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## **OF WOMBS AND WORDS: MIGRATING MISOGYNIES IN EARLY MODERN MEDICAL LITERATURE IN LATIN AND HEBREW**

**Iris Idelson-Shein**

In the decades surrounding the end of the seventeenth century, new ideas about women's bodies migrated from Latin medical texts to Hebrew ones. This article follows the journey of one particular idea, that is, that there exists a unique kind of feminine madness, which originates in the womb, and expresses itself in excessive sexual desire and uncontrollable speech. Largely overlooked by modern scholars, or confused with more familiar feminine-maladies, particularly hysteria, the disease—termed *furor uterinus* in Latin and *shotut ha-rehem* (madness of the womb) in Hebrew—constituted a discrete ailment in early modern medical literature, with its “unique set of symptoms, stereotypical sufferers, and cultural associations.”<sup>1</sup> While early modern authors attributed the first discussion of the disease to ancient authorities such as Galen, Soranus, or the Byzantine physician Aëtius of Amida—it was only in the sixteenth century that *furor uterinus* became, as G. S. Rousseau has observed, “the favorite malady of diseased female genital physiology.”<sup>2</sup> The condition

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NOTE ON TRANSLATIONS: All translations are my own unless otherwise stated in notes.

<sup>1</sup> Lesel Dawson, *Lovesickness and Gender in Early Modern English Literature* (Oxford, 2008), 46-72, here 47. For more on the scholarly tendency to conflate these distinct ailments, see Helen King, “Review of Laurinda S. Dixon, ‘Perilous Chastity: Women and Illness in Pre-Enlightenment Art and Medicine’,” *Medical History* 40 (1996): 505-506.

<sup>2</sup> G. S. Rousseau, “‘A Strange Pathology’: Hysteria in the Early Modern World, 1500-1800,” in *Hysteria Beyond Freud*, ed. Sander Gilman, Roy Porter, G. S. Rousseau, Elaine Showalter (Berkeley, CA, 1993), 112. On the disease's popularity, see also Massimo Ciavolella, “Métamorphoses sexuelles et sexualité féminine durant la Renaissance,” *Renaissance et Réforme*, N.S., 12 no. 1 (1988): 14-15. For the attribution of the term to Aëtius, see, e.g., Girolamo Mercuriale, *De morbis muliebribus praelectiones* (1582. Repr. Venice, 1601), Book

continued to excite the imagination of medical writers throughout early modern Europe, purportedly reaching epidemic proportions in the seventeenth and eighteenth centuries.<sup>3</sup>

Women who suffered from *furor uterinus* were thought to experience such intense sexual desire, that they would wander the streets, vocally demanding copulation, or commit suicide “hoping in that way to quell their burning lust.”<sup>4</sup> Physicians diverged on the precise causes of the ailment; the overabundance of female seed, intense genital stimulation, retention of menses, indulgence in luxuries, and excessive reading were all cited as possible triggers—but it was widely agreed that sexual abstinence was a major contributing factor.<sup>5</sup> Consequently, single women, such as widows, divorcees, adult virgins, and—in Jewish literature—deserted wives (*agunot*) were thought to be particularly susceptible to the disease.<sup>6</sup> The wide range of cures offered by early modern authors for the ailment corresponded with the differing opinions on its causes, but there was one solution upon which physicians agreed almost unanimously. As French physician and professor of medicine at Montpellier, Lazare Rivière (1589-1655) wrote in 1640: “It is best to maerry such virgins to a strong young man. For so the womb being satisfied, and the offensive matter contained in its vessels being emptiels, [the patient] may be cured.”<sup>7</sup>

It was through Rivière’s influential book that *furor uterinus* entered Hebrew literature for the first time. In 1683 Rome-born physician and chief rabbi of Ferrara, Jacob Zahalon (1630-1693), published a book titled *Ozar ha-ḥayim* (Treasure of life).<sup>8</sup> As I have argued elsewhere, this well-known Hebrew book was, in large parts, an unacknowledged translation of Rivière’s *Praxis Medica*, including his discussion of *furor uterinus*.<sup>9</sup> It was not long before Zahalon’s discussion was followed by others; In 1708 the Metz-born physician and Padua-graduate Tuviah Ha-Cohen (1652-1729) offered, in his well-known scientific textbook,

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4:185. The term *furor uterino* was also used in the sixteenth-century Latin translation of Aëtius’s *Tetrabiblos*, see Aëtius, *Tetrabiblos*, trans. Janus Cornarius (1533-5; Repr. Leiden, 1549), 1001. The attempt to present classical antecedents for distinctly early modern discussion of disease is characteristic of the medical literature of the period. See King, *The Disease of Virgins: Green Sickness, Chlorosis, and the Problems of Puberty* (London, 2004), 41-63.

<sup>3</sup> Samuel Auguste Tissot, *Traité des nerfs et de leurs maladies*, vol. 2, part 1 (Lausanne, 1784), 86-87; D. T. De Bienville, *La nymphomanie, ou traité de la fureur utérine* (1771; repr. Lausanne, 1788), 13-14.

<sup>4</sup> Jacques Ferrand, *De la maladie d’amour ou melancholie erotique* (1610. Rev. edition, Paris, 1623), 75. English translation: *A Treatise on Lovesickness*, trans. and ed. by Donald A. Beecher and Massimo Ciavolella (Syracuse, NY, 1990), 264. Ferrand’s description relied heavily on: Mercuriale, *De morbis muliebribus*, 4:185-186. See also Beecher’s note in: Ferrand, *A Treatise on Lovesickness*, 430-431 n1.

<sup>5</sup> See, e.g., Ferrand, *De la maladie d’amour*, 76-7; Mercuriale, *De morbis muliebribus*, 4: 186; Abraham Zacutus Lusitanus, *Praxis Medica Admiranda* (Lyon, 1637), 264; Lazare Rivière, *Praxis Medica*, 2 vols. (1640. Repr. The Hague, 1658), 2: 206.

<sup>6</sup> On the (Christian) theological implications of such “diseases of virgins,” see King, *The Disease of Virgins*, 58-63.

<sup>7</sup> Rivière, *Praxis Medica*, 2:206-210.

<sup>8</sup> Jacob Zahalon, *Ozar ha-ḥayim* (Venice, 1683). On Zahalon’s life and works see Harry A. Savitz, “Jacob Zahalon and His Book,” *New England Journal of Medicine* 213, no. 4 (1935): 167-176; Harry Friedenwald, “Jacob Zahalon of Rome,” 1918; Repr. *The Jews and Medicine*, 2 vols. (Baltimore, 1944), 1:268-279; Henry A. Sosland, *A Guide for Preachers on Composing and Delivering Sermons: The Or ha-Darshanim of Jacob Zahalon* (New York, 1987), 17-66

<sup>9</sup> Iris Idelson-Shein, “Rabbis of the (Scientific) Revolution: Revealing the Hidden Corpus of Early Modern Translations Produced by Jewish Religious Thinkers.” *American Historical Review* 126, no. 1 (2021): 54-82.

*Ma'ase Tuviah* (Tuviah's work), his own description of *furor uterinus*.<sup>10</sup> Tuviah's description drew on a litany of Latin sources, which he merged together and complemented with his own insights and observations. Almost thirty years after the publication of *Ma'ase Tuviah*, another Hebrew author, David De Silva (1684-1740), took to describing *furor uterinus* in his medical manuscript "Pri hadas" (Myrtle fruit).<sup>11</sup> Based in Jerusalem and probably a personal acquaintance of Tuviah's, De Silva combined Tuviah and Zhalon's previous discussions, borrowing liberally from both, while adjusting his adaptation ever so slightly, to express his own reservations and convictions.

Taken together, these three Hebrew texts provide a view into the dynamic ways in which early modern Jewish authors took an active interest in contemporary scientific discussions, and imported them back into the Jewish community. These debates touched upon concerns surrounding femininity, sexuality, and women's agency—concerns that were shared by both Christians and Jews, but which were remoulded in these Hebrew texts to fit a specifically Jewish frame. The intense (albeit often unacknowledged) dialogue which took place between these Hebrew texts and their source texts, offers a valuable lesson on early modern forms of cultural transfer, authorship and translation, as well as on competing notions of feminine sickness and sexuality in early modern medical thought.

In what follows, I offer a comparative reading of these early modern Hebrew depictions of *furor uterinus*, locating them within their wider (both Jewish and non-Jewish) context. I will thus read Hebrew descriptions of *furor uterinus* alongside descriptions of the ailment in Latin medical literature, on the one hand, and corresponding discussions of sexual deviance and uterine malady in contemporary Jewish works, on the other. I will furthermore investigate the complex relationship between deviant sexuality and feminine speech which occurs in descriptions of *furor uterinus*, as it emerges particularly in these three Hebrew description of the disease. Significantly, similar to Latin, early modern Hebrew was a learned language, written *by and for* men.<sup>12</sup> Women were pointedly excluded from this discussion of their own bodies, a discussion which prevented the very possibility of their participation by pathologizing feminine agency and expression. The three Hebrew texts surveyed here thus offer an educative lesson on the complexities of inter-cultural dialogue, revealing translation's role in promoting not only interreligious tolerance, but also its complicity in the dissemination of prejudice. Indeed, viewed in the context of gender and sexuality, the cultural bridge which connected early modern Christians and Jews becomes a conduit for conveying

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<sup>10</sup> Tuviah Ha-Cohen, *Ma'ase Tuviah* (Venice, 1708), 134r. On Tuviah, see David B. Ruderman, *Jewish Thought and Scientific Discovery in Early Modern Europe* (New Haven, 1995), 229-55.

<sup>11</sup> David De Silva, "Pri Hadas" (c. 1735). National Library Israel, Ms.Benayahu, E 208. Available online: [https://web.nli.org.il/sites/NLIS/he/ManuScript/Pages/Item.aspx?ItemID=PNX\\_MANUSCRIPTS990001385580205171](https://web.nli.org.il/sites/NLIS/he/ManuScript/Pages/Item.aspx?ItemID=PNX_MANUSCRIPTS990001385580205171) (accessed July 2, 2020). On De Silva and his manuscript, see Zohar Amar, *Pri magadim le-r' David De-Silva rofe mi-Yerushalyim* (Jerusalem, 2004), 83-85.

<sup>12</sup> While it is true that many early modern Jewish women were able to read Hebrew script, this literacy allowed them to read Yiddish, not Hebrew. In fact, for most early modern Jews (both women and men), Hebrew was—as Chava Turniansky notes—"a language the addressee knew how to read but did not understand." Chava Turniansky, "Yiddish and the Transmission of Knowledge in Early Modern Europe," *Jewish Studies Quarterly* 15, No. 1 (2008), 15.

not only new discoveries and scientific developments, but also new forms of discrimination and repression.

