‘Seiknes Incurabill’:
The Evolution of Literary Representations of Leprosy in Medieval and Early Modern English Narratives

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Abstract

This paper examines the use of leprosy as a literary motif in poetry, narrative literature, and homilies from England and Scotland between the 1200s and 1500s, the time period during which a shift in leprosy’s literary connotations is visible. It tracks the changes in leprosy’s meaning, as it moves from a disease signifying holy suffering and nearness to God to a physical representation of a diseased and sinful soul. Examining predominantly narrative works, rather than focusing on medical or encyclopaedic documents, this paper attempts to pinpoint the perception English society had of leprosy and the times at which this perception changed. The advent of the plague cycles in the early 1300s, and their corresponding changes in medical theory and legislative precautionary tactics to keep populations healthy, is suggested as a major factor in the change in societal and thus literary perceptions of leprosy between the late 1200s and early 1400s.

Introduction

_He is a leprous man, he is unclean: the priest shall pronounce him utterly unclean; his plague is in his head. And the leper in whom the plague is, his clothes shall be rent, and his head bare, and he shall put a covering upon his upper lip, and shall cry, Unclean, unclean._ Leviticus 13:44-45 King James Version

Medieval descriptions of leprosy offer conflicting viewpoints on the disease. The Bible instructed lepers to remove themselves from their communities and live “outside the camp”, away from healthy society, until their illness left them, suggesting that their uncleaness incited real fear.1 However, lepers in medieval England and Scotland, the context that I will focus on in this paper, were also considered to be in some ways much closer to God than other laypeople. Accounts from eleventh and twelfth century England and Scotland describe the very devout praying to be afflicted with leprosy, so that their sufferings, reflective of the passion of Christ on earth, might shorten their time in Purgatory and bring them closer to Heaven.2 In recent years, a great number of historians of different disciplines have expounded upon the situation of lepers in medieval England, approaching their analyses from medical, scientific, social, and literary standpoints. These authors have created an interdisciplinary and comprehensive understanding of the reality faced by those afflicted with leprosy in medieval and early modern England. I wish to apply this new understanding of medieval leprosy to some well-known literary texts that use lepers and leprosy either as fully realised characters or as metaphors. By revisiting these texts, I attempt to determine a definite trend in how leprosy is represented in English literature between the thirteenth and sixteenth centuries, and extrapolate the changes in societal perceptions of leprosy that this literature reflects.

Many accounts of lepers early on in the medieval period are reverential, using the leper as a Christ figure representing righteous suffering. By the 16th century, leprosy more often represented corruption and even evil. Important modern scholars on leprosy, such as Carole Rawcliffe in her book _Leprosy in Medieval England_, have suggested that there may have been an observable negative shift in the literary depiction of lepers, but her book does not pursue this line of analysis in great detail. In this paper, I will revisit some of the sources discussed by earlier scholars, most notably Nathaniel Brody, to see if this decline was indeed a traceable trend, and if so, what social and medical factors could have influenced it. Although such a study cannot be comprehensive, I will attempt to isolate a few possible reasons for a change in popular feelings toward lepers through my analysis of these literary sources. Although medical writings reflect changes in how physicians and other medical professionals understood leprosy as a disease, literature in the vernacular harnesses the non-medical opinions of the laypeople, illuminating how a medieval English person would view a leper in their community. This popular opinion will help to determine whether lepers truly did experience a degradation of reputation in England at this time.

Historiography of Leprosy

Carole Rawcliffe’s 2006 book _Leprosy in Medieval England_ is one of the most comprehensive academic works on medieval lepers. In the book, Rawcliffe explores not only the experience of life within leprosaria, institutions designed specifically for their care, but also the general attitude of medieval people (medical, religious, and lay) toward lepers. I discuss her work here to contextualize the reality of lepers’ lives in medieval English society and trace the complexities of their reputations.

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1 Leviticus 13:46.
Rawcliffe points out that both learned and popular medieval English viewpoints on leprosy were variable and complex. In fact, Rawcliffe makes a compelling argument that the modern popular image of the universally reviled and avoided medieval leper actually originated in the nineteenth century, and it is this image that has remained in the general imagination despite its departure from the actual experiences of lepers in the medieval period.

The nineteenth-century medical writers Rawcliffe discusses characterized the disease, which had begun to return in the West, as an epidemic only contained in the medieval period through carefully enforced orders to “segregate and govern the afflicted and dangerous part of humanity”.

Albert Ashmead, an American physician who wrote a succinct article for the scientific journal *Janus* in 1897, warned, “no charitable regard was had to the victims of the scourge… [isolation] was necessary”.

Though he admits that leprosy will not affect those “who are clean in their habits, well separated in their families… living in sufficient remoteness from the inferior animals”, he stresses that “some danger still exists, and the spread of leprosy in various parts of Europe… proves that the disease has not lost… its vital stamina”. His tone suggests a pressing and immediate issue, and he declares the tactics of the Middle Ages to be both necessary and incredibly successful to its eradication. Ashmead and other nineteenth century authors regarded leprosaria and their often-restrictive regulations on the movement and actions of patients as evidence that medieval lepers were carefully and completely removed from healthy society. Connecting leprosy’s reappearance in northern Europe with the closure of several medieval leprosaria in Iceland, these doctors maintained that strict segregation of the kind facilitated by leprosaria of the medieval period was the best way to prevent the spread of the illness; however, they failed to engage with any written records on leprosy from the period. In response to these authors, Rawcliffe points out that there are often “yawning discrepancies” between historical scholarship on a period and the picture revealed by original sources on the material in question. Rawcliffe sheds new light on the “complex, often contradictory” medieval English attitude toward leprosy through her detailed analysis of original sources.

Rawcliffe confronts the nineteenth-century understanding of leprosaria by pointing out that they were, crucially, religious institutions based upon a monastic model. Rawcliffe points out that growing late medieval interest in the life and Passion of Christ, led to the formation of the thirteenth-century cult of *Christus quasi leprosus*, which described Christ himself as being “like a leper” during his suffering on the Cross. This growing interest, and the increasing connection between the experience of lepers and the experience of Christ, led to the founding of numerous leprosaria in the thirteenth century. Founders and patrons believed the foundation of such hospitals benefitted not only the lepers, whose sufferings paralleled those of the Son of God, but also their own spiritual purity. Reversion for the leprous body and its sufferings complicates the nineteenth-century understanding of the medieval leper as a creature despised and rejected by healthy society. The Third Lateran Council, which took place in 1179, did suggest the creation of a ceremony by which the leper was separated from “the company of persons”, implying suspicion around the disease in spite of these developments in popular opinion, but implementation of this segregation decree was fairly lax in England. Rawcliffe further questions the notions of medieval lepers as universally rejected by examining the structure of leprosaria themselves, determining that the strict regulations on patients’ comings and goings were a result more of monastic influence on the hospitals than communities’ unwillingness to mingle with the leprosaria’s inhabitants.

