textit{Picatrix} like the priest’s in \textit{Cantiga 125} states, “Make a pouch with a human heart, and fill it with the blood of three other people, and warm it over a fire. Call the demons, and they shall respond.”\footnote{Attrell and Porreca, \textit{Picatrix}, 206.} The author gives a formula for summoning demons, one of the many parallels between the magic in the \textit{Cantigas} and the \textit{Picatrix}. \textit{Cantiga 125} indicates how knowledge was circulating in this region concerning necromancy, lovesickness, and performative rituals. The canticle represents a type of embodied experience with \textit{affectus} - fear and love - that exemplify medieval understandings of the body.

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The Iberian priest’s use of necromancy shows that even priests were susceptible to lovesickness and required the Virgin’s divine intercession. The song presents an important message: continued devotion and praise of the Virgin can still overcome even the most powerful charm and cure lovesickness. The Virgin in the thirteenth century was a powerful intermediary. Miracle collections like those in the Cantigas and earlier versions such as Gonzalo de Berceo’s Milagros de Santa Maria depict the Virgin’s active role in healing and protecting the faithful. The charm shown in Cantiga 125 is effective at getting the priest what he desires, even if only for a short time. The demons are able to make the young woman forget her cure, the “Ave Maria” praise, long enough to conjure lovesickness and lack of reason. Nevertheless, the young woman’s Ave Maria praise supports previous evidence for praises as a type of affective performative ritual act.

Furthermore, the use of the Ave Maria praise derived from a long tradition of liturgical language that elicits the illocutionary power of incantatory charms, such as the peperit charm for childbirth. The peperit charm invoked the sequence of the “holy mothers,” most commonly the Virgin Mary, Elizabeth, mother of John the Baptist, Anna, mother of Mary, and Celina, mother of Remigius. The charm was likely recited aloud during birth and tied to the leg of the woman in labor with a written amulet to aid in her delivery. Found in England in the eleventh century in a manuscript containing Lenten sermons, the peperit charm appears regularly in different forms associated with liturgical practice. Oftentimes the charm was abbreviated to just the threefold

154 Menaldi, Love, Magic, Control, 28-29.

155 Berceo, Miracles of Our Lady, 1-17.
sequence of Anna, Mary, Elizabeth, whereas other renditions were “intensely prayerful” used the name of saints as well.\textsuperscript{156} Though the peperit charm is more than just liturgical praise, such as the refrains of the \textit{Cantigas}, both actions consist of verbal performances that operate as liturgical chants and receive power from invoking the holy mothers. The “Ave Maria,” refrain, much like the chant of the deacon in Pentcheva’s Exultet liturgy, operated as more than liturgical praise and even further as an image of the Virgin’s intercessory power. As the young woman continued to chant the Ave Maria, the miniatures for \textit{Cantiga 125} depict the Virgin Mary stepping in front of the woman, proving that her chant summoned Mary’s protection before the demons interrupted her.\textsuperscript{157}

Performative praise effectively kept the devils at bay, acting like music as a kind of affective ritual, when performed correctly. In the case of \textit{Cantiga 125}, the young woman’s audience is the Virgin Mary, who hears her prayers and comes forward to cure her lovesickness. To understand the performance of the canticles, we must look at the construction of the patterns in the prose. The canticles, like many other lyrical poems of the century, exhibited patterns of repetition for ease of memory and recall. As Walter Ong and Brian Stock have discussed, oral cultures relied on repetition to aid in memory recall. Up to the twelfth century, much of the medieval West communicated information through oral expression, as many regions had limited literacy rates. Therefore, rhythm or pattern for easy recall was a helpful aid. Ong argues that, in

\begin{footnotesize}
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\item \textsuperscript{156} Jones and Olsan, “Performative Rituals,” 416-7.
\item \textsuperscript{157} Las Cantigas de Santa María, Alfonso X el Sabio, 1221-1284, \textit{The Priest Who Used Magic to Seduce a Maiden}, facsímile (Madrid: Patrimonio Nacional, Real Biblioteca del Monasterio de San Lorenzo de El Escorial: Códice Rico, Ms T-I-1) facsímile (Madrid: Patrimonio Nacional, Real Biblioteca del Monasterio de San Lorenzo de El Escorial: Códice Rico, Ms T-I-1) fol-177V, January 16, 2022.
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cultures of primary orality, even one’s thought process “must come into being in heavily rhythmic, balanced patterns” because it was helpful for recall.158 Many writings, including medical treatises such as Arnau de Vilanova’s version of the didactic poem Regimen sanitatis Salernitanum, relied on rhyming and meter to encourage easy memorization.159 For example, a copy from the late fifteenth century reads: “Est caro porcina:sine uino peior ouina. Si tribuis uina:tunc est cibus medicina.”160 Repetitive sounds and patterns were helpful for memorization and easy recall of important information.