### **The Birth of the Bad Womb: A Brief History of Uterine Malady**

If, as David Hillman and Carla Mazzio have argued, corporeal parts often serve as “concentrated sites where meaning is invested and often apparently stabilized,”<sup>13</sup> then certainly the womb functions as one of the most pregnant sites of them all. A mysterious, uniquely feminine organ, for centuries the womb has haunted European imagination, serving as a site of envy and anxiety about women’s power. From its vulnerable location deep within the feminine abdomen, the womb transgresses the boundaries between existence and inexistence, self and other, inside and out—making it a perfect metaphor for the transgressive, two-faced nature of women more generally. In classical works, the womb was sometimes envisioned as a kind of ravenous organism, that would wander the female body, eliciting malady, distress, even death.<sup>14</sup> A no-less dismal image is found in inter-religious polemics, in which, from antiquity and into the early modern period, theologians harnessed the womb’s association with filth, excrement, and decay to attack their religious rivals.<sup>15</sup> Jewish polemicists seem to have derived particular pleasure from reminding their Christian neighbours that Jesus had originated in the “filth of the womb.” Always a source of scathing polemics, the ~thirteenth-century anonymous *Sefer nizzahon yashan*, for instance, argued that Christians: “err in saying that something holy entered into a woman in that stinking place—for there is nothing in the world as disgusting as a woman’s stomach, which is full of feces and urine, which emits discharge and menstrual blood and serves as a receptacle for a man’s semen.”<sup>16</sup> The womb fared little better in European art and literature; over the centuries, poets, authors, artists, playwrights, and filmmakers worked diligently to cement the association of the womb with the tomb, the prison, and the dungeon.<sup>17</sup> In Shakespeare’s *Titus Andronicus*, for instance, a deadly pit is likened to a “swallowing womb,” a “detested, dark, blood-drinking pit”; a “devouring receptacle, as hateful as Cocytus’ misty mouth.”<sup>18</sup> Shakespeare’s later contemporary, John Donne, painted a similarly dire portrait, associating gestation with darkness, cannibalism, sin, and potential death. “There in the wombe”—wrote

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<sup>13</sup> David Hillman and Carla Mazzio, Introduction to *The Body in Parts: Fantasies of Corporeality in Early Modern Europe*, ed. Carla Mazzio and David Hillman, (New York, 1997), xii.

<sup>14</sup> On the debate surrounding the theory of the wandering womb in antiquity and beyond, see King, “Once Upon a Text: Hysteria from Hippocrates,” in *Hysteria Beyond Freud*, 3-90; Monica H. Green, Introduction to: *The Trotula: A Medieval Compendium of Women’s Medicine*, ed. and trans. By Monica H. Green (Philadelphia, 2001), esp. 22-32.

<sup>15</sup> Alexandra Cuffel, *Gendering Disgust in Medieval Religious Polemic* (Notre Dame, IN, 2007), esp. 60-66.

<sup>16</sup> Translation according to: David Berger, *The Jewish-Christian Debate in the High Middle Ages: A Critical Edition of the Nizzahon Vetus* (Philadelphia, 1979), 68. On Jewish (and non-Jewish) monstrous representations of the female reproductive system more generally, see Idelson-Shein, “The Monstrous *Mame*: Mapping the Margins of Maternity in Early Modern Jewish Discourse,” *Jewish Social Studies* n.s. 20, no. 3 (2014): 53-55.

<sup>17</sup> On depictions of the womb in twentieth-century horror films, see Barbara Creed, *The Monstrous Feminine: Film, Feminism, Psychoanalysis* (London, 1993).

<sup>18</sup> William Shakespeare, *Titus Andronicus*, ed. Alan Hughes (Cambridge: Cambridge Univ. Press, 1994), 2.3.225-239.

Donne—“wee are taught cruelty, by being fed with blood, and may be damned, though we never be borne.”<sup>19</sup>

Reading through this array of ancient, medieval and early modern monstrous wombs, one may form the impression of remarkable stasis.<sup>20</sup> And yet, as Evelyne Berriot-Salvadore points out, “the perennial stereotypes and endless repetition mask certain ruptures, which are particularly difficult to analyze because they do not coincide with the familiar turning points of the standard history of medicine.”<sup>21</sup> One such rupture appeared towards the end of the Middle Ages, and began to grow significantly over the course of the following centuries. Beginning in the fifteenth century, and with added urgency after the 1525 translation of the Hippocratic gynaecological texts into Latin, physicians in the Latin West, and medical writers in Latin and the various European vernaculars, began to devote more and more attention to gynaecology as a specialized field, and to the systematic study of women’s illnesses.<sup>22</sup> As Mary E. Fissel explains, during the second half of the sixteenth century: “the female body became a dangerous and unstable entity” and authors began to propound “a very negative view of the ways in which women’s reproductive systems affected their entire bodies.”<sup>23</sup>

As medical interest in gynaecology increased, physicians began to compete with one another in their gruesome portrayals of the womb and its hazards. The renowned English physician, William Harvey (1578-1657), for instance, observed that: “No man [. . .] is ignorant, what grievous Symptomes, the Rising, Bearing down, and Perversion, and Convulsion of the Womb do excite; what horrid extravagancies of minde, what Phrensies, Melancholy Distempers, and Outragiousness, the praeternatural Diseases of the Womb do induce, as if the affected Persons were enchanted.”<sup>24</sup> Rivière, borrowing from Zacutus Lusitanus, went as far as to present the womb as the sewer (*cloacam*) “whereunto other parts [of the body] disburden themselves,” and he attributed to it no less than “six hundred hardships and innumerable calamities.”<sup>25</sup> Writing in the eighteenth century, Flemish anatomist Jean Palfyn (1650-1730) increased the number of miseries caused by the womb

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<sup>19</sup> John Donne, “Death’s Duel: Preached before King Charles 1 (25 February 1631), in: *John Donne, The Major Works* (Oxford, 1990), 403. See also H. L. Meakin, *John Donne’s Articulations of the Feminine* (Oxford, 1998), 139-99.

<sup>20</sup> On monstrosity as a cultural category, see Jeffrey Jerome Cohen, “Monster Culture (Seven Theses),” in *Monster Theory: Reading Culture* (Minneapolis, 1996), 3–25. On monsters and the monstrous in Jewish history, see the collected essays in Idelson-Shein and Christian Wiese, *Monsters and Monstrosity in Jewish History: From the Middle Ages to Modernity* (London, 2019).

<sup>21</sup> Evelyne Berriot-Salvadore, “The Discourse of Medicine and Science,” in *A History of Women in the West III: Renaissance and Enlightenment Paradoxes*, ed. Natalie Zemon Davis and Arlette Farge (Cambridge, Mass., 1993), 349.

<sup>22</sup> See Mary E. Fissel, *Vernacular Bodies: The Politics of Reproduction in Early Modern England* (Oxford, 2004), 53-89; King, *Midwifery, Obstetrics and the Rise of Gynaecology: Uses of a Sixteenth Century Compendium* (Aldershot, 2007), 17-26; Green, *Making Women’s Medicine Masculine: The Rise of Male Authority in Pre-Modern Gynaecology* (Oxford, 2008), 246-87.

<sup>23</sup> Fissel, *Vernacular Bodies*, 62.

<sup>24</sup> Quoted in: Audrey Eccles, *Obstetrics and Gynaecology on Tudor and Stuart England* (1982), 74.

<sup>25</sup> Rivière, *Praxis Medica*, 2: 198, 172. The description is indebted to Lusitanus, *Praxis Medica Admiranda*, 262. For similar early modern descriptions, see Sabine Arnaud, *On Hysteria: The Invention of a Medical Category between 1670 and 1820* (Chicago, 2015), 15-17; Fissel, *Vernacular Bodies*, 59-60.

from six-hundred to a thousand, adding that the womb, along with the other bodily parts of the woman which are used in generation:

irritate men in a thousand ways, [and] have allowed women—themselves weak and defenceless—to triumph over the strongest of men, overthrow several very powerful kings, [...] drive the healthy to loathsome ailments, strip the rich of their wealth, and strike down the most celebrated heroes. These organs are the cause of most of our ills, as well as our pleasures, and I dare say that almost all of the world’s disorders, past and present, can be traced to them.<sup>26</sup>

Palfyn may have gone slightly overboard in his description of the woes of the womb, but it was generally agreed among early modern physicians that the womb is a source of distress, not only for the women who bear it, but also for the men and children who surround them.

These developments in the field of medicine dovetailed with an increased popular interest in uterine malady and monstrosity. Countless early modern broadsheets, paintings, medical manuals, or plays depict women turning green, suffering from uterine suffocation or hysteria, and giving birth to monsters, animals and otherwise deformed children.<sup>27</sup> These depictions of the monstrous feminine body form part of what has been characterized (albeit with some debate) as an early modern “gender crisis,” marked by an explosion of cultural depictions of cruel, mischievous, or mad women; increasing financial, legal and social difficulties piled on single women; the gendering of such phenomena as demonic possession and witchcraft; and increased prosecution of such predominantly female-coded crimes as infanticide and scolding.<sup>28</sup> Interest in the misdeeds of the womb cannot be separated from these wider cultural phenomena.<sup>29</sup> Early modern gynecological discourse drew on, and informed, other contemporaneous representations of uncontrollable, deviant, or monstrous femininity. *Furor uterinus* in particular, resonates closely with early modern anxieties surrounding feminine agency and independence. The disease is, to use Thomas Laqueur’s oft-quoted expression: “a narrative of culture in anatomical disguise.”<sup>30</sup> Its importation from the Latin medical realm to the Hebrew one, throws the political uses of gynaecology on the one hand, and translation on the other—into sharp critical relief.

### JACOB ZAHALON’S FURIOUS UTERUS

In 1683, the Rome-born rabbi and physician Jacob Zahalon published a comprehensive medical compendium titled *Ozar ha-ḥayim*. Although it was published in only one edition, the book influenced generations of Jewish authors and physicians to come, and has, over the

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<sup>26</sup> Quoted in Marie-Hélène Huet, *Monstrous Imagination* (Cambridge, Mass., 1993), 57.

<sup>27</sup> Fissel, *Vernacular Bodies*, 53-54.

<sup>28</sup> See, most famously, David Underdown, “The Taming of the Scold: The Enforcement of Patriarchal Authority in Early Modern England,” in *Order and Disorder in Early Modern England*, ed. Anthony Fletcher and John Stevenson (New York, 1985), 116-36. For an overview of the debate surrounding Underdown’s paradigm, see Rachel Weil, “Politics and Gender in Crisis in David Underdown’s ‘The Taming of the Scold,’” *History Compass* 11/5 (2013): 381-88.

<sup>29</sup> Fissel, *Vernacular Bodies*, esp. 73-74, 83; G. S. Rousseau, “‘A Strange Pathology’: Hysteria in the Early Modern World, 1500-1800,” in: *Hysteria Beyond Freud*, 93-103.