Far from being careful about inhabitants corrupting others, the religious leaders of leprosaria were concerned about the sins of the outside world corrupting the lepers. They carefully oversaw rights to overnight trips, and most leprosaria allowed these journeys only for groups, for to travel alone was to invite temptation and possible sin. The officials at St. Thomas’s Hospital in Bolton ensured that residents’ souls had as much exposure to the word of God and as much chance at redemption as possible by holding thrice-weekly Masses in the hospital chapel, and required lepers to confess at Edlingham parish church three times a year besides. These highly regulated schedules of penance were not construed as punishments for sinners stricken with disease: rather, penance was thought of as a curative measure, a way for the penitential soul to move toward salvation.

Rawcliffe argues that these thirteenth-century institutions and the increasing religious importance of penance elevated lepers’ social position—their suffering brought them closer to God and created the possibility for redemption.

Leprosaria reached their height during the 1200s and earlier 1300s, when at least three hundred and twenty institutions were founded in England. By the time the Black Death appeared in England, most of these leprosaria were abandoned, repurposed, or operated with significantly reduced numbers, but an influx of donations continued. In Norwich in the 1300s...

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4 Ibid., 738.
5 Ibid., 738.
7 Ibid., 108.
10 Ibid., 308.
11 Ibid., 338.
and 1400s, leper houses remained popular charity recipients amongst testators, even though the foundation of new leprosaria had ceased almost entirely after 1400. 

Despite the decline in actual sufferers and the continued donations, royal courts of the 1400s saw those afflicted with leprosy as far more dangerous to public health than they had before the Black Death. In 1427, the Scottish Parliament threatened banishment for any leper who did not report their condition to their parish church, which tracked the number of lepers in the region. 

Parish churches guarded the numbers of lepers and their whereabouts more closely in the fifteenth century than they had in earlier years, which suggests increasing concern about lepers' effect on public health. The discrepancy between continued patronage of leprosaria and increased legislative action against lepers in the 15th century points to a lack of popular consensus on the disease's implications, though changes in policy do indicate that lepers were certainly no longer thought of only as Christ-like sufferers.

Despite the popularity of opening leprosaria in the twelfth and thirteenth centuries for the spiritual benefit of the patrons, a diagnosis of leprosy still seriously affected how the leprous person was allowed to interact with their community and could as easily be used to slander the name of a troublesome community member. As early as the beginning of the thirteenth century, rumours of leprosy tainted political figures' images with suspicion of evil activity. In 1205 the Bishop d'Aigueblanche of Hereford was accused of having contracted leprosy, sent as a punishment from God for his treatment of English people. 

The dual capacity of leprosy to point toward both divine punishment and the touch of divine grace reveals the lack of consensus over its causality in medieval England. These viewpoints coexisted in the earlier medieval period: a record equated the Irish saint Finian Lobhar to Job for taking on a leprous child's leprosy in his place. However, Rawcliffe clearly indicates that this understanding of leprosy as a "religious vocation" chosen by the devout in order to atone for their worldly sins and achieve grace did not survive beyond the middle of the thirteenth century. 

Chronicles of saints assuming the burden of leprosy disappeared after the 1200s; however, the idea of patient endurance of physical or spiritual suffering as method of spiritual purification remained popular in English devotional literature until the Reformation. Rawcliffe concludes that the standing of those who contracted leprosy was ambiguous throughout English history; there were always contradicting perceptions of the disease.

Rawcliffe's modern re-analysis of how lepers truly lived and were perceived in medieval England obtains a crucial distance from earlier leprosy scholarship, which did not discuss the contradictions in how they were perceived and written about. Whereas Rawcliffe uses court and town records as her main sources of historical evidence to argue for the reality of their situation, the twentieth-century scholar Saul Nathaniel Brody focused primarily on works of literature to analyse leprosy's place in medieval imaginations. His seminal 1974 text on leprosy, *The Disease of the Soul; Leprosy in Medieval Literature*, analyzes many of the literary sources this paper will re-examine in the context of Rawcliffe's findings. While Brody discusses literature from France, Germany, Italy, and England from the Anglo-Saxon period to the Modern period, I focus particularly on the English literature he analyzes. Brody argues that leprosy overwhelmingly represented corruption and evil to medieval people, and that medical accounts of the disease heavily influenced literary portrayals. He argues that learned medical authorities set aside "the evidence of [their] senses because prevailing theory could not accommodate it": in other words, tradition rather than empirical observation provided the basis for medical description of leprosy. 

Brody asserts that these physicians, echoing one another's descriptions, do not have an accurate grasp of leprosy as modern medical authorities understand it, and that "descriptions of leprosy usually are pictures of combinations of [our modern medical understanding of] leprosy and other diseases". His arguments exemplify the way that twentieth-century academics understood medieval literary depictions of lepers and what they revealed about popular opinion; later in this paper I update this viewpoint through reference to Rawcliffe's work on how lepers really were perceived.

Brody's argument for the derivative nature of medical work is grounded in the tradition of medieval academic writing: authors revered previous authorities, and adhered to ancient treatises rather than recording new information that contradicted them. Chaucer's verse praising "the olde Esculapius… Haley and Galen… Razis and Avycen" exemplifies the traditional veneration of medical antiquity. Chaucer's great physician "knew the cause of everich maladye" from his close study of the greats. Indeed, two respected medieval medical authorities include extremely similar passages on leprosy: Gilbertus Anglicus (who Chaucer mentions in his list of authorities) in his *Compendium Medicinae* and 'Theodoric of Cervia in his *Chirurgia*. Since the chronology of the two men's works is not entirely clear, who plagiarised whom (if either did) remains uncertain. Brody uses the "little sound information available" to the medieval medical writer to argue that he "[achieved] the

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14 Ibid., 109.
16 Ibid., 51.
17 Ibid., 54.
18 Ibid., 59.
19 Ibid., 59.
21 Ibid., 41.
22 Grigby, "Leprosy in English Middle Ages", 54.
24 Chaucer, *Canterbury Tales*, 419.
appearance of wisdom by calling upon the authority of tradition... copying authorities without citing them”, amplifying the exaggerated understanding of leprosy that he believes infiltrated literary descriptions of the time.26

According to Brody, medieval medical writers’ “capacity for combining fact and fantasy” in their uncritical deference to older writing manufactured an inaccurate conception of the disease, which in turn formed an attitude of fear and loathing toward the disease itself and its victim.27 As Brody points out, the medical theory at the time was based on the Hippocratic humoral theory, that the world was made up of four elements and the human body functioned on four corresponding elements: black bile, yellow bile, blood, and phlegm. The medieval authority Brody analyses most closely, Theodoric of Cerva, accepts humoral theory and uses it to explain the four corresponding types of leprosy: “elephantic, which has to be produced from black bile infecting the blood; leonine, from bile corrupting the blood; tyrian from phlegm infecting the blood; alopecian from corrupt blood”.28 Brody sees the humoral theory’s influence in Theodoric’s work as evidence of the medieval medical writer’s dilemma: the dominant pre-existing theory took precedence over empirical observation and produced inaccurate symptomatic descriptions that would not occur in “true” cases of leprosy as modern physicians record it.29 He argues, essentially, that the medieval hatred and fear of leprosy he diagnoses stems from how medical authors believed the disease was caused.

