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A GARDEN IN HER CUPS:
BOTANICAL MEDICINES OF THE ANGLO-AMERICAN HOME, C.1580 – 1800

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PLYMOUTH UNIVERSITY

THESIS SUBMITTED FOR THE DEGREE
DOCTOR OF PHILOSOPHY

NOVEMBER, 2012
This thesis focuses on the domestic use of plant-based medicines within Early Modern English and Colonial American households, and establishes the defining framework of a domestic botanical culture. It reconstructs the relationship between domestic, popular, and learned medical cultures to reveal the breadth of that practice, demonstrating the unique characteristics of the domestic culture which are underpinned by a shared canon of herbs and a high degree of flexible adaptability by individual practitioners. The botanicals (medicinal plants and the remedies made from them) are themselves analysed through the genres of household receipt book manuscripts, private letters, and journals, as well as almanacs, vernacular medical books, travel writing and settler texts in order to explore more fully and expand our understanding of the domestic culture within a broad social setting. Oral, scribal, and print networks are reconstructed in order to demonstrate that domestic medical practitioners shared a distinctive and influential medical construct, commonly portrayed by current scholarship as a mere reflection of popular and learned practices.

Close engagement with both Early Modern English and Colonial women’s receipt books in particular reveals a commonality of practice based upon a shared materia medica which was sensitive and responsive to individual adaptation. Old and new world herbs are examined as a means of providing ingress into this shared and communal domestic practice, as well as to highlight the prevalence and importance of household individualization. The clear commonality of plants in trans-Atlantic domestic use demonstrates a continuous, shared, inherited practice which ends only with eighteenth-century Colonial inclusion of indigenous plants not found in the shared canon. Contemporary views of Early Modern and Colonial domestic medical practice are explored in order to argue that far from simply reflecting learned medical thinking and practice, domestic knowledge and use of botanical medicines was uniquely practical, communal, and flexible in its administration and expression.

1 Papers arising from this dissertation have been presented at the Burthen of the Mortal Body conference, Exeter University, September 2010; the Sick of Being Sick conference, Oxford University, September 2011; and the Herbal History Seminary Session, NIMH, March 2012.
LONG ABSTRACT

Ph.D THESIS
NOVEMBER 2012

A GARDEN IN HER CUPS:
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This thesis focuses on the domestic use of plant-based medicines within Early Modern English and Colonial American households, establishing the defining framework of a domestic botanical culture by examining both the contexts in which these medicines were employed, as well as the plants themselves. It reconstructs the relationship between domestic, popular, and learned medical cultures to reveal the breadth of that practice, demonstrating the unique characteristics of the domestic culture which are underpinned by a shared canon of herbs and a high degree of flexible adaptability by individual practitioners. The thesis further considers how domestic practices and knowledge were communicated and held, looking at oral, scribal, and print cultures and their impact on transmission routes, as well as individual plants in common use across the Anglo-American domestic spectrum which were representative of household use and practice. The thesis is less interested in the details of individual practitioners’ lives than in the socio-culturally structured nature of Anglo-Colonial domestic medical practice, and as such it turns to a range of sources, including household receipt book manuscripts, private letters, and journals, almanacs, vernacular medical books, travel writing, and settler texts, in order to explore more fully, and expand our understanding of, the domestic culture within a broad social setting. A close engagement with Early Modern English and Colonial American women’s receipt books reveals a commonality of practice based upon a shared materia medica which was sensitive and responsive to individual adaptation, while reference to popular printed texts aimed at a domestic audience highlights the social pervasiveness and wider cultural placing of that practice.

A broad geographical context of ‘England and Empire’, including the writing and practice of householders from both sides of the Atlantic, has been adopted as a means of assessing the widespread Anglo-American cultural application of domestic medicine throughout the period. Along similar lines, the thesis examines material from the late-sixteenth through to the eighteenth-century as this period contains the whole of the domestic culture under study here. This strategy has a twofold aim: first, to establish the common practice employed by Anglo-American householders, and secondly, to identify changes in that practice as they emerged in the eighteenth-century. Either group of primary sources, Early Modern English, and Colonial American, has been largely investigated as autonomous sets, for example, scholars considering
domestic English sources of botanical knowledge, particularly the receipt books, have largely done so in the context of extended English social and gender histories, while scholarly examination of American sources, particularly of cookbooks, has drawn useful comparisons between the material and cultural histories of the products themselves with the Colonial social and cultural context employing them. A relatively few number of scholars have considered the broader ‘expanded Britain’ connection, as seen for example, in Londa Scheibinger and Claudia Swan’s consideration of the Anglo-American, expanded British Empire, aspect of domestic medicine and botany in the West Indies. The thesis develops this last approach to the domestic sources on the premise that the schism between Anglo and Colonial American sources and practices prior to the eighteenth-century is an artificial one which does not serve the whole of the period under study well. Indeed, it is only in the mid- to late-

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eighteenth-century that we begin to see significant divergence and
differentiation in use of botanicals, and the majority of extant receipt books with
clear American provenance date from this later period, as earlier
representatives reflect the authors’ self-perception as English women and men.
The thesis’ focus on the inherited English *materia medica* and domestic
medicines used in Anglo-American households on either side of the Atlantic,
demonstrates that the onset of Colonial settlement domestic practice in the
American colonies was effectively Early Modern English practice, and is a
unique contribution to this growing body of trans-Atlantic scholarship.