<sup>30</sup> Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (Cambridge, Mass. 1990), 236.

centuries, become a staple of traditional Jewish medicine.<sup>31</sup> And yet, notwithstanding its traditionalist reputation, *Oẓar ha-ḥayim* was, in large parts, an unacknowledged translation of Rivière's celebrated *Praxis Medica*.<sup>32</sup>

Zahalon reserved a great deal of liberty in treating his source, and he deviated freely from the *Praxis Medica*, most often in the interest of brevity, or due to scientific disagreement. This liberal attitude to the borrowing of previous authors' works was not unique to Zahalon, nor indeed was it an idiosyncrasy of early modern Jewish translation. In many places in the *Praxis Medica*, for instance, Rivière himself simply summarized whole passages from Wittenberg physician Daniel Sennert's (1572-1637) *Practicae Medicinae* without acknowledgement.<sup>33</sup> And yet, Zahalon's *Oẓar ha-ḥayim* was distinct in the extent to which it relied on Rivière, on the one hand, and the extent to which this reliance on a non-Jewish source was actively concealed on the other. Reading through *Oẓar ha-ḥayim* one often encounters the names of Jewish, ancient or medieval authors, and only rarely those of contemporary Christian physicians. Rivière himself is never mentioned in the book. The end-result is a significantly "Judaized" Hebrew translation of Rivière's book—a fact which has contributed to the scholarly characterization of Zahalon as a traditionalist.<sup>34</sup>

Section 11 of *Oẓar ha-ḥayim* is dedicated to "the diseases specific to women" (*ḥolayim pratiim shel nashim*) and is almost identical with the corresponding section in Rivière's *Praxis medica*, "On the diseases of women" (*De morbis mulierum*). Zahalon's translation is succinct; he omits much of Rivière's lengthy discussions of previous approaches and prior debates, resulting in what David Ruderman has characterized as a tone "of self-assurance [and] absolute certainty."<sup>35</sup> The cures and medicines cited by both authors are most often the standard ones suggested by early modern medicine; purging and pessaries, baths and broths, marriage and copulation. Occasionally, Zahalon attributes Rivière's first-hand empirical observations to himself.<sup>36</sup> Thus, for instance, in describing amenorrhea, Rivière notes that the stoppage of terms may be caused when the blood: "is excreted through other ways such as through the nose, vomiting, spit, urine, haemorrhoids, and many other parts."<sup>37</sup> The explanation relies on humoral theory, which, while certainly not the only model of the human body available in early modern Latin medicine, laid the foundation for

<sup>31</sup> On the book's reception, see Barry Levy, *Planets, Potions, and Parchments: Scientifica Habraica from the Dead Sea Scrolls to the Eighteenth Century* (Montreal and Kingston, 1990), 78-79:§108-§109; Harry Friedenwald, "The Use of Hebrew Language in Medical Literature," *Bulletin of the Institute of the History of Medicine* 2 (1934): 99.

<sup>32</sup> Idelson-Shein, "Rabbis of the Revolution," 70-2.

<sup>33</sup> No systematic study of the two works exists, but the similarity between them has caught the attention of previous scholars. See, e.g., Jean-Eugène Dezeimeris, *Dictionnaire historique de la médecine ancienne et moderne*, 4 vols. (Paris, 1836), vol. 3, part 2: 816. Some parts of Sennert's works were also translated by Zahalon. See Idelson-Shein, "Rabbis of the Revolution," 69-72.

<sup>34</sup> See, e.g., Friedenwald, "Jacob Zahalon of Rome," 279; Leibowitz, "R' Jacob Zahalon ish Roma u-fizmono le-Shabbat Chanukka 1687," 167; Sosland, *A Guide for Preachers*, 54-57; Ruderman, *Scientific Discovery*, 233-35.

<sup>35</sup> Ruderman, *Jewish Thought and Scientific Discovery*, 233.

<sup>36</sup> On Zahalon's treatment of Rivière's personal observations in other parts of the book, see Magdaléna Jánošíková, "United in Scholarship, Divided in Practice: (Re-)Translating Smallpox and Measles for Seventeenth-Century Jews," *Isis* 133.2 (2022): 289-309.

<sup>37</sup> Rivière, *Praxis Medica*, 2: 179..

numerous medical works well into the eighteenth century. According to the humoral model, the body was, as Gail Kern Paster aptly explains: “a semipermeable, irrigated container in which humours moved sluggishly.”<sup>38</sup> Health required maintaining the balance between the four humours (blood, yellow bile, black bile, and phlegm), and allowing their free movement throughout the body. Within this humoral framework, it made sense that a leak in one place would stop the flow in another. To illustrate the point, Rivière adds a personal observation: “I saw a young girl who had a sore [*pustula*] on her head, which opened every month, and bled copiously..”<sup>39</sup> This is translated by Zhalon as: “and we have seen a virgin [*ve-ra 'inu betula*] who had a sore [*nega*] on her head and from there blood would eject every month instead of her period.”<sup>40</sup> Such personalization of others’ experience was not unusual in pre-modern medicine. In his *Pirke Moshe be-refu’ah*, Maimonides, for instance, relates a well-known account about a widow who suffered from suffocation of the womb and consulted a midwife. The case, which originally appeared in Galen’s *On the Affected Places*, is presented by Maimonides in a personalized form: “I have seen a woman, who had been a widow for many years.”<sup>41</sup>

Rivière dedicates Chapter 4 in his section on women’s diseases to *furor uterinus*. Upon a first reading the description may seem unremarkable. Like so many of his contemporaries, Rivière characterizes the illness as “a sort of madness [*maniæ*] arising from an intense and unbridled sexual appetite, which dethrones the mind, so that that [the patient] utters obscene and unchaste words, in all places; and having cast off all modesty, furiously seeks out sexual pleasure from men..”<sup>42</sup> Zhalon’s translation is, as always, faithful but terse: “Due to the unrestrained nature of a woman’s sexual lust she desires intercourse excessively until she goes out of her mind and speaks lewdness [*navlut*] without shame as demanding to be come upon [*ke-tova ‘at ha-bi’ah*].”<sup>43</sup>

The emphasis on unruly feminine speech in these descriptions constitutes one of the distinctive features of early modern depictions of *furor uterinus*. In this regard, *furor uterinus* contrasted sharply with hysteria, with which it is so often confused by modern scholars; whereas hysteria was often thought to result in a loss of power of speech—a consequence of the womb’s migration or of the suffocating vapours arising from it—*furor uterinus* was

<sup>38</sup> Gail Kern Paster, *The Body Embarrassed: Drama and the Disciplines of Shame in Early Modern England* (Ithaca, NY, 1993), 8. See also Ulinka Rublack, “Fluxes: the Early Modern Body and the Emotions,” *History Workshop Journal* 53 (2002): 1-16.

<sup>39</sup> Rivière, *Praxis Medica*, 2: 179..

<sup>40</sup> Zhalon, *Ozar ha-hayim*, 88v.

<sup>41</sup> Maimonides’s account is cited in: Ron Barkai, *Mada, magiya u-mitologiya bi-yeme ha-beynayim* (Jerusalem, 1987), 50. On Galen’s version and its various ancient, medieval, and early modern adaptations (including other personalized retellings), see King, “Galen and the Widow: Towards a History of Therapeutic Masturbation in Ancient Gynaecology,” *EuGeStA: Journal on Gender Studies in Antiquity* 1 (2011): 217-235. <https://eugesta-revue.univ-lille.fr/pdf/2011/King.pdf> (accessed 14 July, 2020).

<sup>42</sup> Rivière, *Praxis Medica*, 2:206.. Compare: Daniel Sennert, *Practicae Medicinae*, Book 4: De Mulierum et Infantium Morbis (Wittenberg, 1632), 249-57.

<sup>43</sup> Zhalon, *Ozar ha-hayim*, 89r. On the term “*tova ‘at ha-bi’ah*” see Marcus Jastrow, *A Dictionary of the Targumim, the Talmud Babli and Yerushlami, and the Midrashic Literature*, vol. 2 of 2 (London/New York, 1903), 1645.

characterized by incessant, uncontrollable speech.<sup>44</sup> In his famous *Cyclopaedia* (1728), for instance, English encyclopaedist, Ephraim Chambers (1680-1740) defined *furor uterinus* as: “a kind of madness, attended with lascivious speeches and gestures, and an invincible inclination to venery.”<sup>45</sup> The French physician Jacques Ferrand (b. ~1575), observed that women who suffer from *fureur uterine* tend to: “chatter incessantly [*babillent incessamment*] and speak about, or like to hear about, sexual matters.”<sup>46</sup> The German physician Michael Ettmüller (1644-1683) explained that women who suffer from *furor uterinus*: “are garrulous, loquacious, sometimes vociferant [and] restless.”<sup>47</sup> These striking descriptions, correspond closely with the growing emphasis on silence as a feminine virtue in early modern marriage manuals, conduct books, sermons and other genres.<sup>48</sup>

Of course, the gendering of silence as predominantly female was hardly a new phenomenon in early modern Europe. Nor is the implied analogy in depictions of *furor uterinus*—between feminine speech and sexual deviance, or between women’s voices and their vaginas. Within the Jewish cultural and religious realm, the analogy is perhaps most poignantly expressed in the well-known Talmudic saying: “*kol be-ishah ervah*” (woman’s voice is abomination<sup>49</sup>), which likens the voice of a woman to her exposed genitals.<sup>50</sup> That the same conflation of the vaginal and the oral was to be reproduced in early modern gynaecology seems unsurprising. Indeed, the association is implied already in the very terms used to signify the female reproductive system; such as in the English “mouth of the womb” which signified the cervix in contemporary medical literature, in the Latin *cervix* (lit. neck) and *labia* (lips), in the German *Muttermund* (cervix, lit. mother’s mouth), or in the Hebrew *zvar ha-rehem* (cervix, lit. neck of the womb) or *sefatayim* (labia, lit. lips). Early modern physicians also found new and imaginative ways to further employ the association. Thus, when in 1561 Gabriele Falloppio (1523-1562) discovered the fallopian tubes, he termed them *uteri tuba*, that is, trumpet of the womb.<sup>51</sup> Writing almost a century after Falloppio, English midwife Jane Sharp described the fallopian tubes in the following manner: “These Vessels in their twistings are [. . .] full of wrinkles, and in the midst they have a Hole or Mouth like to a

<sup>44</sup> On loss of speech in hysteria, see King, “Once upon a Text,” 47, 116; Dawson, *Lovesickness and Gender*, 61-62.

<sup>45</sup> Ephraim Chambers, *Cyclopaedia: Or an Universal Dictionary of Arts and Sciences* (1728. Second ed. London, 1738), 2 vols. 2:UTL

<sup>46</sup> Ferrand, *De la maladie d’amour*, 76. English translation: Ferrand, *A Treatise on Lovesickness*, 263. The modern confusion between *furor uterinus* and *hysteria* is also evident in Beecher and Ciavolella’s translation, cf. Ferrand, *A Treatise on Lovesickness*, 263; *De la maladie d’amour*, 75.

<sup>47</sup> Michael Ettmüller, *Opera Medica*, 4 vols. (Geneva, 1736), 3: 469.

<sup>48</sup> For a nuanced discussion of the gendered aspect of silence in early modern literature, see Christina Luckyj, *‘A Moving Rhetoric’: Gender and Silence in Early Modern England* (Manchester, 2002), 42-71.

<sup>49</sup> On the difficulties of translating the term “*ervah*,” see Admiel Kosman and Ruth Golan, “A Woman’s Voice is ‘Ervah’: The Female’s Voice and Silence—Between the Talmudic Sages and Psychoanalysis, in: *Saints and Role Models in Judaism and Christianity*, ed. Marcel Poorthuis and Joshua Schwartz (Leiden, 2004), 360n7.