Brody looks at how lepers appear in vernacular literature in order to examine medieval English lay society’s true perception of leprosy. This analytic approach certainly may prove productive; however, because Brody’s book, with its harsh conclusions, was written before Rawcliffe’s more recent investigations into the complex reality of English lepers, his analysis of English sources can and should be revisited in light of the new historiography. In this paper, I will reconsider “The Testament of Cresseid” by Robert Henryson and the medieval romance “Titus and Vespasian”, which he discusses only briefly, to see if these fit into a larger unchanging canon of opinions on leprosy, as Brody argues, or if they instead suggest a gradual shift in opinions. I will also consider English material Brody does not, in order to better determine whether his argument holds true in England specifically, or, if it does not, draw a more accurate conclusion from the documents examined in light of more recent scholarship.

As Andrew Cunningham argued in 2002, a disease is necessarily a social phenomenon more than simply a biological one: humans look for the causes of or reasons for their ailments, and this emphasis on etiology ensures that diseases are not experienced simply by what they do to the body, but also by how the affliction is described, how the description is heard, and how societal norms process the end results.30 Because of this, every disease must be considered within its societal and historical context in order to be properly understood. No disease is historically constant, either in its biological or its social form, and social reinforcement of the understanding of a disease can change how it is perceived over time, both by medical professionals and by laypeople.31 Leprosy was a disease buffeted by opinions about both its causes and its implications, and in order to evaluate changes in lepers’ standing in English society, we must first examine what exactly being a leper meant to medieval English people.

### Leprosy: Definition and Connotations

Modern physicians understand leprosy and its symptoms to be synonymous with the infectious bacterial illness Hansen’s disease. Hansen’s disease is caused by *Mycobacterium leprae*, which can enter the body through scratches in the skin, the mouth, or the nose, and causes disfiguring skin sores, nerve destruction at the extremities, and eventually, degeneration of facial features.32 Hansen’s disease, or lepromatous leprosy, is the most serious and extreme form of leprosy, though another strain, tuberculoid leprosy, also exists. Tuberculoid leprosy also causes nerve damage, but it can suddenly “self-heal” and leave the skin relatively intact, while Hansen’s disease does not spontaneously disappear.33 Even though it is highly communicable, the bacterium rarely successfully infects those exposed to it, and the incubation period necessary for symptoms to appear lasts between two and ten years.34 In pre-laboratory medicine, however, leprosy was a very different disease. It was not caused by any external pathogen, but rather had a range of causes, and was considered both hereditary and infectious. The symptoms understood by medieval physicians to indicate leprosy may, to us, indicate such illnesses as syphilis, scabies, psoriasis or even eczema.35 The medieval system for understanding diseases and afflictions of the body is entirely different from the modern microbial system, which is based on singling out and treating a causative agent. Medieval medicine was focused on symptoms, so all generally recognized signs of leprosy from medieval medical literature will be considered indicative of leprosy in the sources examined here. Since my aim is to understand how lay opinions of lepers shifted from the thirteenth to the sixteenth century, through examining literary sources, it is essential that my definition of leprosy is consistent with its use in the period under investigation.

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26 Brody, Disease of the Soul, 42-3.
27 Ibid., 35.
28 As quoted in Brody, Disease of the Soul, 37.
29 Ibid., 59.
31 Ibid, 14.
33 Ibid, 244.
34 Ibid., 242.
35 Brody, Disease of the Soul, 41.
A brief overview of the prevailing medical theory in medieval England is necessary prior to my discussion of the specific symptoms and causes of leprosy in order to understand where the bias against lepers came from. Humoral theory was the dominant medical theory to which physicians tailored their understanding of illnesses. In medieval medicine, there was no clear distinction between the symptom and the disease: even something like a headache was treated as a disease in and of itself. A person’s innate humoral composition was influenced by their habits, lifestyle, and environment, and made up the basis of their physical health. Excessive or inadequate amounts of the humors could render one more susceptible to an outside disease-causing force such as a plague, or cause an ailment within the body. When a person began to feel or act strangely, the feeling was interpreted as a sign of illness, and physicians treated the signs and symptoms a person exhibited that made them conspicuously ill. The theory stresses internal equilibrium: the four humours, each corresponding to one of the four elements of the world, must be kept in the correct balance within the body through eating habits, exercise, lifestyle, and, significantly, a moderate and rational mindset. There were also five “non-naturals”, factors existing outside the body that the individual could still manipulate to ensure physical and spiritual health, according to the hugely influential Greek physician Galen. These were diet, air or environment, physical exercise, sleep, evacuation of waste matter (which included superfluous amounts of any of the four humours), and “accidents of the soul” or psychological wellbeing. In medieval England, the Greek emphasis on rationality and a moderation of spirit to create wellbeing was channelled into Christianity, and immoderation became sin. The soul had to be in good health, free of guilt or wickedness, for the body to be healthy, and an unhealthy or debilitated body suggested a corrupted soul. In later medieval medical theory, the presence not only of sin but of fear, anxiety, rage, or any unbalanced emotion could cause illness in and of itself, and render the individual more susceptible to miasmic infection. Leprosy could be contracted through extended and unchecked fear or wrath as well as through miasmas or humoral imbalances, making it seem acutely threatening, particularly after the plague was introduced in England in 1348.

In the early medieval period, the administration of medicine was often the jurisdiction of the priest: as the keeper of the soul’s health, it was logical that he should be responsible for assisting in physical health as well due to the close connection between the two. In the Fourth Lateran Council of 1215, Pope Innocent III decreed that every Christian should not only confess annually, but also confess at the outset of receiving medical treatment, officially solidifying the connection between priestly duties and medicine. At the same council, Pope Innocent forbade all members of the clergy from participating in surgery, which may suggest an attempted separation of the priesthood and medicine, but this ordinance was in fact put in place because blood was thought of as unclean, and clergy members were supposed to avoid contact with impurity as much as possible. Surgery was an altogether different jurisdiction from medicine, handled by barber-surgeons who were regarded within English society as craftsmen rather than doctors. Humoral knowledge and the subsequent capacity to treat illnesses remained in an elite, literate realm dominated by the priesthood.