Though the canticles are preserved in elaborate manuscript form, they were undoubtedly produced for oral performance, whether that was singing, recitation, or reflection. Despite little evidence for how the Cantigas were used, one could speculate based on the formulaic writing and illustrations that the songs are at the very least, instructional. Other examples of instructional performance, like vitae and miracle plays, become more prevalent in later years in Iberia. However, comparative evidence from the surrounding regions indicates that the Cantigas may have been performed much like the lectio for “exhortation and mediation,” suggesting that lyrical recitation deepened inner contemplation and devotion.161 Meditational poems and incantations for the purpose of healing were not uncommon. For example, the fourteenth-century Latin and French manuscript, the Fitzwilliam Psalter, includes illustrations of women whose invocations


161 Stock, The Implications of Literacy, 72-73.
could “alter penitents’ affects” and “transform bodies and souls.” Like the performance of music, the prayers and poems in the psalter allowed the performer to enact a remedy through recitation. The “lyric meditation,” guided the listener, overseeing the audience’s therapy by aiding them in the recognition of Mary’s body as “the vessel in which she brewed the remedy for sin, the origin of human disease.” The lyric meditation allowed the performer to recognize the performance of the rhythmic poem as a curative act that operates on the power of Mary to heal the soul and body.

The Cantigas also inform the performer on what affects should arise. For affective cures like music and charms, the mechanics of the performative are themselves instructions for creating an emotional state. For lovesick cures, the performance of Alfonso’s Cantigas might express affects that sooth or heal. The use of rhythm and pattern helped to create the affective experience, as chants and repetitive sound reflect the image of the heavenly choirs, resounding in a sense of eternal harmony with the Spirit. Like the contents of the Fitzwilliam Psalter, the therapeutic structure of the Cantigas must be accessed through an embodied performance. The repetitive refrains for each song bracket the verses like a protective prayer, invoking a power in the canticles reminiscent of both hymns and ritual incantation. By using repetition, the canticles were also easily memorized and therefore accessible to not only the reader, but to an audience for use when needed. The refrain, like that of the young woman’s prayers in Cantiga 125, has qualities akin to those of the healing charms. Through affective meditation on the sound and

\[\begin{align*}
\text{162} & \text{ Ritchey, Acts of Care, 202.} \\
\text{163} & \text{ Ritchey, Acts of Care, 201-202. Quote on 202.}
\end{align*}\]
methexic image of the Virgin, the performer experienced instruction on how to feel—healed, safe—and allowed the senses to provide a guide for effective performance of the *Cantigas*.

In the canticle, the young girl’s prayers become legible as charms or verbal incantations, making the Ave Maria repetition a performative ritual depicting the methexic image of the Virgin Mary protecting the young woman. Upon exhalation, she breathes out a performance of devotion to the Virgin and thus an image of Mary appears to shield her from harm. The miniatures attached to the manuscript depict how the young woman’s prayers to the Virgin guarded her body from the priest’s devilish spirits and the disease of lovesickness.¹⁶⁴ The *Cantigas*, then, act; accordingly, they provided the protection of the Virgin to the singer and audience based on the *vital breath* being expelled with the sonic ritual. Performance itself was central to the way the audience was instructed on devoting themselves to the Virgin’s intercession. The singer shows that through the instructed methods, with performative ritual, the methexic imagery of the Virgin can both heal and protect.

Through the singer’s breath they exhaled the sound of the song, performing it aloud as an affective therapy for performer and audience. The breath, in singing the refrains, was filled with or partakes in the Holy Spirit of God and the Virgin Mary. By exhaling this breath, the singer filled with the Spirit expressed a methexic image of the Virgin’s intercession and transmitted it to an audience, who were then able to partake in the affective image of Mary as well. Mary showed herself through the sound, allowing the listeners to have “sensorial access to the

The music intends to heal and protect, like the Virgin in canticle 125. The refrains bring forth the Virgin’s image, granting the performer and audience the ability to take part in the Virgin’s shelter from sickness and evil.