<sup>50</sup> On the dictum, see Howard Eilberg-Schwartz, “The Nakedness of a Woman’s Voice, the Pleasure in a Man’s Mouth: An Oral History of Ancient Judaism,” in: *Off with her Head! The Denial of Woman’s Identity in Myth, Religion, and Culture* (Berkeley, 1995), 165-184; Kosman and Golan, “A Woman’s Voice,” 357-75. For other examples from the medieval and ancient periods, see Tova Rosen, *Unveiling Eve: Reading Gender in Medieval Hebrew Literature* (Philadelphia, 2003), 13, 140–2..

<sup>51</sup> Gabriele Falloppio, *Observationes Anatomica* (Venice, 1562), 197. For use of the term, see, e.g., Sennert, *Practicae Medicinae*, 4:232.

Trumpets Mouth.”<sup>52</sup> And yet, the association of feminine speech and sexual deviance was nowhere more pronounced than in early modern descriptions of *furor uterinus*, which pathologized feminine speech, consolidating its sexual connotations in ways never before imagined. Indeed, more than anything, it was unruly speech which served as the defining feature of *furor uterinus*, and which distinguished it from other forms of hypersexuality, and particularly from male hypersexuality.<sup>53</sup>

Having established the primary manifestations of the disease, Zahalon continues to count its causes and triggers, beginning with the endogenous cause, which, following Rivière, he attributes to the surplus of female seed. The notion of female seed originates in antiquity, and was particularly developed by Galen, who argued that generation requires the contribution of two distinct (though not equally perfect) seeds, that are emitted during intercourse—the male and the female.<sup>54</sup> In addition to the surplus of seed, Zahalon and Rivière note several predisposing humoral conditions for *furor uterinus*, such as a sanguine complexion, or a melancholy temperament, and then finally some external triggers of the disease. Following his source text closely, Zahalon argues that *furor uterinus* is found particularly in women who: “consume many spices and the scent of civet musk and so on, or [who] read in books of love and affection of people with filthy mouths and [who engage in] long sleeping[,] particularly in soft beds of feather[*shena aruca bi-frat be-mitot racot shel evre yona*].”<sup>55</sup>

The notion that certain scents and tastes, such as civet cat’s secretion and potent spices cause uterine problems, while contested by some physicians, was widespread in early modern medicine.<sup>56</sup> This belief, in which we encounter once again the analogy between the mouth and the vagina, is a relic of the classical perception of the womb as somehow sentient, whether an actual organism or an animal-like organ. Even though the theory of the wandering womb was almost-unanimously rejected by early modern physicians, the assumption that the womb may be roused or repulsed by scents and tastes remained widespread.<sup>57</sup> Accordingly, scent therapy was a standard treatment not only for *furor uterinus*, but also for otherwise ailing wombs.<sup>58</sup> Thus, for instance, in the Yiddish medical manual *Be’er mayim hayim* (wellspring of living water), by the Prague-based physician Yisakhar Baer Teller (d. 1687), the following treatment is offered for a retained placenta:

This woman should be given bad flavours before the nose, such as the galbanum gum, asafoetida, castoreum or chicken feathers, especially the feathers of a wild chicken.

Burn them and hold them to the nose. But from below, one should fumigate her with

<sup>52</sup> Jane Sharp, *The Midwives Book: Or the Whole Art of Midwifery Discovered*, ed. Elaine Hobby (New York, 1999), 50.

<sup>53</sup> See discussion below.

<sup>54</sup> See King, “Once Upon a Text,” 43-64

<sup>55</sup> Zahalon, *Ozar ha-hayim*, 89r; Rivière, *Praxis Medica*, 2: 207.

<sup>56</sup> For a critical discussion of the theory, see, for instance Isbrand van Diemerbroeck, *Anatome Corporis Humani* (1672. Repr. Lyon, 1679), 143-44.

<sup>57</sup> The idea that the womb may wander the body was emphatically rejected by most early modern physicians, including Zahalon, who explains that the womb is tied to its place by “four strong, unbreakable ligaments.” Zahalon, *Ozar ha-hayim*, 89r. This idea also originates in antiquity. See King, “Once Upon a Text,” 36.

<sup>58</sup> On scent therapy and womb movement, see King, “Once Upon a Text,” 3-65; Carmen Caballero Navas, *The Book of Women’s Love and Jewish Medieval Medical Literature on Women* (London, 2004), 65-94.

very tasty things, such as cloves, marjoram, civet musk, ambergris, and with the doughnuts [*kikhlekh*] from the apothecary that are made of nutmeg.<sup>59</sup>

A slightly later Yiddish medical text offers further evidence of the continued reliance amongst Jewish medical practitioners on the sentient perception of the womb. In an early eighteenth-century Yiddish book of medical incantations, prepared by the purportedly-Sabbatean author Zvi Hirsh Ḥotsh of Cracow, the reader encounters a veritable plea to the womb to spare its bearer's life, suggesting the following rhymed incantation to cure the wandering womb: "Place your hand on your belly and say: womb, return to your rightful place [*ber muter leg dikh*]! With these words I compel you. By nine generations [*doros*], by nine Torah scrolls [*seyfer toros*], by the angels that are with God in Heaven, return to your rightful place!"<sup>60</sup> Similar exorcistic incantations are available in a wide range of sources, both Jewish and non-Jewish, from antiquity and into the modern period.<sup>61</sup> Some sources beseech the womb, others curse it, still others attempt to lure or to threaten the womb into compliance. Our Yiddish source offers yet another tactic, attempting to reason with the womb: "If you bring this person to an early grave, you as well shall be there interred, so return to your rightful place, and to the life and health of this person cause no more distress."<sup>62</sup>

Zahalon offers a different treatment for *furor uterinus*: "The cure to this sickness" he argues following Rivière, "requires the cooling down of the warm blood, and its purging and letting through green bile [*mara yeruka*]<sup>63</sup> purifying techniques[.] And if she is permitted to have intercourse that is her cure."<sup>64</sup> The identification of legitimate intercourse as the ultimate cure for *furor uterinus*, while not unusual, is not insignificant. *Furor uterinus* was, in essence,

<sup>59</sup> Yisachar Baer Teller, *Be'er mayim chayim* (Prague, nd), np [43]. English translation: Arthur Teller, *The Wellspring of Living Waters: Issachar Bār Teller: Physician and Surgeon* (New York, 1988), 40. I have modified the translation according to the Yiddish source. For an almost identical treatment, see Zahalon, *Oẓar ha-ḥayim*, 89r; Rivière, *Praxis Medica*, 2:222. See also Sennert, *Practicae medicinae*, 4: 239-240; Tuviah, *Ma'ase Tuvia*, 135r; Meir Aldabi, *Shevile emuna* (~1369. *editio princeps* Riva di Trento, 1559), 62v; Etmüller, *Opera Medica*, 3:488. The treatment evolved from medieval recipes, such as those found in the Trotula. See Green, *Trotula*, esp. 87. On medieval Hebrew translation of this recipe, and the Trotula more generally, see Ron Barkai, *A History of Jewish Gynaecological Texts in the Middle Ages* (Leiden, 1998), esp. 185-186; Carmen Caballero Navas, "Pregnancy and Childbirth in Medieval Hebrew Medical Texts," *Dynamis* 34.2 (2014): 393.

<sup>60</sup> Tsvi Hirsh Ḥotsh of Cracow, *Sefer segulos u-refuos* (Amsterdam, 1703), 10v.

<sup>61</sup> Similar (though not identical) Yiddish incantations appear in a manuscript discovered by Max Grunwald in 1907 and on the margins of a fourteenth century extant Yiddish manuscript. For a transcription of the former, see Max Grunwald, "Kleine Beiträge zur jüdischen Volkskunde. Aus Hausapotheke und Hexenküche," *Mitteilung zur jüdische Volkskunde*, NS 3.H4 (24) (1907): 137; For a facsimile, transcription and discussion of latter, see John A. Howard, "Der Bärmuttersegen wiederentdeckt," *Zeitschrift für deutsches Altertum und deutsche Literatur* 108.H.3 (1979): 252-258. More recently, see Frakes, *Early Yiddish Texts*, 62. On the Jewish reception of the tradition more generally, and its Classical origins, see Giuseppe Veltri, "Zur Überlieferung medizinisch-magischer Traditionen: das *Mētra* Motiv in den PGM und in der Fragmenten der Kairoer Geniza," 1996. Repr. in: *Gegenwart der Tradition: Studien zur jüdischen Literatur und Kulturgeschichte* (Leiden, 2001), 153-171. For a discussion of the earliest known evidence for exorcisms of the womb, see Christopher A. Faraone, "New Light on Ancient Greek Exorcisms of the Wandering Womb," *Zeitschrift für Papyrologie und Epigraphik* 144 (2003): 189-197; Green, *Trotula*, 24-25.

<sup>62</sup> Chotch, *Segulos u-refuos*, 11b.

<sup>63</sup> Zahalon consistently translates the Latin term *biliosa* into "*mara yeruka*"—green bile. See, e.g., Zahalon, *Oẓar ha-ḥayim*, 10v ("*mara yeruka ha-nikra bilī*"). See also *Oẓar ha-ḥayim*'s TOC, where Zahalon refers to: "green bile, black bile, and white bile." This is not unusual, medieval and early modern Jews often used this term to refer to yellow bile or choleric temperament. See Jacob Klatzkin, *Oẓar ha-munaḥim ha-filosofiyim* (Berlin, 1928), 254.

<sup>64</sup> Zahalon, *Oẓar ha-ḥayim*, 89r.

a disease of independent women and unruly feminine speech; it was thought to affect single women, and expressed itself most prominently in excessive, uncontrollable speech. It thus made sense that to cure the disease required placing the ailing woman under the authority of a husband, thus shutting up her chattering mouth/womb. As numerous studies have shown, from the sixteenth century marriage became a central social institution in Europe, and there arose a cultural ideal which aimed to place “all sexually mature women in marriage and in an honor dynamic that disciplined their lives and their sexuality [. . .] through the males of their families.”<sup>65</sup>

And yet, early modern medicine knew of another, albeit somewhat unorthodox treatment for *furor uterinus*. Towards the end of his discussion, Rivière notes almost in passing: “But if a marriage cannot be so easily achieved, or the condition of her life will not bear that estate, some recommend that the genital parts be so handled and rubbed by an experience midwife [*perita obstetrica*], as to cause an evacuation of the excessive sperm. . .”<sup>66</sup> Rivière’s half-hearted suggestion of female same-sex relations as a cure for *furor uterinus* touches upon a heated debate, which has emerged in recent years, surrounding the prevalence of therapeutic masturbation in pre-modern medicine. In 1999 Rachel P. Maines put forth the claim that from Hippocrates to the 1920’s: “in Western medical tradition genital massage to orgasm by a physician or midwife was a standard treatment for hysteria.”<sup>67</sup> While the initial reception of Maines’s book was overwhelmingly positive, over the past few years, her thesis has come under increased scrutiny. In particular, historian of medicine Helen King has shown that, to the extent that it was applied at all, therapeutic masturbation was far from being a staple of ancient medicine, as suggested by Maines.<sup>68</sup> In the medieval and early modern periods, King argues, it began to feature more prominently in medical literature, though most often using a female proxy or midwife, and remaining highly controversial throughout. Indeed, when suggested, therapeutic masturbation was presented as a last resort for the treatment of particularly dire cases.<sup>69</sup>

Traces of the controversy surrounding the legitimacy of therapeutic masturbation are readily discernible in the *Praxis medica*. In fact, Rivière is quick to backtrack on his suggestion, adding that given the controversial nature of the treatment, it may suffice to massage the patients belly, while avoiding the genital area.<sup>70</sup> Zahalon, however, omitted all

<sup>65</sup> Guido Ruggiero, “Marriage, Love, Sex, and Renaissance Civic Morality,” in *Sexuality and Gender in Early Modern Europe: Institutions, Texts, Images*, ed. James Grantham Turner (Cambridge, 1993), 11. See also Merry E. Wiesner-Hanks, *Woman and Gender in Early Modern Europe* (Cambridge, 1993), 39-46.