As a result of the close relationship between the soul and the body’s health, a definite burden of responsibility was placed on patients for their own ailments. If a patient did not care for their body or soul properly, they would continue to worsen. The extreme deterioration of a person afflicted with late-stage leprosy drew great suspicion, for his condition hinted at a very unwell spirit. However, physical suffering such as that associated with leprosy was not simply indicative of sin: it could also be seen as an opportunity granted to the sufferer for redemption, or even an indication of divine grace, depending greatly on the moral standing of the sufferer. As discussed above, there was controversy around whether the leper was indeed leprous due to his sinfulness or leprous due to his being chosen by God: accounts of holy lepers and the particularly devout prayer for their ailments. If a patient did not care for their body or soul properly, they would continue to worsen. The extreme deterioration of a person afflicted with late-stage leprosy drew great suspicion, for his condition hinted at a very unwell spirit. However, physical suffering such as that associated with leprosy was not simply indicative of sin: it could also be seen as an opportunity granted to the sufferer for redemption, or even an indication of divine grace, depending greatly on the moral standing of the sufferer. As discussed above, there was controversy around whether the leper was indeed leprous due to his sinfulness or leprous due to his being chosen by God: accounts of holy lepers and the particularly devout prayer for their ailments. First, the symptoms of leprosy as they were recognised in medieval England must be clearly laid out. The best way to do this is to look at how medical literature from the period described the disease.

The thirteenth century Franciscan scholar Bartholomaeus Anglicus gives a comprehensive description of leprosy in his encyclopaedia De proprietatibus rerum. “Lepra, meselrye [leprosy], is an universall corruption of members and of humours”, he writes, attributing a corruption of each humour to a different type of leprosy. This division of leprosy into humoral subtypes originated in the tenth century with the Islamic scholar Albucasis, who also stressed that all four subtypes were both highly contagious and hereditary. Bartholomaeus’s writing echoes these sentiments, and though he does not ref-

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36 Wear, “Knowledge and Practice”, 167.
38 Ibid., 166.
41 Rawcliffe, “Leprosy”, 239.
42 Ibid., 240.
43 Getz, “Medicine in English Middle Ages”, 13.
45 Grigsby, “Leprosy in English Middle Ages”, 57.
46 Rawcliffe, “Leprosy”, 47.
48 Brody, Disease of the Soul, 54.
Leprosy was thought to be caused by humoral corruption and was considered a punishment from God. Bartholomaeus suggests that the disease is not only the cause of great suffering in the afflicted, but also a sign of their internal state: the moralistic aspect of humoral theory meant that a leper could be scrutinised for the reason behind his affliction, and a leprosy diagnosis had the potential to cast suspicion on the morality of the sufferer.

In a system of symptomatic diagnosis that defined a disease by what it did to the body, it is easy to see why the visually striking and often nauseating symptoms of leprosy suggested something intrinsically wrong with the patient. The unfortunate leper experiences a gauntlet of symptoms, as “universally this evil hath much tokens and signes… the flesh is notably corrupt, the shape is changed, the yeyn become rounde… swelling groweth in the bodye… feeling is some deale taken away”.

Bartholomaeus begins by listing the most notable, general physical symptoms, before delving into symptoms specific to each subtype of lepra. These are the most identifiable indications of a leper: the gnarled shape of the body, particularly the extremities, the deformation of the face, and the “stench” of the infected body and breath that results from the internal corruption. The terrible smell may also have suggested to medieval English people that lepers could have been stricken as punishment for evil: sweet and pleasant smells were thought to be signs of purity and goodness, while the smell of putrefaction signified corruption.

A leper’s body seemed to be literally decomposing around them, a striking visual and olfactory signal that pointed to their once-hidden sinfulness. After listing the extensive symptoms of each subcategory, Bartholomaeus cautions the reader “lepra commeth of diverse causes besides the foresayde humours… for the evil is contagious, and infecteth other men”.

There were many other ways one could “catch” leprosy, the most widely acknowledged of which was through sex, especially with prostitutes, as their cold, moist wombs were thought to hold onto leprous semen long enough to infect a healthy man. Women’s constitutions were considered colder and moister than hot, dry men’s, and menstruation was a by-product of their inability to produce enough heat to burn off or transform superfluous matter.

Because of this incapacity, leprous semen could remain in the womb and the disease passed onto a healthy man who next lay with the woman. It could also be transmitted through the consumption of rotting meat, melancholic (cold and dry) meat, highly spiced meat, corrupt air, or even the milk of a leprous wet nurse. These myriad other ways of catching the illness in the humoral medical tradition, which include obviously sinful or immoderate behaviour such as illicit sex and gluttony, but also rather innocent ones such as corrupted breast milk, point to the medieval understanding of leprosy as extending beyond simply indicating a sinful soul. It could just happen to a person, and the suffering of a good person could be put to great spiritual use, allowing them to grow closer to God. Because humoral theory supported diagnoses that could be the sufferer’s own fault or entirely out of their control, its dominance in medieval England did not, as Brody supposes, necessarily turn people’s opinions against lepers.

What, then, were the main connotations of leprosy? It could be a direct punishment from God, or a sign of His grace, but it could also be passed from parent to child or through an unhappy accident. Early on in the medieval period, it was viewed as a punishment for sinful behaviour, but during the twelfth century a diagnosis of leprosy began to more commonly suggest that God was inviting the leper to embark on a religious life and attain salvation, at least in religious writings of the period. This conception, springing from the increased association of the suffering of Christ on the cross with the physical suffering of lepers, allowed for the popularity of donations to leprosaria to build in the thirteenth century, remain strong through the fourteenth century and continue even into the fifteenth and sixteenth centuries. Lepers in leprosaria collected donations from patrons on the basis that both the donation itself and the prayers the lepers pledged to complete for the donor would speed the donor’s soul to Heaven. The Seven Comfortable Works, a Christian doctrine that instructed good Christians to care for the sick, feed the hungry, and clothe the needy, weighed heavily during the medieval period, and leprosaria in many townships in England did not only receive monetary donations, but shipments of weekly produce and food items as well. Caring for the infirm was thought not only to be an

56 Bartholomaeus, “Proprietatibus”, Liber Septimus, cap. 65.
57 Rawcliffe, Leprosy, 55.
59 Rawcliffe, Leprosy, 77.
60 Ibid., 258.
act of religious devotion but also a path to individual spiritual transformation, making the process of donation and charity to leprosaria and other hospitals a symbiotic relationship. However, medical and encyclopaedic texts produced during this same period, such as Bartholomaeus’s, stressed leprosy’s origins in humoural corruption above all other causes, and the suffering lepers underwent just as easily signified well-deserved punishment as it did divine reward. Perhaps lepers were serving their time in Purgatory on earth through their suffering, and perhaps their past actions were so evil they had been stricken with the disease. Both options were equally plausible in the complex theory surrounding the disease, but analysis of the period’s literature may determine whether the popular attitude toward lepers shifted from reverence to suspicion from the 1200s to the 1600s.