In attempting to capture a ‘broad picture’ view of botanical medicines
across this geographical and chronological landscape, while simultaneously
placing the plants within a human context and framework, the thesis embraces
a number of different methodologies, including approaches borrowed from
sociology, anthropology, and theories of material culture. It looks at Early
Modern and Colonial narratives, Atlantic cultural theory, gender studies
concerned with women’s manuscript writing as well as women’s medical
knowledge and practice, and transmission theories, particularly as they relate to
the reclamation of non-elite social histories. The use of oral, scribal, and print
cultures informs the cultural field of study in the first three Chapters, while this
field is subsequently expanded by the introduction of Atlantic theory in Chapter
Four, and is then populated with plants, preparations, and people’s perceptions
of them in Chapters Five and Six.

Chapter One of the thesis first addresses the communal basis of
domestic botanical knowledge and prescribing, exploring its probable oral roots,
and outlining its composite, communal nature in terms of *bricolage* and a ‘little’
medical tradition. Chapter Two consults scribal expression of the domestic
culture in receipt books and personal correspondence, examining how the
communal *materia medica* was adapted and finessed by individual domestic
authors. Chapter Three examines the domestic practice alongside popular and
printed sources of botanical information as a means of establishing the extent to
which dialogue between cultures impacted upon the unique character of the
domestic practice. Chapter Four considers the domestic botanical culture as a
trans-Atlantic entity, looking at published lists of plants in order to establish the
basic shared canon of herbs in domestic employ. Chapter Five examines four
old world botanical case studies in depth - poppy, rose, cinnamon, and elder -
as a means of establishing the many points of the shared communal practice.
Chapter Six examines five new world botanical case studies in depth - *lignum
vitae*, sassafras, sarsaparilla, tobacco, and cinchona - in order to establish
those North American botanicals in common use across the shared Anglo-
American canon. It then considers the late addition of a much wider, and more
varied list of indigenous plants into Colonial recipes suggestive of wider, social
divergence between the cultures.

In examining both old and new world herbs in the writings of domestic
authors and in the wealth of sources which those authors accessed, the thesis
establishes a shared, communal Anglo-American domestic use and knowledge
of botanical medicines, as well as highlighting the prevalence and importance of
household individualization. The clear commonality of plants and their domestic
employment in trans-Atlantic households defines a continuous, inherited Early Modern English practice which ends only with eighteenth-century Colonial inclusion of indigenous plants not found in the shared canon. Far from simply reflecting learned medical thinking and practice, this domestic knowledge and use of botanical medicines was uniquely practical, communal, and flexible in its administration and expression. It drew on a wealth of sources and practices, rooted in oral culture, largely expressed in scribal form, and reflective of the needs and resources of those individuals and communities employing it.
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AUTHOR'S DECLARATION

At no time during the registration for the degree of Doctor of Philosophy has the author been registered for any other University award without prior agreement of the Graduate Committee.

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02.2009 HELP- cetl CPC award holder grant

A programme of advanced study was undertaken, which included a course in Early Modern palaeography in the second year of the PhD.

Relevant seminars and conferences were regularly attended at which work was often presented; external institutions were visited for consultation purposes.

Conference papers delivered:


Workshop, Seminars and Conferences Attended:

06.2012 Transatlantic Exchanges Forum: Exchange and Expertise, University of Plymouth (working seminar to put together a joint bid for AHRC grant)
04.2011 AAHM (American Association of the History of Medicine), Baltimore
04.2011 ‘Cultures of Correspondence’, University of Plymouth
07.2011 BMJ Medical Humanities conference, Plymouth
05.2010 ‘On Balance’ Conference, Centre for Medical History, Exeter University
05.2009 MIRC. Living in the Past: Histories, Heritage and the Interior
04.2009 TASI: Finding Free-to-Use Images Online
04.2009 AAH. Crossings: Art, Medicine, & Visual Culture
03.2009 TASI: Building a Departmental Image Collection
03.2009 TASI: Scanning with the CLA Licence
12.2008 Classical Collections and British Country houses and Gardens

Word count of main body of thesis: 81,326.