<sup>66</sup> Rivière, *Praxis Medica*, 2: 210.

<sup>67</sup> Rachel P. Maines, *The Technology of the Orgasm: “Hysteria,” the Vibrator, and Women’s Sexual Satisfaction* (Baltimore, 1999), 1.

<sup>68</sup> King, “Galen and the Widow,” 205-35. Similar doubts have been raised concerning the applicability of Maines’ argument to modern period, see Hallie Lieberman and Eric Schatzberg, “A Failure of Academic Quality Control: The Technology of the Orgasm,” *Journal of Positive Sexuality* 4.2 (2018): 24-47. In her lecture for the Lionel Trilling Seminar, Katharine Park also notes that medieval Muslim practitioners refrained from touching women’s genitals. See Katharine Park, “Rethinking the “One-Sex” Body: Sex, Gender, and Medicine in Medieval and Early Modern Europe,” 2014. Available online: <http://heymancenter.org/events/the-lionel-trilling-seminar-with-katharine-park/> (accessed July 19, 2020).

<sup>69</sup> King, “Galen and the Widow,” 229-232. Maines also notes some reservations about the practice, but only in passing. See Maines, *Technology of the Orgasm*, 27, 29.

<sup>70</sup> Rivière, *Praxis Medica*, 2: 210..

mention of cunning midwives and genital manipulation, suggesting rather that: “a lukewarm bath may be useful” [*ve-tov likanes be-merḥaz mayim poshrin*].<sup>71</sup> Of course, the omission may have simply been a form of bowdlerization; indeed, it could be that Zāhalon, at the time the chief Rabbi of Ferrara, was not eager to recommend such unconventional treatments in his Hebrew book. And yet, elsewhere in the chapter, Zāhalon had no qualms discussing other sexually suggestive treatments, such as the plucking of pubic hair, or the vaginal insertion of cotton dabbed in musk.<sup>72</sup> Rather, it seems to me that Zāhalon disagreed with Rivière’s suggestion, or was perhaps taken aback by Rivière’s own hesitations concerning this highly controversial treatment. In omitting the treatment, Zāhalon remained faithful to his stated claim in the introduction to *Oẓar ha-ḥayim*, in which the book is presented as: “a set table [*shulḥan arukh*]<sup>73</sup>; and it does not expound on differences of opinion at great length, as is the common method in books of medicine. I have only given the most proper, accepted and well-tried methods of cure.”<sup>74</sup>

Whatever his motivations for omitting the Rivière’s treatment for *furor uterinus*, in focusing on heterosexual relations, Zāhalon offered his readers a more coherent account of pathological feminine independence and its adequate cure. Indeed, in a sense, the solution offered by Rivière undermined the cultural significance of early modern discourse surrounding *furor uterinus*. To understand why, let us examine Tuviah’s treatment of the disease, in which the political concerns that underlie this discourse—rise to the very surface of the text.

### TUVIAH HA-COHEN’S CANNIBALISTIC WOMB

Tuviah’s approach to authorship differed significantly from Zāhalon’s; rather than relying on one key source-text, throughout his Hebrew book Tuviah drew on a litany of Latin fragments, which dressed in mildly Jewish garb. Also unlike Zāhalon, he trumpeted his familiarity with contemporary non-Jewish scientific works, although at times, he too disguised his debts to previous sources by personalizing the experiences of others, or by crediting his sources with specific details while translating whole passages and observations. The difference in approaches may have, at least in part, accounted for the different reception of the two works; while Zāhalon’s *Oẓar ha-ḥayim* appeared in only one print edition, *Ma’ase Tuviah*, became an all-time favorite among Hebrew readers, appearing in multiple editions from the eighteenth- to the twentieth centuries.<sup>75</sup>

<sup>71</sup> Zāhalon, *Oẓar ha-ḥayim*, 89r. On baths as a cure of madness in general, and *furor uterinus* in particular, see John Floyer, *Psychrolousia or The History of Cold-Bathing* (London, 1715), esp. 142.

<sup>72</sup> See, e.g., Zāhalon, *Oẓar ha-ḥayim*, 89r.

<sup>73</sup> On Zāhalon’s use of the term, a clear reference to Karo’s *halakhic* compendium, see Idelson-Shein, “Rabbis of the Revolution,” 70.

<sup>74</sup> Cited from Michal Altbauer-Rudnik, “Love For All: The Medical Discussion of Lovesickness in Jacob Zāhalon’s *The Treasure of Life* (Oẓar Ha-Ḥayim),” in Asaph Ben-Tov, Yaakov Deutsch and Tamar Herzig (eds.) *Knowledge and Religion in Early Modern Europe: Studies in Honor of Michael Heyd* (Leiden/Boston, 2013), 96. For original, see Zāhalon, *Oẓar ha-ḥayim*, [2].

<sup>75</sup> See Ruderman, *Jewish Thought*, 232, 254-255.

Tuviah's discussion of *furor uterinus* features in the first book of the final section of *Ma'ase Tuviah*, which is dedicated to gynaecology and titled *Gan na 'ul* (enclosed garden).<sup>76</sup> The first three chapters discuss the female reproductive system in general, the nature of virginity, and the absence of sexual desire in women, before turning to excessive feminine desire in chapter 4. Throughout the chapter, Tuviah draws on the works of Latin authors, such as Sennert, Etmüller, and Isbrand Van Diemerbroeck (1609-1674), moving from one to the other and back again, according to his own scientific preferences and convictions.<sup>77</sup> This eclectic amalgamation of sources is further enriched by references to the Talmud and other Jewish sources, as well as by Tuviah's own input and observations. The result is a remarkably rich and surprisingly idiosyncratic description of uterine madness.

The chapter begins with the observation that: "Diseases known in the Greek tongue as *salacis* or *satyriasis* are found in women as they are in men." These opening lines refer the reader to Tuviah's discussion of *satyriasis* and *salacity* in Book 3 of the same section, titled *Ma'ayan hatum* (sealed fountain), and dedicated to diseases of the *male* reproductive system. The discussion in this chapter is based primarily on Sennert's explication of male hypersexuality in Book 3 of the *Practicae Medicinae*.<sup>78</sup> Tuviah follows Sennert closely in describing *salacity* as "an excessive sexual desire," and *satyriasis* as constant penile erection: "that is when the penis [*ha-shamash*] threshes and sows [*dash ve-zoreh*, a reference to Genesis Rabbah 85:5], and after insemination does not die but continues to stand erect."<sup>79</sup>

Curiously, however, in direct contrast to Tuviah, Sennert opened his discussion of *furor uterinus* in Book 4 of the *Practicae Medicinae*—on *women's* diseases—by emphasizing the *essential difference* between *furor uterinus* and *salacity*. Indeed, he argued, while both illnesses are characterized by excessive desire, the feminine disease is distinct in the delirium with which it is accompanied, and which has no equivalent in either *salacity* or *satyriasis*.<sup>80</sup> As we have seen, it was precisely this madness which stood at the focus of early modern descriptions of *furor uterinus*, and which distinguished it from other forms of excessive desire. Tuviah does not overlook this aspect of the disease; as we shall presently see, he seems just as troubled by unruly feminine speech as Zahalon, Sennert, and their contemporaries, if not more so. However, he sees here, in the discussion of female and male hypersexuality, an opportunity to voice his convictions regarding the similarity between women's and men's bodies and diseases.

This emphasis on female-male homology is characteristic of Tuviah's medical outlook.<sup>81</sup> Thus, already in his introduction to the female reproductive system, he notes that:

<sup>76</sup> On the chapter's title, see Etienne Lopicard, "A Garden Enclosed: Representations of Female Physiology in *Ma'ase Tuviah*," *Korot* 20 (2009-2010): 19.

<sup>77</sup> On Tuviah's indebtedness to previous Jewish sources as well as to Diemerbroeck and other Latin physicians, see Lopicard, "A Garden Enclosed," 20-21, 23. On his use of Etmüller, Sennert and other Latin physicians in other parts of the book, see Ruderman, *Jewish Science*, 248.

<sup>78</sup> Sennert, "Practicae Medicinae" Book 3, in: *Opera Omnia*, 3 vols. (Lyons, 1650), 2:1139.

<sup>79</sup> Tuviah, *Ma'ase Tuviah*, 144r-v.

<sup>80</sup> Sennert, *Practicae Medicinae*, 4: 249.

<sup>81</sup> In noting this tendency in Tuviah's work, I do not wish to enter into the heated debates surrounding Thomas Laqueur's one-sex model. While Tuviah clearly views women as being similar to men, whether or not he views them as identical to men, or merely an inverted version of men—is a question that is beyond the scope of this

Aristotle the heretic brought some false evidence to support the notion that the menstrual charge replaces the sperm and that women have no other sperm besides it. However, the physicians of our time, who are religious [*mi-ba'ale ha-datiut*] and who admit the truth of our holy Torah, have hit him on the head [*hiku 'al kodkodo*] and have brought evidence to prove his fallacy.<sup>82</sup>

This line of argumentation, which attributes theological significance to the notion of female seed is striking. In fact, as noted above, the notion of female seed is by no means an early modern invention, nor is it particularly monotheistic; it appeared already in the works of Galen, a fact of which Tuviah must have been aware. Accordingly, the question does not seem to have played a major role in the thought of previous Hebrew authors.<sup>83</sup> And yet, Tuviah's motivations for stressing the similarities between the male and female bodies may have been somewhat less lofty than his deeply devout presentation seems to suggest. As Katharine Park has noted, the female-male homology held a certain practical appeal for medieval and early modern medical practitioners. By stressing the similarities between women's and men's bodies and diseases, physicians such as Tuviah were able to expand their areas of authority, and to claim competence in the burgeoning field of gynaecology.<sup>84</sup> Tuviah's rejection of Aristotle may have also been motivated by his endorsement of Paracelsianism. As David Ruderman has shown, Tuviah was enthusiastic about the chemical philosophy associated with Paracelsus, and may have shared Paracelsianism's contempt of Aristotle.<sup>85</sup>

Tuviah further reinforces the male-female homology in his description of female salacity by likening the clitoris to the penis. He argues that: "just as constant erection may occur in men so too in women it happens that the clitoris [*klitoridis*]... becomes erect and this was the deed of Egypt [*ma'ase Mizrayim*] of the women who were *mesolelot* [*ba-nashim ha-mesolelot*] mentioned in (the gemara. . .)."<sup>86</sup> Tuviah refers here to an enigmatic discussion in the Babylonian Talmud (BT Yevamot 76a), which reads: "R. Huna said: Women who *mesolelot* with one another are disqualified from [marrying into] the priesthood. Even according to R. Eleazar, who said that an unmarried man who cohabited with no matrimonial intention with an unmarried woman renders her a *zonah* [harlot], this applies to [a sexual act

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article. For the one-sex model and its critique, see particularly: Laqueur, *Making Sex*, esp. 64-113; Michael Stolberg, "A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries," *Isis* 94.2 (2003): 274-99; King, *The One-Sex Body on Trial: The Classical and Early Modern Evidence* (Farnham, 2013).