Section 6: Images of Intention in the Cantigas

In this final section, I will discuss the use of intention as a quality of performance that Iberian practitioners considered as further producing the methexic imagery that was performed through devotional music. The connection between the young lady’s prayers in Cantiga 125 and the methexic imagery of the Cantiga’s refrains is that both depict an intentional invocation of an experienced change. To demonstrate, I turn to the last canticle, “The Knight Who Said Two Hundred ‘Aves’ A Day.” Cantiga 16, like the other accounts written in the large manuscript, relays a glimpse into how people understood the unknown forces acting upon them. The story begins with a young knight falling deep into lovesickness. In his desperation he approaches an abbot who advises that he praise the Virgin with 200 “Ave Marias” every day for a year. At first, the knight thinks this will win him his beloved. Yet, after a year the Virgin appears to the knight during prayer and makes him renounce his beloved, taking him into heaven. The story, though it does not end in a typical cure, depicts the healing of lovesickness through prayer and the Virgin’s intercession.


Unlike *Cantiga 125*, it is far clearer here that the threat to the knight is lovesickness. He fears his fate, turning to others to help heal his illness and commits to daily prayers to cure his body and soul. For this case, the abbot prescribed a heavy dose of prayer and repetition to garner affective therapy. The use of the Ave Maria recitation begs the question, could the Ave Maria be considered an “ingredient” in the healing recipe of the *Cantiga*? As I have shown, a history of using incantations in healing procedures is well-documented, though they are often considered ancillary to other medical practices. However, as Matthew Milner has stated, the “intention” to use certain spiritual methods or ingredients in ritual acts is integral to an understanding of how and why certain practices were incorporated.¹⁶⁷ Grace, Milner shows, was conceived as a physical, intentional quality considered in the act of creating therapeutic remedies. Grace, as a part of a “holy oats” remedy, became a quality like any other (i.e., wet, dry, hot, cold) that influenced medieval medicine and natural philosophy.¹⁶⁸ I contend that medieval practitioners saw intention as a quality that enabled the prayer in *Cantiga 16* to act as a performative ritual. The knight’s speech was infused with intention, according to Iberian theorists, thereby allowing the sound of the prayer to expel the methexic imagery of the Virgin who intercedes on his behalf, curing him from lovesickness.

Understanding how medieval practitioners theorized intention, much like the trust between the healer and a patient, helps us to understand the devotional performative acts that are exhibited in the *Cantigas de Santa Maria*. There were numerous secondary Aristotelian qualities


that may or may not have been considered in the making of a cure; typically, the basic qualities of hot, cold, wet, and dry are all included, along with the sensible sub-qualities like color, sound, smell, and taste. However, the spiritual or intentional qualities, which are still considered accessible in the physical world, lie outside of the “principal explanatory framework of the elemental qualities” and were often left unspoken in treatises, despite their influence.\textsuperscript{169} The methods that persisted in medicine were typically the utilization of Galen’s contrary qualities, i.e., if he is dry from lovesickness, give him wine. Yet, intentional qualities “give rise to our sensory experiences,” so that secondary and primary qualities were thought to affect nature, and the body.\textsuperscript{170} Like the curative charms, the sensorial qualities that allowed healers and physicians to craft knowledge about the world around them extended beyond physical qualities and into the realms of belief and trust. Without trust there would be no cure, and without the will to sense the cure, there would be no healing. The belief associated with recipes like those in the \textit{Book of Women’s Love}, however, only touches the surface of understanding qualities like grace that were similarly imbued within a recipe. “All sensing” states Milner, “involved some form of intention.”\textsuperscript{171} Intention was fundamental to speech and writing in recipes and charms, moving the reader to feel and react (much like Averroes’ theory on musical instruments moving the listener).\textsuperscript{172}


\textsuperscript{170} Pasnau, \textit{Metaphysical Themes}, 502.

\textsuperscript{171} Milner, “Physics of Holy Oats,” 224.