Leprosy in Medieval English Literature

Why can we trust literature to be a guide if even the medicine was informed by a host of traditional archetypes rather than attempting to reflect current reality? Simply put, there is an argument in modern literary scholarship that greater trust can be put in the literature of medieval and early modern England, particularly after 1350, than earlier English literature, because the tradition of basing characters on established archetypes fell by the wayside during this time and narrative literature began to comment directly on aspects of contemporary society. Many of these literary sources coincide, particularly in their treatment of the peasant class, with more quantifiable evidence from governmental, judicial and seigniorial records, suggesting that the image of society they paint is one that can, if carefully examined, be trusted. Though literary works are not intended to document historical events, they offer insight into medieval cultural practices and opinions that historical records often cannot. Of course, the authors and audiences of the literature being analysed must be taken into account, as no one piece of literature represents any society as a whole.

Read carefully, with due attention paid to their context, vernacular English literature can provide an entryway into how leprosy was perceived, and how these perceptions changed over time. The analysis portion of this paper will be divided into examination of sermons and homilies, and examination of narrative literature such as romances, as both these forms had different aims and methods for achieving them. Sermons, written to educate the general, Christian public, were much more accessible to unlearned masses both in content and availability. Narrative literature, on the other hand, such as the works of Chaucer, were most often produced by the highly literate elite for the highly literate elite, making them more dangerous to use as examples of “popular opinion”. However, the poems and romances studied here make specific use of leprosy, which was a widely recognisable disease, largely as a result of its prevalence in religious literature. Leprosy was so well-known and used so often in the literature, both accessible (religious) and elite (narrative), in the three-hundred-year period I am investigating, that I am choosing to study the narrative sources as suggesting a generally accepted viewpoint on the disease’s connotations. However, I do not claim that any of these sources, including sermons and homilies, represent a unanimous understanding of leprosy in their chronological contexts, as contradictory views of what it represented existed throughout the examined period. Several of these documents will be examined in translation, but wherever possible the original source material will be quoted and analysed.

Piers Plowman, a narrative poem written between 1370 and 1390 by William Langland, only mentions leprosy three times, but the way it is used in these instances is useful to this analysis. The most telling mention of Leprosy is in Passus 16. Will, falling into a dream within a dream, is shown around the Tree of Charity by Piers the Plowman, who tends to the tree using the Power of God the Father, the Wisdom of God the Father, and the Holy Ghost to protect its flowers, leaves and fruits from the devil.

This image of a Christ figure as a gardener, protecting sacred virtues such as Matrimony and Maidenhood from being collected by the devil, is quickly followed by the revelation that Piers can also teach people “leechcraft [medicine]... life for to save.” Here, “the sick and the sinful” both are “salved” by Jesus whom Piers taught the art of medicine. Piers separates the notions of a sick body and a diseased soul, but reinforces the idea that both can be repaired with the same thing: goodness and faith. This passage is where lepers are first mentioned: “both measles [lepers] and mute, and in the menison bloody” were healed by Christ, “the leech [doctor] of life.” The role played by Christ in this section is one of physician to physical and spiritual wounds and sicknesses, and lepers are an example of His capacity for miraculous healing. These lepers, categorised among those suffering from muteness and dysentery, are not necessarily sinners, but are instead simply ill: not entirely whole in body or spirit, and in need of ministrations from the perfect physician, Christ, in order to attain that wholeness. The image may be directly referencing the miracle of Christ healing the lepers in Matthew 8:2-4: a “man with leprosy” knelt before him and asked to be made clean, and Christ obliged with a touch. In the Bible, the man was described as “cleansed”, but this impurity was not explicitly tied to any sin of the man’s mind or past, instead presented simply as an affliction alleviated through faith. While the description in Piers also suggests no particular sin, it does place the leper in an explicit position of spiritual ill health, which requires a miracle of Christ to heal, a far cry from the uses of leprosy in the 1100s and early

63 Langland, “Plowman”, 104.
64 Ibid., 109.
65 Ibid., 112-119.
The Middle English romance *Titus and Vespasian*, or *The Destruction of Jerusalem*, was written between 1375 and 1400. It tells of the journey of Titus, Vespasian’s son, and Velocian, his steward, to seek a cure for the king Vespasian’s leprosy through the healing powers of Christ. Vespasian is healed when he professes his faith in Christ and kisses the cloth that carries the imprint of His face, the Vernicle. From this point on, the romance concerns Vespasian’s quest to avenge Christ’s death at the hands of the Jews, and his eventual christening and anointing as emperor of Christian Rome. I quote here from a 1510 edition of the poem entitled “The dystruccyon of Iherusalem by Vaspazian and Tytur”. In the initial description of Vespasian’s predicament, Vespasian’s Seneshall Guy tells his host, Jacob, that Vespasian’s body is so “euyll apparylled with leper [evilly stricken with leprosy] that he may not sustayne himsylfe” and that he is forced to lie recumbent day and night. The sight of him is “ryght pyteous”, and his men can “fynde no surgyns that can hele him”. As soon as Vespasian’s incurability is introduced, Guy mentions that he has heard of a holy prophet named Jesus, who, having performed many miracles in his life and after his death (including the curing of leprosy, as seen above), might cure the emperor through a holy object he had touched. Guy then reveals that to find this prophet is his purpose in Jacob’s home. Jacob asks if Vespasian believes in the holy prophet, and Guy answers that he believes instead in “the ydoles [idols]/ and wyll not leve it for nothynge”. Jacob makes it clear that if “he byleve not in the holy prophete” then he cannot be healed. He tells a story about a woman also afflicted with leprosy so severe “she durste not fynde herself amonge people”, but who believed wholeheartedly that Christ could cure her. This juxtaposition deserves a moment’s attention, between the leper who does not believe and has no hope of recovery without faith, and the woman allowed to suffer leprosy who has faith that she can be healed. It is clear that in this source, leprosy itself is not being portrayed as a punishment for any sin or faithlessness. It is the cure, or lack of it, that constitutes the presence or absence of divine grace. Only when Vespasian declares his eternal belief in and worship of Christ is he healed of his leprosy. This source uses the disease as a means by which those afflicted find or reinforce their faith. Here, it does not symbolize corruption of the soul or the presence of any particular sin: instead, it acts as a means by which the afflicted are guided toward accepting and following Christ, and their reward for their faith is recovery from their disease.