<sup>82</sup> Tuviah, *Ma'ase Tuviah*, 143r.

<sup>83</sup> For examples of this indifference, see, e.g., Ibn Yahya, *Shalshet ha-kabalah*, 76r; Bahya ben Asher, Commentary on Leviticus 12.

<sup>84</sup> Park, "Rethinking the "One-Sex" Body." On Tuviah's efforts to position himself firmly within the early modern "medical marketplace," especially vis-à-vis other healers, see Nimrod Zinger, "'Unto Their Assembly, Mine Honor, Be Not Thou United': Tuviya Cohen and the Medical Marketplace in the Early Modern Period," *Korot* 20 (2009-2010): 67-95.

<sup>85</sup> Ruderman, *Jewish Thought*, 244-249. For more on Tuviah's disagreement with Aristotle, see Lepicard, "A Garden Enclosed," 22-23.

<sup>86</sup> Tuviah, *Ma'ase Tuviah*, 144r.

by the] male, but [a sexual act by] the woman is mere wantonness.”<sup>87</sup> Famously, the Talmud does not explain the meaning of the term “*mesolelot*,” leaving the precise nature of these women’s acts to the discretion of later commentators.<sup>88</sup>

Tuviah’s preoccupation with the clitoris in his description of the *mesolelot* builds on early modern medicine, which was deeply intrigued by the possibility of a female phallus. In his popular 1573 *Des Monstres et prodiges* (On Monsters and Prodigies) French physician, Ambroise Paré, for instance, dedicated an extensive discussion to an “extremely monstrous thing that occurs in the labia of some women” which, when stimulated erects “like a male penis so that it can be used to play with other women.”<sup>89</sup> Later, in the early seventeenth century, attention shifted from the labia to the recently rediscovered clitoris, which was often envisioned—as in Tuviah’s description—as a kind of feminine penis. *Converso* physician Rodrigo de Castro (c.1546–1627), for example, explained that:

this protuberance [the clitoris] sometimes exceeds its natural measure, and increases to such a size that it projects outside the womb, occasioning deformity and shame. When it is continually rubbed by clothing, it is stimulated to such a degree that these women, to whom this member gives erections like men, cannot contain themselves, and fling themselves uncontrollably into lovemaking.<sup>90</sup>

Diemberbroeck reported his own experience (which would later be repeated by both Tuviah and De Silva) treating a woman who: “in her youth, whenever she felt the pangs of lust, [she would] often rub [her clitoris] with her finger” until she emitted seed. According to Diemberbroeck, as time went on, the bad habit turned into a disease, so that if her clitoris was so much as touched by a pillow or by her clothes, she would immediately emit seed.<sup>91</sup> He furthermore noted that: “In some women, it has been observed that the [clitoris] increased to the size and form of a male penis, so that women of this kind have at times made an ill use of it, by copulating with others of their own Sex [. . .]. In ancient times, [these women] were called Tribades.”<sup>92</sup> As Park has argued, the growing concern surrounding female clitoral penetration in early modern Europe reflected not only sexual, moral and theological concerns, but also social anxieties: “what appears initially as a story about [. . .] anatomical

<sup>87</sup> Cited from Admiel Kosman and Anat Sharbat, “‘Two Women Who Were Sporting with Each Other’: A Reexamination of the Halakhic Approaches to Lesbianism as a Touchstone for Homosexuality in General,” *HUCA* 75, (2006): 58.

<sup>88</sup> For a survey of the debates, see Kosman and Sharbat, “‘Two Women,’” 37-73; Angela J. Riccetti, “A Break in the Path: Lesbian Relationships and Jewish Law,” in *Marriage, Sex, and Family in Judaism*, ed. Michael J. Broyde and Michael Ausuber (Lanham, MD, 2005), 262-294.

<sup>89</sup> Quoted in: Park, “Rediscovery of the Clitoris,” 171.

<sup>90</sup> Roderici a Castro Lusitani, *De universa mulierum Medicina* (1603. Repr. Hamburg, 1604), 6. English translation: Rodrigo de Castro, “On the Universal Medical Art of Women,” trans. Faith Wallis, in: *Same-Sex Desire in the English Renaissance: A Sourcebook of Texts, 1470-1650* (New York/London, 2004), 135. See also Sennert’s discussion: Sennert, *Practicae Medicinae*, 4: 7-10.

<sup>91</sup> Diemberbroeck, *Anatome Corporis Humani*, 135. See also Tuviah, *Ma’ase Tuviah*, 133v; De Silva, “Pri hadas,” 378v.

<sup>92</sup> Diemberbroeck, *Anatome Corporis Humani*, 151.

monstrosity, located in the transgressive female body, reveals itself as a story about political monstrosity, located in the household.”<sup>93</sup>

In ascribing the enlarged clitoris to the Egyptian women, Tuviah performs a remarkably complex manoeuvre, which brings together two disparate traditions—the one medical, and the other *halakhic*. In medical thought, the notion that Egyptian women are plagued with abnormally large genitals originates in antiquity. In the early modern period this rumour became a focus of intense fascination in the Latin West.<sup>94</sup> Thus, Diemerbroeck mentions that the Nymphs (by which he means the labia minora): “rarely grow extravagant in our regions; but among the Egyptians [. . .] they grow frequently out to such a length, that because of the shame and impediments which they cause, there is need to excise them.”<sup>95</sup> De Castro similarly notes that: “the Egyptians used to excise [the clitoris] in virgins, and some think that this should be carried out indiscriminately on those skin-like fleshy growths which are found before the opening of the womb [i.e., the labia minora].”<sup>96</sup> While De Castro objected to the removal of the “nymphs,” noting that: “these have their functions, which nature has bestowed upon them,” the practice received support from another, somewhat surprising Jewish author. In his well-known *Shalshet ha-kabbalah* (1587), Italian biblical chronologist Gedaliah Ibn Yahya (1515-1587) notes that: “the anatomists [*hakhme ha-notomya* (sic.)] have said that a woman has wing-like [parts] close to her genitals which [. . .], when she is sexually aroused, erect like the male member [*kemo ha-gid la-adam*]. And often we find women who were deeply dismayed by their passions so much that the physicians incise these wings and they are put at ease [*hatkhu ha-knafayim ha-hem ve-shaktu*.]”<sup>97</sup>

In *Ma'ase Tuviah* this wide-ranging discussion of gender and sexuality is brought to bear on the particular *halakhic* conundrum surrounding the interpretation and significance of the Talmudic *mesolelot*. The Talmud itself seems to view the *mesolelot* as women engaged in tribadism, and endorses a relatively tolerant view of their behaviour, presenting it as a minor offense, which does not render them unfit for marriage to a priest. Michael Satlow and Daniel Boyarin have argued that this relatively lenient attitude toward female same-sex relations in rabbinic thought was due to the fact that it was the confusion of gender norms entailed in male same-sex relations that was deemed problematic, not same-sex desire more generally.<sup>98</sup>

Tuviah’s approach, however, is quite different. In locating the *mesolelot* in Egypt he draws not only on the prejudices of his medical peers, but also combines the Talmudic discussion with a different, much less-tolerant Jewish tradition on lesbianism. This tradition also originates in antiquity, but it was developed primarily by later thinkers, such as the great

<sup>93</sup> Park, “The Rediscovery of the Clitoris: French Medicine and the Tribade, 1570-1620,” in *The Body in Parts*, 171-193, here 173.

<sup>94</sup> See Camille Nurka, *Female Genital Cosmetic Surgery: Deviance, Desire and the Pursuit of Perfection* (Cham, 2019), 57-67.

<sup>95</sup> Diemerbroeck, *Anatome Corporis Humani*, 150.

<sup>96</sup> De Castro, “Universal Medical Art,” 136; *De universa mulierum Medicina*, 6.

<sup>97</sup> Gedaliah Ibn Yahya, *Shalshet ha-kabbalah* (Venice, 1587), 67v.

<sup>98</sup> Michael L. Satlow, “They Abused Him like a Woman”: Homoeroticism, Gender Blurring, and the Rabbis in Late Antiquity,” *Journal of the History of Sexuality* 5.1 (1994): 1-25; *Tasting the Dish: Rabbinic Rhetorics of Sexuality* (Atlanta, GA: Scholars Press, 1995), 188-192; Daniel Boyarin, “Are There Any Jews in ‘The History of Sexuality’?” *Journal of the History of Sexuality* 5.3 (1995): 333-55.

medieval Jewish philosopher Maimonides, who wrote that: “The abominable practice of [. . .] women who lie one with the other is a disgraceful practice [*to ‘ava*]. . . . These are women who the sages have called *mesolelot*. . . . Although there is no punishment for this act, the Sages consider it among the abominations of Egypt. . . .”<sup>99</sup> In counting the *mesolelot* among the “abominations of Egypt” Maimonides rendered their act a violation of the biblical prohibition expressed in Leviticus 18:3: “You must not do as they do in Egypt, where you used to live. . . . Do not follow their practices.” Still, Maimonides did not go as far as to claim that the *mesolelot* are prohibited to their husbands or to priests, recommending only that they be flogged for their licentiousness. As Angela J. Riccetti explains: “Even with the possibility of biblical prohibition [. . .] *mesolelot* cannot be classified as a sexual transgression since it remains unrecognizable as sex.”<sup>100</sup> Maimonides’s position was reiterated by later commentators. In the *Shulhan arukh* (1565) for instance, we read that: “women who *mesolelot* (meaning play and rub) with one another—it is forbidden, and this is one of the deeds of Egypt against which we have been warned. . . .”<sup>101</sup> Of particular interest is Jacob Ben Asher’s (c. 1269-c. 1340) treatment of the issue in his *Arba ‘ah turim* (Tur). The Tur repeats the association of the *mesolelot* with Egypt, but interprets the *mesolelot*, not as women who rub against each other, but rather as women who “conjugate (*mithabrot*) with one another in the manner of illicit intercourse (*tashmish asur*).”<sup>102</sup> While the Tur does not further expand on this point, and, similar to previous commentators, does not present the act as prohibiting the women from marriage, it seems to suggest a more stringent view of female homoeroticism, as potentially involving penetration.

Picking up, perhaps, on this initial suggestion made by the Tur, Tuviah offers a sophisticated solution to the enigma of the Talmudic *mesolelot*. Framing his discussion of lesbianism within the context of early modern fascination with the female phallus, he presents the *mesolelot* as medically anomalous women, engaged *not* in tribadism, but in actual penetration. He thus harnesses the anxieties of early modern *non-Jewish* medical thought surrounding the clitoris and its usage, to Jewish *halakhic* discourse, to present lesbianism as a pathological condition, and a much more dire offense than it had ever before been perceived within Jewish literature.