\textsuperscript{172} Milner, “Physics of Holy Oats,” 224-5.
Following Milner’s exposition of the intentional qualities intrinsic to words and speech, we can revisit the performance of the Ave Maria prayer in Cantiga 16, as well as the Cantigas as a whole. Charms, recipes, and formulas rely on words, and more often speech, to make them effective. The intentionality of using certain phrases grants charms further authority, especially when the performer calls upon religiously significant invocations such as the Ave Maria, or the holy mothers. Grace as an intentional quality could resituate one’s psychology and reorder the will to towards godliness. Therefore, the Ave Maria performed by the knight, as an image of the Virgin, contained the intrinsic quality of grace and imbued the prayer with curative effects. The abbot suggests the use of the Ave Maria and facilitates the efficacy by suggesting a repeated prayer over a course of time. Thus, the knight reorients himself back to godliness, reordering his spirit through intentional, affective performance. He incorporates the use of the senses, relying on affect and belief, crafting a cure that works best for him through devotional expression. Thus, it can be suggested that the Ave Maria was used as a method of incorporating the spiritual image of Mary to act as an intentional ingredient in the Cantigas’ formulaic healing.

The Cantigas de Santa Maria similarly acted as intentional devotional performatives to reorient one’s body and soul back to overall health. Whether it was to call on the Virgin’s intercession for devotional, protective, or healing measures, the use of performative sound changed the experience of one’s lived reality. The intentional invocation of holy names, liturgical language, and repetitive aspects of the canticles were steeped in sensorial affect and devotional grace. Furthermore, these lyrical texts are indicative of the fears and anxieties that late

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medieval Iberians faced, such as the malady of lovesickness or demonic influence. Music as a method to influence and heal the experiences of the living was not only effective, but intentionally *affective*, instructing the performer and audience’s embodied experience.
Conclusion

At the start of this research, the importance of the passions of the soul and sensorial experience formed the basis for effective cures. Largely based on the Galenic model of medicine, influencing the passions was a method for curing lovesickness. Lovesickness affects the mind, body, and soul, reflecting outwardly the inner troubles of the patient. Thus, many cures were said to be effective, such as charms and recipes. The Book of Women’s Love, the Picatrix, and various misogynistic literary and performative cures from across Iberia exhibited methods that practitioners took to cure amor eros, largely through affective healing and crafting belief. Even misogynistic expression healed the lovesick patient through the senses, utilizing positive affect of distraction and enjoyment as a cure. I turned to music to further show how sensorial experience and performance can extend beyond traditional healing. The performative nature of music is itself an affective cure. However, the Cantigas’ devotional, intentional form allows the expression of a methexic image that transcends healing. The breath as a representation of the soul made present the spirit of the Virgin Mary, whose intercession truly enabled an effective cure for those participating in the performative experience.

Research on the performance aspects of healing is still in progress today and is still evident in modern expressions of affect and experience. Today, through ongoing research, scholars are discovering how positive affects expressed in positive affirmations to the self may enhance test performance or reduce social anxiety.174 Younger generations discuss

“manifesting,” what they want in life, positive affirmations for achieving a desired reality. Manifesting spans from liking or commenting on social media posts that “affirm” the desired reality you wish to achieve – i.e. “like or comment to claim this energy” – to fully crafted “methods” for manifesting a change in one’s life through positive emotions. What might seem like a purely medieval sense of understanding the world is still being practiced in different forms and frameworks. Even the placebo effect, a term which connotes a fake or disingenuous healing, is taking hold of the scientific community for the implications that belief can contribute to the field. Recent studies have shown that acts of care, and the rituals that come along with it, have bodily effects. Ted Kaptchuk, a medical scholar at Harvard, in a 2018 lecture addressed how “rituals trigger specific neurobiological pathways that specifically modulate bodily sensations, symptoms, and emotions,” indicating that convincing the mind can lead to real, tangible healing for the body. Furthermore, research on music as a method for healing is making headway as an extremely effective therapy for those who have chronic conditions such as brain disorders. Scientists say more empirical data is needed to prove any sense of efficacy for these musical

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cures, or for use of the placebo effect as treatment. Yet, perhaps medieval practitioners have demonstrated that the efficacy lies in the affect and belief that we can provide to our patients.

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Vita

Lillian Sanders grew up in Savannah, Georgia, where she attended Armstrong State University after high school. At Armstrong State University she received a Bachelor of Arts in History and Spanish. Her work at Armstrong led her to focus on medieval Spanish history and literature as potential focuses for graduate research. It was not long after that she chose to attend the University of Tennessee, Knoxville to pursue a Master of Arts degree in History. Her research interests include the interactions between medieval conceptions of disease, affect, and gender, as well as medieval Spanish devotional music and courtly literature. She hopes to pursue further education in the future on these topics and is incredible thankful for all the support from her advisors, family, and friends.