The description of leprosy in *Titus and Vespasian* is similar to *Pieri’s* description of leprosy and the original depiction of Christ’s healing of leprosy in scripture; lepers in *Titus* are cured of their impurity through faith without the underlying suggestion that the illness is in any way a punishment for the impurity in the first place. This differs from later narrative depictions of Jesus’s interactions with lepers in one significant way. In later manuscripts, such as the one discussed next, the presence of leprosy is equated to the presence of sinfulness in the afflicted, while here the disease is more considered a means by which the afflicted finds their faith, not necessitating previous faithlessness (though Vespasian is originally a worshipper of idols, the woman in Jacob’s story is not). Written in the late 1300s, this source presents leprosy as a means by which faith is found without implying that its presence necessitates the internal corruption of the afflicted, giving a morally neutral representation of the disease while using it to illustrate Christ’s position as the perfect healer.

Robert Henryson’s narrative poem *Testament of Cresseid* was written in the mid-1400s. Though not an English writer, Henryson’s perception of leprosy would have been shaped by a medical culture identical to the English one, as the two societies shared a medical tradition. Henryson is a Scottish poet and it is written in Middle Scots, but he is often considered a successor to Chaucer, both in narrative style and, particularly in this poem, in content. His Scottish citizenship is not disparate enough from the English identity to warrant leaving this important text out of this analysis. A thorough account of the reasons for and effects of a woman’s leprosy, it will here be considered in some detail.

In the beginning of the poem, the narrator puts down Chaucer’s *Troilus and Criseyde*, which he just finished reading. He then retrieves another book, which tells the continuing story of Cresseid. By introducing the tale as something the narrator is reading, and an extension of a Chaucerian narrative, Henryson allows the narrator’s implicit biases to infiltrate the account subtly, without the reader being immediately aware of them. This structure is a common medieval narrative device, using a first-person speaker who relays an established story for a didactic purpose, but in doing so, manages to remain unaware of a crucial lesson the story itself reveals. “Lustie” Cresseid, who in the Chaucer tale abandoned the Troy-bound Troilus for Diomed (spelled in the Henryson poem as “Diomeid”), found that Diomeid has “had all his appetye” and as a result “her excludit fra his companie [excluded her from his company]”. Henryson carefully frames their relationship around “appetye” rather than anything resembling true love, so as to establish both Diomeid and Cresseid as lustful, and Cresseid’s abandonment by her former lover as something to be expected.

Desolate Cresseid mourns her situation, and the narrator chastises her for changing “in filth all thy Feminitie” for “fel-

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66 Rawcliffe, Leprosy, 59.
68 Ibid.
69 Ibid.
schlie lust” that “maculait” (stained) her.\textsuperscript{73} His rebuke lacks the awareness that in fact, Cresseid in her loneliness is parallel to the narrator himself, who is also alone and too old for his “faidit hart” to be made “grene” and young with love again.\textsuperscript{74} The narrator, introduced as an outcast in a cold snap in the middle of summer, has more in common with the abandoned and “desolait” Cresseid. This implicit connection between the narrator and his subject, both rejected and alone, underlines the social implications of the leprosy that strikes Cresseid for her rage-filled rejection of the gods. The ridiculousness of his refusal to empathise with her despite their similarities critiques popular ostracism of a person for moral uncleanness.

Cupid, against whom Cresseid blasphemed, declares that “hir leving unclene and lecherous… with pane we sulde mak recompence [should make recompense]” and asks Saturn to take on “this doleful sentence.”\textsuperscript{75} Saturn, the melancholic god, was known in late medieval England to control the melancholic humour and therefore to have lepantiasis (and in some sources, all subtypes of leprosy) under his jurisdiction.\textsuperscript{76} Saturn says to the sleeping Cresseid, “I change thy mirth into Melancholy… thy moisture and they heit in cald and dry”, the humoural imbalance of which was known in medical texts such as Bartholomeaus’s to be the cause of lepantiasis. Though the gods do not explicitly state they will give her leprosy, the choice of Saturn as the god who will inflict the punishment and his opening decree to fill her with melancholy brings the disease immediately to mind.

When Cresseid awakes, she finds “hir face… deformait”, another word used often in descriptions of the effects of late-stage lepantiasis. Her father, on finding her, “luikit [looked] on hir uglye Lipper face… qhyte as Lillie flour [white as lily flour], [and] wringand his handis” in despair, for he know “that thair was na succour to hir seiknes”.\textsuperscript{77} Stricken directly by the gods, as punishment both for her anger against them and for her lusty, “unclene” behaviour, Cresseid is beyond the reach of a cure. The only option she considers for herself, which she suggests immediately to her father, is entrance to a “Hospitall” for the rest of her life, as is her “wicket weird [fate]”.\textsuperscript{78} Cresseid mourns, but accepts her fate as the correct punishment for her wrongdoing. In the poem’s section “The Complaint of Cresseid”, she bemoans her fate behind the hospital walls that shield her from “fresche flowers” and other pleasant things, and complains of the loss of her “cler voice” which is now “full hideous hoir and hace”, another clear and widely recognized symptom of leprosy.\textsuperscript{79} From these symptoms described, along with the word “Lipper” used several times to describe her and her fellow residents of the hospital, it is clear that the disease of the gods’ choice to ensure she suffers suitably for her sins is leprosy.

Cresseid’s experiences after being stricken with the disease reveal a complex viewpoint on lepers. In her lamentation she not only expresses regret for her new, permanent situation, without seeming to even think of an alternative to her seclusion, but she also admits without hesitation that “my Infelicitie, my great mischief quhilk [which] na man can amend” is the reason behind her plight.\textsuperscript{80} Once shuttered in a leprosarium, Cresseid turns to repentance as punished sinners are supposed to do, and re-evaluates herself under these new terms. When Troilus reappears and, not recognising her, but having a weighty sense of her presence in his heart, casts a “purs of gold” at her feet, Cresseid’s reaction to the unexpected interaction is archetypal of a repentant sinner. She falls down in despair, and declares her breast “wrappit in woe, and wretch full will of wane”, for Troilus’s “lufe, thy lawtie, and thy gentilnes, I countit small in my prosperity [love, thy loyalty, and thy gentleness, I counted small in my prosperity]” while the two of them were lovers.\textsuperscript{81} She admits her own “wantones”, and decries her “self fickill and frivolous”: her lament here is her confession, her now-complete understanding of the reasons behind her divine punishment of leprosy.\textsuperscript{82} She declares that “all my gold the Lipper folk sall have” after her death, and dies very soon after.\textsuperscript{83} Cresseid’s remorse and complete acceptance of her fate, as well as her careful and traditional steps toward achieving repentance in the bequeathing of her earthly riches to the leprosarium, do not put her in the position of someone being punished wrongly, but rather give her a more elevated role. She has come to terms with her sins and, in doing so, spends the last days of her life attempting to repent as best as she can. Her leprosy is a rightful punishment for her behaviour that makes her miserable by but does not resent.