And indeed, it was the very same confusion of gender norms which had troubled the rabbis in their discussion of the penetrated male, which stood at the focus of Tuviah’s discussion of the penetrating female. In fact, Tuviah’s diseased woman is horrifying not only in her ability to penetrate other women—her real monstrosity lies in the fact that she is impenetrable to men. Here, we reach the apex of Tuviah’s description of the mad womb, and his most imaginative contribution to the debate. “But know this”—he writes—“sometimes [a woman’s] desire rises and she opens the mouth of her womb and swallows the member

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<sup>99</sup> Maimonides, Commentary on the Mishnah, Sanhedrin, 7:4. English Translation: Kosman and Sharbat, “Two Women,” 62.

<sup>100</sup> Riccetti, “Lesbian Relationships,” 277.

<sup>101</sup> Joseph Caro, *Shulhan arukh*, even ha-ezer, 20:2.

<sup>102</sup> Jacob ben Asher, *Arba ‘ah turim*, even ha-ezer, 20:2. Riccetti translated *mithabrot* as “associate,” but in medieval Hebrew the term was most often denoted sexual penetration. See Riccetti, “Lesbian Relationships,” 280-81.

embracing it in an almost inseparable manner[.]” This unusual, almost unique description of the devouring womb seems to be loosely based on Diemberbroeck’s anatomy of the womb. The Dutch physician observes that: “It may happen, [. . .] that a longer penis, when thrust during the menstrual flow, at which time the cervical orifice is open,[. . .] will be detained for a while there in, as in the coming together of dogs. . . .”<sup>103</sup> To exemplify, Diemberbroeck recalls a case which took place in Leiden, in which: “a young [man] while playing with his fiancée, had entangled himself within her to such a degree, that he could not extract his penis, until a physician untied the two by casting cold upon them.”<sup>104</sup> The case seems to have been the inspiration for the following anecdote provided by Tuviah:

And there was once a student from the school of medicine in Padua who came upon a whore and she opened her womb and embraced the adulterous member until he was tied to her like a hound [*nikshar ba ka-kelev*]. And word was sent to the scholars and they decided to fill a syringe with cold water which was cunningly injected into her womb and no sooner was this done and they were separated (and damned be the saviour).<sup>105</sup>

The similarities between the two descriptions are self-evident; both authors relate incidents which supposedly occurred during their university training; Diemberbroeck reports the incident to have taken place in Leiden, where he had been a student, whereas Tuviah changes the location to Padua, where he had studied. In both cases, the authors allude to canine reproduction, and to the phenomenon known as the copulatory tie or lock, which occurs in dogs and other canids. And yet, some important differences also present themselves between the two descriptions. Most significantly, Diemberbroeck’s account has nothing to do with *furor uterinus*, and suggests rather that the source of the problem is the man, whose excessive sexual desire for his wife causes him to thrust too violently during penetration. Tuviah, however, is far more interested in *feminine* sexual deviance, and so the married couple of Diemberbroeck’s Leiden, become a Paduan student and a whore, and rather than pouring water on the over-excited male member, water must be injected into the devouring female womb. To this, Tuviah adds another, parenthetical anecdote, which clarifies that the disease is liable to afflict *all* women, and does not distinguish between classes, peoples, or religions: “And in the past I treated a woman of some standing here, and may God protect any daughter of Israel from this disease.”<sup>106</sup> Tuviah thus takes an anecdotal reference to a rare condition found in Diemberbroeck’s anatomy, and develops it into a lengthy discussion, ripe with symbolism and marred by a deep and all-encompassing misogyny.

Tuviah’s discussion of the devouring womb offers a poignant expression of the close connection between anxieties surrounding the womb and those surrounding feminine independence and agency. Scholars have noted the widespread cultural association between

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<sup>103</sup> Diemberbroeck, *Anatome Corporis Humani*, 147.

<sup>104</sup> *Ibid.*.

<sup>105</sup> Tuviah, *Ma’ase Tuviah*, 134r.

<sup>106</sup> Compare, e.g., Tuviah, *Ma’ase Tuviah*, 134r; Johann Schenck von Grafenberg, *Observationes Medicae de capite humano* (Basel, 1543), 275.

the subordination of women and their penetrability.<sup>107</sup> According to this interpretation, while the phallus confers social power, penetrability implies vulnerability, powerlessness, subjugation. It attests to women's lack of control, not only upon others, but even over their own bodies. Read in this context of the vulnerable vagina, the phallic clitoris and the devouring womb become potent political metaphors, which grant women power over their own bodies, as well as over the bodies of men. Tuviah's cannibalistic womb thus offers a monstrous reversal of the patriarchal order, in which power is transferred from the man to the woman, from the penetrating phallus to the castrating womb.<sup>108</sup>

As if to accentuate the fears of feminine independence underlying his medical discourse, Tuviah, like Z̄ahalon before him, makes a point of clarifying that the ailment is especially widespread amongst single, unmarried women, deserted wives, and widows, and he warns Jewish fathers lest they allow their daughters to reach sexual maturity unwed. It is here that Tuviah, drawing on the works of Etmüller, finally uses the term "*furor uterinus*," to explain that: "sometimes she [the salacious woman] will lose her mind and this is called in Latin *furor uterino* [!], that is madness of the womb [*shotut he-rehem*]. And this disease is found in virgins who have reached adulthood [. . .] and [in] widows and anchored women [*agunot*]. . . ."<sup>109</sup> He then distinguishes between the reaction of modest and immodest women to the disease: "And know that there are women who are modest [*she-masve ha-busha al pneyhem*] and who refrain from conjugation, but become blind or fall into the green sickness, and so any God-fearing man should make every effort to give away his daughters once they reach adulthood, and, needless to say, no man of Israel should abandon [*ye'agen*] his wife, God forbid."<sup>110</sup>

Like Z̄ahalon before him, then, for Tuviah, it was feminine independence, the absence of a stabilizing male presence, which was the source of feminine monstrosity. Tuviah's fear of the autonomous woman is further articulated in his description of the affliction's symptoms. "The signs of the sickness"—he writes, returning once again to Etmüller—"are that such a woman will be loud and talkative and will be a gadabout [*yaz'anit*] in the market and in the streets shall sound her voice."<sup>111</sup> Here again we encounter the close connection between the sick womb and the unruly tongue. For Tuviah, as for Z̄ahalon before him, even the most miniscule expression of feminine agency – the very voice of a woman – became a symptom of sickness, a marker of monstrosity. Indeed, it seems not so much the consumption of the lower "mouth" that troubled Tuviah and his contemporaries, but rather the production of the upper mouth—not the womb, but the word.<sup>112</sup>

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<sup>107</sup> Catherine Waldby, "Destruction: Boundary Erotics and Refigurations of the Heterosexual Male Body," in *Sexy Bodies: The Strange Carnalities of Feminism*, ed. Elizabeth Grosz and Elspeth Probyn (London, 1995), 266-77.

<sup>108</sup> See discussion in Idelson-Shein, "Monstrous *Mame*," 54.

<sup>109</sup> Cf. Tuviah, *Ma'ase Tuviah*, 134r; Etmüller, *Opera Medica*, 3: 469.

<sup>110</sup> Tuviah, *Ma'ase Tuviah*, 134r. Cf. Sennert, *Practica Medicina*, 4:250.

<sup>111</sup> Tuviah, *Ma'ase Tuviah*, 134r. Cf. Etmüller, *Opera Medica*, 3: 469.

<sup>112</sup> It is noteworthy that elsewhere in his book Tuviah also exhibits a deep disdain for midwives and women-healers, referring to them as "witches" and exhibiting the more practical aspects of his misogyny. On such women healers and Tuviah and other authors' disdain for them, see Zinger, "Unto Their Assembly," 72-77.

### DAVID DE SILVA'S NICE JEWISH GIRLS

In his unpublished medical manuscript “Pri hadas,” Jerusalem-based physician David De Silva offers yet another approach to Hebrew medical writing. Unlike Tuviah and Zāhalon, who relied primarily on Latin medical texts, translating them into Hebrew and peppering them with references to traditional Hebrew sources, De Silva drew primarily (perhaps exclusively) on previous Hebrew sources. As Zohar Amar has observed, throughout his manuscript De Silva incorporated whole passages from Tuviah’s *Ma’ase Tuviah*, Zāhalon’s *Ozar ha-ḥayim*, and from the medieval Hebrew author Meir Aldabi’s *Sheviley emunah* (Paths of Faith, 1360). And yet, he combined his sources, adding and omitting details, and manipulating them to comply with his own opinions and experiences.<sup>113</sup> In so doing, De Silva applied to his Hebrew sources the very same treatment which they had previously applied to their Latin ones.

De Silva presented each of his chapters in the form of a dialogue between a student (named Jonathan) and teacher (David). This choice of structure has an intriguing effect on the text, allowing De Silva to present the content of his (often unacknowledged) sources as mere hypotheses, to be tested and tried within the target text. A case in point is De Silva’s description of *furor uterinus* in Book 1 of the third section of his manuscript, which offers an educative example of what I would term “polemical plagiarism.”<sup>114</sup> The description merges Tuviah’s chapter on decreased desire in women, with the following chapter on female hypersexuality and *furor uterinus*, punctuated with specific lines from Zāhalon’s corresponding chapter in *Ozar ha-ḥayim*. The discussion of the cure, on the other hand, relies wholly on Zāhalon with only minor omissions—an unsurprising choice given Tuviah’s haphazard discussion of the treatment in *Ma’ase Tuviah*.<sup>115</sup>

De Silva opens with the following question: “Could it be that women’s sexual desire is identical to men’s, or does their desire differ from that of men [. . .]?” The reply is an almost word-for-word copy of *Ma’ase Tuviah*, with only minor deviations. And yet, through these small, almost undetectable deviations, De Silva alters the meaning of the text, offering his own take on female sexuality in general, and *Jewish* sexuality in particular. As noted above, Tuviah was eager to argue for the similarity between male and female physiology. This eagerness is evident in his treatment of female desire in *Ma’ase Tuviah*: “there exists—Tuviah writes—**absolutely no difference** [*lo yesh hefresh clal*] between the pleasure of a woman and that of a man (for so it is written and thy desire shall be to thy husband)” [*my emphasis*].<sup>116</sup> This discussion is copied almost verbatim by De Sylva, but with one slight modification that alters the meaning entirely. Thus, we read: “There is a **great difference**

<sup>113</sup> Amar, *De Silva*, 98. See also pp. 89, 97-98.

<sup>114</sup> The book, which is devoted to gynaecology and obstetrics, is titled “Ma’ayan hatum.” Strangely, this is also the title of Book 3 on the final section of *Ma’ase Tuviah*, which, as noted above, is dedicated to the male reproductive system.

<sup>115</sup> Cf. De Silva, “Pri hadas,” 378v-379r; Tuviah, *Ma’ase Tuviah*, 133r-134r; Zāhalon, *Ozar ha-ḥayim*, 89r.

<sup>116</sup> Tuviah, *Ma’ase Tuviah*, 134r.