Cresseid’s character, aware of her sins, is put in direct juxtaposition with the obtuse narrator of the tale. Oblivious to his similarities with the woman in the tale he recounts, he ends his narration by rattling off a brief morality lesson for “worthie Wemen,” declaring the entire poem to be made for their “instrucition”.\textsuperscript{84} This unwillingness to connect with the sinner in the tale reveals more about the social position of lepers who are regarded as being punished with the disease. The narrator is identified at the very beginning of the poem as a man trapped in the cold despite the fact that it is the height of summer. He laments his incapacity to feel true and passionate love like he used to when he was young: his old age and Cresseid’s abandonment at the hands of her new lover Diomed and her incurable, segregation-worthy illness

\textsuperscript{73} Ibid., 22.  
\textsuperscript{74} Ibid., 20.  
\textsuperscript{75} Ibid., 31.  
\textsuperscript{76} Brody, Disease of the Soul, 50.  
\textsuperscript{77} Henryson, “Cresseid”, 33.  
\textsuperscript{78} Ibid., 33.  
\textsuperscript{79} Ibid., 35-36.  
\textsuperscript{80} Ibid., p. 36.  
\textsuperscript{81} Ibid., 39.  
\textsuperscript{82} Ibid., 39.  
\textsuperscript{83} Ibid., 40.  
\textsuperscript{84} Ibid., 42.
put them in very similar positions, as both cannot access the love they crave. Both are outcasts in a cold world: Cresseid can no longer experience a garden filled with flowers, and the narrator cannot sufficiently warm himself. Their connection, which goes unacknowledged by the narrator, casts his judgement of her character in a new light. He dismisses her, at the end of the poem, as a cautionary tale useful only to teach other women virtue. However, as the reader follows the story of Cresseid, she grows to accept her ill behaviour, repent it and seek redemption at the time of her death, behaving in a way that shows her true status as a penitent sinner. Her leprosy puts her in the situation she needed to learn the true extent of her missteps and attempt to correct them in the remainder of her life, while the narrator remains in his cold home passing judgement on a woman who could have taught him a great deal. Henryson’s obtuse narrator gives the reader pause over continuing to judge the gentle, repentant Cresseid either for her past sins or for her subsequent illness.

Henryson’s use of leprosy as a punishment is not put into an unjust light, but rather the opposite: the wiser figure in the story, Cresseid, does not reject the judgement of the gods who bestowed it on her. Her leprosy allowed her to repent properly, but it also was clearly given to ensure that she suffered a fate that would fit her sins. It was explicitly incurable, deforming, debilitating, and resulted in her near-total exclusion from her society. Her leprosy was portrayed as a fitting penalty that eventually brought her peace with the sin that distorts the body and punishes its recipient, though its recipient learns her lesson quite effectively, whereas the earlier texts discussed made no connection between leprosy and sinfulness.

The narrative sources analysed above do change over time, from leprosy as a morally neutral means of leading sufferers to faith, to leprosy representing explicit corruption and sin and existing in the sufferer as punishment. Now, I will make the of leper clean”, Christ answers, “I will make the of leper clene”, “and Christ’s encounter with a leper who begs Him to make him clean”. Christ’s healing of the leprous man and soldier. When “Crist bad him that he suld hele” he stipulates that he tell no one “qua gaf him his hele [who healed him]”, but rather adopt a lifestyle of penitence and prayer as recognition of the miracle. This homily portrays Christ as a doctor, both of the body and the soul.

The next segment of the homily from the late 1300s portrays him bestowing the same healing treatment upon a soldier who, with his knights, travelled a long distance to come before him and ask to be healed. Had Christ not made mankind clean, the homily warns, they would be consumed by sin, as represented by the “ugli, and lathe, and unherly” body of the leper, who Crist “clensed… of leper of sinne”, equating the disease and the sinfulness that led to its manifestation within the body. This “gift that God him gafe”, the gift of spiritual and physical wellness, is a different and much harsher representation of leprosy than is seen in the previous source, written only a few decades earlier. This source is a sermon, rather than a romance, attempting to quickly and effectively convey lessons about the will and grace of God to a lay audience, while the romance above, though still religious in intent, is narrative at its heart. The connection between the sickness of the flesh and the sickness of the soul is very purposeful, bringing to mind the extreme symptoms of leprosy to make a point about the state of a sinful soul. To be cleansed “of leper of sinne” as if they were synonymous makes a straightforward suggestion that to this author, the affliction signified sinfulness without ambiguity.

In 1495, the Bishop of London Richard FitzJames wrote a sermon wherein he discussed Christ as a “perfyte physycyen” who healed the “Infyrmye of synne”. As an example, he recites Christ’s instruction to rich men to “selle all thy tresour in heven”, to which the rich man responded “hevyly and soryly”, choosing to ignore Christ’s command. At this, FitzJames reminds his listeners of the chapter of John in which many men refused to follow Christ and chose instead to follow “the devyll / This was it of the leprous men of whom we rede in the xvij. Chaptyre of Luke / this was it of Judas the traytour to Cryste”. This sermon places the “leprous men” side by side with Judas, suggesting that the suffer-


87 Small, “Homilies”, 129.

88 Ibid., 131.


90 Ibid.

91 Ibid.
ers had chosen to cast Christ from them and were lepers as a direct result of their refusal to take Christ the perfect healer into their hearts. Coming to Christ, Fitzjames stresses to his audience, is to “be curyd” in both body and in soul, as Christ says “all ye ben chargyd wyth the burden of synne / & I shall cure you.” 92 Understanding Christ as the healer of both the body and the soul was common long before this late fifteenth-century sermon, but here the lepers are used to represent those who have chosen to turn from God rather than as an example of God’s healing strength. The lepers here are left leprous for their betrayal, as only those who follow Jesus will be cured of ailment and sin.

This, like the homilies above, is a sermon, meant to be heard by many laypeople at a time, who came to the Bishop to be taught the path of Christianity. As a result, his deliberate placement of lepers alongside betrayers like Judas is meant not only to give a clear indication of spiritual betrayal and its consequences, but also a visceral reminder of the physical toll of rejecting Christ. Lepers are used in this sermon to bring up an image of suffering and decay, as those who refused to follow Christ were not healed of their ailments and were left to suffer. Christ is spoken of in the sermon as the perfect physician who can heal the soul and body at once if one chooses to abide by his preaching, and Judas and the lepers chose not to and were punished for it. Here, leprosy is clearly used to describe a punishment for deliberate sin, the choice of rejecting God and following the devil, and the physical toll a sinner’s soul takes on the body. Though he does not describe the fate of the lepers in detail, he uses the word “leprous” to bring up the well-known image of a sufferer. Lepers were commonly represented in religious art in the late 1400s, and their symptoms were widely known by members of the laity, making them an accessible metaphor. 93 The lepers in this sermon are left with their disease, a direct result of their choice, and living with the illness is the punishment for their refusal to follow God.

The earlier narrative sources and the sermons both draw from Biblical imagery of Christ healing lepers, presenting the healing as a morally neutral representation of innate human impurity cured through faith and the grace of God. Later sources, however, diverge from this neutrality, and use the disease of leprosy more viscerally as punishment for explicit sinfulness. Healing power of God is left behind in these sources, replaced with a more ominous moral of His capacity to discipline those who transgress by matching their physical bodies’ condition to the sickly state of their souls. Though these sources have different audiences and aims, their uses of leprosy change in the same way after the fourteenth century, suggesting that the two may have had influence over one another, or perhaps that the popular understanding of leprosy within English society was changing noticeably enough to influence its depiction in both genres.

What Changed? Conclusion and Further Questions

The general trend seen in these sources is an increasing use of leprosy as an indication of sin in the leper, although not as a result of any particular sin, as Cresseid was punished for pride while Fitzjames’s lepers were punished for faithlessness. Leprosy after the mid-fourteenth century seemed to be invoked more commonly in English literature to represent the corruption that Brody believed it had represented all along, while earlier documents are less clear-cut in their use of the illness. Not enough sources have been examined in this brief paper to definitively argue that a trend in the popular opinion on lepers changed for the worse in medieval and early modern England. However, what has been studied here does suggest that such a shift may have taken place. By the year 1400, leprosy had all but disappeared in England: by the middle of the 15th century, it had become more a disease of myth than something confronted by English people on a regular basis. Perhaps this fade into legend was part of what allowed it to become more of a literary device than a disease evoking contemporary suffering.

The first source examined in this paper dated to around 1370, when leprosy was in definite decline in England, and the last from 1495, decades after its essential disappearance. Through the sources covered, though some are narrative and others are sermons, there is a change in how leprosy is used. Earlier in the period, beginning with Piers Plowman, its presence in a body did not necessitate the presence of sin or evil in the soul of the afflicted, but rather symbolised a cohesive unit of body and soul that required the ministrations of Christ in order to reach a state of grace. Rather than placing all blame on the leper, these early sources seem to stress that after the Fall of Man all people are considered to be born sinful, and the extreme example of leprosy is used to convey the moral lesson that the only way to heal our inherent spiritual (and physical) inferiority is to have faith in Christ. As the decades passed, leprosy began to be used to symbolise a just punishment for specific sins or wrongdoing in the characters afflicted. This change suggests a general (but certainly not monolithic) shift in English popular opinion toward lepers, and one which not only pushed more responsibility on them for their affliction but also hinted that their leprosy necessitated the presence of evil or corruption in their very souls, rendering them less trustworthy. Though this trend is apparent in the few sources analysed here, it must be said that this is by no means a consistent change in all forms of writing: only narrative literature and sermons have been discussed here, from England and Scotland, in a very narrow period, and there exists a world of literary and non-fictional records that further explain the complex and ever-changing social position lepers held in England. That being said, there certainly was a change in the sources examined, and possible factors behind the change should now be briefly considered.

The influence of the Black Death over how illnesses were perceived should be mentioned here as a potential major

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92 Ibid.
93 Rawcliffe, Leprosy, 116.
factor in lepers’ literary decline. The plague cycles beginning in 1349 caused communities across England to become more vigilant about the spread of disease out of necessity, and theories about miasmas and contagion flourished after the Black Death’s introduction in England. The disease theory as it related to leprosy has already been discussed, and the increased emphasis on the miasmic aspect of leprosy’s spread would have caused medieval communities to increase their vigilance over how lepers conducted themselves. A leper who, through his or her own behaviour, exposed members of the community to the risk of infection, was a danger to public health. As it happened, those who were most likely to cause this risk were those most visible in the public eye for not following lepers’ customary seclusion anyway. The introduction of the plague, and the societal changes it brought, drew a firmer line between the danger of leprosy and lepers who refused to conform to the social norms imposed upon them for public safety. Again, not enough material has been analysed here to make a definitive conclusion, but the sources discussed here seem to suggest that the introduction of the plague and the resulting change in popular medical theories caused an upward surge in suspicion toward all serious illnesses, and leprosy, having always held a literary place as a dramatic and symbolic disease, was negatively affected by the changing perspectives. Leprosy was nearly eradicated by the middle of the fifteenth century, allowing its symptoms and effects to be taken up by literature and used metaphorically with a freedom lacking in the earlier centuries, when real experience with lepers may have constrained more fanciful depictions.

There are a few ways in which the analysis begun in this short paper could be extended, first and foremost by studying English medical texts from the fourteenth and fifteenth centuries to track changes in the frequency with which contagion, infectivity and miasma theories were mentioned. A valuable source for understanding popular opinion that went nearly untouched here is official court records, ordinances, and writs, close inspection of which could verify whether the few remaining English lepers were put under increased surveillance by the government after the plague cycles began, as I posited briefly early in this paper. There are so many factors that influence changes in all aspects of history that to make a bold conclusion about what swayed a major change in popular opinion, or that such a major change existed consistently across a country at all, is dangerous for any historian. Even such a seemingly straightforward causal factor as the Black Death did not only influence medical theory but also the social and economic circumstances of every social status, particularly the poor, which would have had effects on beggars, almshouses, and leprosaria. Changing religious views and practices, so closely tied to medical ideas in medieval England, also had sway over how the diseased were understood, as did the social standing of the individuals affected and their behaviour within their own local communities. As a result, this paper does not point to any grand and previously unseen trend in the English popular understanding of leprosy in medieval England, but rather suggests that the literature of the late medieval and early modern period shows a general trend away from a balance between suspicion and reverence that dominated the twelfth and thirteenth centuries toward a more cautious, hostile view. It can no longer be said that lepers were always viewed in England with fear and suspicion, though it seems that as the disease itself waned in the English population, the more powerful it became in literature as a signifier of corruption.

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94 Ibid., 255.