[*yesh hefresh gadol*] between the passion of a woman and that of a man, as it is written: and thy desire shall be to thy husband” [*my emphasis*].<sup>117</sup>

The idea that women’s passions are stronger than men’s was a hallmark of pre-modern misogyny, which perpetuated an association between femininity, lust, flesh, and insatiability, and between masculinity and rationality, spirituality, and self-discipline. As Ruth Mazo Karras explains, during the medieval period “stories about women’s lust became not a means of recognizing women as sexual beings, but an excuse for denying women independence in other areas of life.”<sup>118</sup> This connection between feminine insatiability and subjugation is implied also in the biblical passage to which De Silva, following Tuviah refers: “and thy desire shall be to thy husband, and he shall rule over thee” (Genesis 3:16). While Tuviah references the passage parenthetically, De Silva makes it an integral part of the text body. His treatment of the passage, and of feminine desire more generally, create a smoother transition into the discussion of feminine hypersexuality than features in Tuviah’s text. In stressing the innate voraciousness of—as we shall presently see, *almost*—all women, and connecting it to the biblical justification for patriarchy, De Silva reinforces his predecessors’ intense preoccupation with the pathological nature of feminine independence. This paves the way to an almost word-for-word repetition of Tuviah’s description of the voracious womb/mouth, once again, with a few passing, but profound deviations.

These deviations are all of one nature, and reflect De Silva’s attempt to exclude *Jewish women* from the discussion of feminine sexual deviance. Thus, De Silva repeats Tuviah’s discussion of the case of the Paduan student, but omits his source’s reference to a Jewish case. Also omitted are Tuviah’s pointed admonitions to Jewish women to beware of the disease, and to Jewish husbands lest they anchor their wives. In fact, De Silva makes a point of vehemently refuting the very possibility that *furor uterinus* may occur in Jewish women. Combining fragments from Z̄ahalon and Tuviah, and turning them on their head, he notes that: “since the kosher daughters of Israel [. . .] are timid they **do not demand conjugation with their mouths** [*eyn tove ‘in ha-mishgal ba-peh*].”<sup>119</sup> Here, De Silva makes a polemical reference to Z̄ahalon, who writes that women who suffer from *furor uterinus* end up: “demanding conjugation with their mouths and hearts [*ba-peh im ha-lev*].” In his description, Z̄ahalon, like Tuviah, also refers to Genesis 3:16, or rather, to the interpretation of the passage in the Babylonian Talmud: “and he shall rule over thee—teaches that a women demands with her heart [*tova ‘at ba-lev*], while a man demands with his mouth [*ba-peh*], and this is virtue in women” [BT Eruvin 100b]. For Z̄ahalon, women who suffer from *furor uterinus* abandon all feminine virtue, and take on the masculine role of verbally demanding sex. In De Silva’s reformulation, on the other hand, the Talmudic discussion is re-invoked as a means to acquit Jewish women—and *only Jewish women*—of the charge, *not* of desire, but of speech.

De Silva then goes on to explain that: “and if we have seen some daughter of Israel behaving lasciviously, she is the exception to the rule [*yazta min ha-clal*], and not as the

<sup>117</sup> De Silva, “Pri hadas,” 378v

<sup>118</sup> Ruth Mazo Karras, *Sexuality in Medieval Europe: Doing Unto Others* (New York/London, 2005), 87.

<sup>119</sup> Compare Z̄ahalon, *Ozar ha-ḥayim*, 89r: “and finally she demands conjugation with her mouth.”

gentiles claim as I have read in the books of scholarship.”<sup>120</sup> Eager to drive his point home, later in the chapter De Silva repeats once again his distinction between the *Jewish* experience of hypersexuality and the non-Jewish one:

And I have noted that the daughters of Israel [are] veiled with shame and refrain from conjugation and sometimes they become blind and fall into the green sickness [*holy shidafon ve-yirkon*] and so any God-fearing man of Israel should be sure to give his daughters away before they reach maturity, as the Sages have said if your daughter has come of age liberate your slave and marry her to him [BT Pesahim 113a].

Fascinatingly, here De Silva presents chlorosis, another distinctly early-modern feminine disease, as a specifically *Jewish* sickness, and *furor uterinus* as an essentially gentile one. Marriage is once again recommended, but not as a cure for unruly women, but rather, as a means to save inherently passive, nice Jewish girls, from death by their own timidity.

#### EPILOGUE: GLIKL’S VINDICATION OF THE WOMB

Our comparative reading of early modern discussions of *furor uterinus* in Hebrew and Latin has revealed a wide-ranging dialogue, which encompassed both Christians and Jews, from Central and Northern Europe, through Italy, to the Middle East. Situated in vastly different geographical, political and cultural contexts, these different authors offered a range of perspectives on the disease and its implications. While Hebrew authors shared their Latin contemporaries’ understanding of *furor uterinus* as a disease of feminine agency and expression, they also viewed the discussion as an opportunity to tackle issues which bore particular *Jewish* import. Hebrew discussions of *furor uterinus* served as a platform for addressing halakhic enigmas, interpretative conundrums, and questions concerning the cultural, social, religious, and—at least for De Silva—*medical* distinctiveness of Jews. And yet, for all their diversity, what these disparate discussions shared, was that (with few exceptions) these were discussions which took place exclusively among men, and which pathologized the very possibility of women’s participation.

In recent years, feminist critics have drawn our attention to the fact that often, as Kathleen McLuskie has argued: “feminist criticism [. . .] is restricted to exposing its own exclusion from the text.”<sup>121</sup> Rather than perpetuate the silencing of women, which the works surveyed above sought to promote, I would like to briefly revisit a short account which appears in the memoirs of the German-Jewish merchantwoman Glikl bas Leib. This account may, perhaps, be read as a Jewish-feminine response to contemporaneous discourse surrounding feminine agency as symbolized by the monstrous, insatiable womb. Written not in Hebrew but in Yiddish, the episode reveals how, on the one hand, Glikl accepted the misogynistic images of the womb that were being put forth by her male contemporaries, but

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<sup>120</sup> De Silva, “Pri hadas,” 378v.

<sup>121</sup> Kathleen McLuskie, “The Patriarchal Bard: Feminist Criticism and Shakespeare: *King Lear* and *Measure for Measure*,” in *Political Shakespeare: Essays in Cultural Materialism* ed. Jonathan Dollimore and Alan Sinfield (Manchester, 1985), 97.

on the other, rejected the notion that *any form* of female independence is by definition monstrous, offering a (partial) vindication of feminine agency.

In her memoirs, written around the turn of the seventeenth- and eighteenth centuries, Glikl relates how she was nine months pregnant with her son Joseph, when she saw some medlars (*visplen*) for sale, which she craved but did not buy. That night, she reports, her son, Joseph was born extremely weak and covered in brown marks.<sup>122</sup> Glikl's episode offers a mild but classic example of the effects of "the monstrous imagination," that is, the notion the thoughts, visions, and feelings of a woman leave their mark on her foetus, and that any unrealized desires a woman experiences during her pregnancy could have disastrous effects on the child forming in her womb. Stories about women who had denied their cravings and produced monsters were an extremely ubiquitous trope in seventeenth and eighteenth century conduct books, broadsheets, medical works and other genres. The most famous case was that of the English Mary Tofts, who in 1726 claimed to have given birth to sixteen rabbits or rabbit parts, the outcome of her unrealized desire for rabbit's meat during her pregnancy.<sup>123</sup> While it is true that tales of monstrous births had existed since antiquity, earlier depictions attributed such births to any number of causes, including improper positions during coitus, things witnessed by both or one of partners during conjugation, sinfulness of one or both partners, relations during menstruation, or defective male sperm.<sup>124</sup> These kinds of explanations did not disappear in the early modern period, but the seventeenth century witnessed an increasing shift of focus from what occurs in the conjugal bed during conception, to what happens in a woman's mind—and mouth—during pregnancy.<sup>125</sup> As a result, the image of the father gradually disappeared from narratives of monstrous births, and the womb became a central feature in discourses of monstrosity. The monster thus came to serve as a living testament to the devastating effects of feminine independence, and popular discussions of monstrous births continued learned discourse on the monstrosity of feminine agency, as encapsulated by the womb. Another way in which these two discourses corresponded was in the close association they drew between feminine desire, the womb, and the mouth. As the cases of Glikl and Tofts begin to reveal, it was particularly actions of the mouth—more than sexual fantasies, acts of sexual deviance, or religious causes—that were thought to result in the birth of monsters.

Upon a first reading, it would seem that Glikl's anecdote participates in the pathologizing of feminine independence, reproducing the devastating link between the womb, the mouth, and the monster. And yet, as one continues reading, a more complex view begins to emerge. In fact, while Glikl acknowledges the monstrous potential of feminine independence, at the same time, she views that same independence as a solution to the

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<sup>122</sup> *Zikhronot Glikl 1691-1719*, ed. and trans. Chava Turniansky (Jerusalem: Zalman Shazar Center, 2006), 340-344.

<sup>123</sup> On Tofts, see Dennis Todd, *Imagining Monsters: Miscreations of the Self in Eighteenth-century England*, (Chicago, 1995), 1-37.

<sup>124</sup> For a discussion and further references, see Idelson-Shein, "Meditations on a Monkey-Face: Monsters, Transgressed Boundaries, and Contested Hierarchies in a Yiddish Eulenspiegel" *Jewish Quarterly Review* 108.1 (2018): 38-40.

<sup>125</sup> Fissel, *Vernacular Bodies*, esp. 53-69; Jennifer Spinks, *Monstrous Births and Visual Culture in Sixteenth-Century Germany* (New York, 2009), 132.

problem. She reports that a few days after the birth, the child's condition deteriorating still, she began to suspect that the root of the problem was her unfulfilled desire for the medlar. Ridiculed by her family, Glikl insisted on sending the maid to purchase a few medlars, so that they could be rubbed on the infant's mouth: "Although everybody laughed at me for this nonsense, I remained obstinate until it was done."<sup>126</sup> Miraculously, "as the caretaker stroked the child's mouth with the soft medlar, the child opened its mouth so eagerly as though he would swallow the whole thing at once [and] from that moment until the *bris*, all the marks on his face and body were gone."<sup>127</sup>

In direct contrast, then, to other cases of uterine monstrosity—whether monstrous births, devouring wombs, or furious uteruses—that can be treated by heterosexual intercourse or marriage, and the ensuing abolishment of feminine independence, in Glikl's memoirs, it is the woman's independent thinking against all of her surroundings that reverses the monstrous effects of the womb. What Glikl appears to be telling us, here and throughout the memoirs more generally, is that an independent woman can, in fact, be virtuous. Of course, this kind of independence, which Glikl commends, seems to be reserved only for women of certain social classes, and it corresponds directly with her own biography as a high-class widowed merchantwoman. As previous studies have shown, Jewish widows enjoyed a high level of independence and standing within the Jewish community.<sup>128</sup> Still, Glikl's casual dismissal of the inherent connection between feminine independence and monstrosity offers a rare view into a Jewish woman's unique understandings of her own body, nature, and capabilities, and a precious counterpoint to the misogynistic medical discourse of her time.

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<sup>126</sup> Glikl, *Zikhronot*, 346. English translation: Glikl, *Memoirs 1691-1719*, ed. Chava Turniansky, trans. Sara Friedman (Waltham, Mass, 2020), 191.

<sup>127</sup> Glikl, *Zikhronot*, 346.

<sup>128</sup> See esp. Debra Kaplan, "Women and Worth: Female Access to Property in Early Modern Urban Jewish Communities," *Leo Baeck Institute Year Book* 55 (2010): 93-113.