Signed

Date
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NOTE ON CONVENTIONS

The original spelling of documents has been retained. Dates in quotations reflect the author’s denotation, rather than Old or New Style; those in the footnotes reflect New Style with year beginnings reflecting a 1st of January start. Manuscript pages follow standard foliation citation (fol. N⁰r/v following the archive call number) where possible, and individual authors’ pagination where this exists and the manuscripts are unfoliated, with p.N⁰ following the author/title. Manuscript references are italicized only where they have been named by the author as in Her Booke, whereas descriptive archival terms such as ‘receipt book’ are not.
## ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAS</td>
<td>American Antiquarian Society, Philadelphia, PA</td>
</tr>
<tr>
<td>APS</td>
<td>American Philosophical Society, Philadelphia, PA</td>
</tr>
<tr>
<td>AMCA</td>
<td>Archives of the Moravian Church in America, Winston-Salem, NC</td>
</tr>
<tr>
<td>Bod.L.</td>
<td>Bodleian Library, Oxford</td>
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<tr>
<td>BL</td>
<td>British Library</td>
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<tr>
<td>Add.</td>
<td>Additional manuscripts</td>
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<tr>
<td>Eg.</td>
<td>Egerton manuscripts</td>
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<tr>
<td>Sl.</td>
<td>Sloane manuscripts</td>
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<tr>
<td>CP</td>
<td>The College of Physicians, Philadelphia, PA</td>
</tr>
<tr>
<td>CWA</td>
<td>Colonial Williamsburg Archives, Williamsburg, VA</td>
</tr>
<tr>
<td>DRO</td>
<td>Derbyshire Record Office, Matlock, Derbyshire</td>
</tr>
<tr>
<td>FSL</td>
<td>Folger Shakespeare Library, Washington D.C.</td>
</tr>
<tr>
<td>FHL</td>
<td>Friends Historical Library of Swarthmore College, Swarthmore, PA</td>
</tr>
<tr>
<td>HSP</td>
<td>Historical Society of Pennsylvania, Philadelphia, PA</td>
</tr>
<tr>
<td>LPL</td>
<td>Lambeth Palace Library, London</td>
</tr>
<tr>
<td>LC</td>
<td>Library of Congress, Washington, DC.</td>
</tr>
<tr>
<td>MHL</td>
<td>Marston Hall Library, Walderton, West Sussex</td>
</tr>
<tr>
<td>MHS</td>
<td>Massachusetts Historical Society, Boston, MA</td>
</tr>
<tr>
<td>NLS</td>
<td>National Library of Scotland, Edinburgh</td>
</tr>
<tr>
<td>NRO</td>
<td>Northampton Record Office, Northampton</td>
</tr>
<tr>
<td>NCSA</td>
<td>North Carolina State Archives, Raleigh, NC</td>
</tr>
<tr>
<td>PCA</td>
<td>Plymouth Colony Archive Project, University of Illinois, Urbana, IL</td>
</tr>
<tr>
<td>SML</td>
<td>Sterling Memorial Library Manuscript Archives, New Haven, CT</td>
</tr>
<tr>
<td>SCHS</td>
<td>South Carolina Historical Society, Charleston, NC</td>
</tr>
<tr>
<td>SHC</td>
<td>Southern Historical Collection, University of North Carolina, Chapel Hill, NC</td>
</tr>
<tr>
<td>UP</td>
<td>University of Pennsylvania Rare Books &amp; Manuscripts Library, Philadelphia, PA</td>
</tr>
<tr>
<td>UT</td>
<td>University of Tennessee Special Collections, Knoxville, TS</td>
</tr>
<tr>
<td>WL</td>
<td>Wellcome Library Manuscript Collection, London</td>
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<tr>
<td>Win</td>
<td>Winterthur Library, Winterthur, DE</td>
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Introduction

This thesis examines trans-Atlantic Anglo-American botanical medicines in domestic use from 1550 to 1800.\(^4\) From the end of the sixteenth-century through to the eighteenth, Anglo-American women, and occasionally men, regularly wrote medical recipes and instructions in domestic receipt books and personal correspondence, illustrating a common domestic medical practice based on the production and dispensation of medicines to kin and community.\(^5\) The shared \textit{materia medica}, that list of medicines commonly used in the majority of Anglo-American households, demonstrates a continuity of practice, both between English and American domiciles, and until the second half of the eighteenth-century. A great flexibility and adaptability of practice between individuals and individual households is also to be found in the variations of preparation and administration of these shared botanicals. This combination of clear communal practice with a high degree of individualization strongly suggests a discrete domestic practice that was largely separate from learned practices of the period and was based on the use of individual botanical preparations being anecdotal and empirical, rather than theoretical, in nature. By the mid-eighteenth-century, there was a marked differentiation in English and American lists of those plants included in domestic \textit{materia medica}, a result of larger political and cultural realities that shaped individual and communal

\(^4\) Botanical medicines are those medicines made up of plant material, whether using single plants, or more complex combinations.

\(^5\) Domestic receipt books consisted of handwritten collections of recipes, both medicinal and culinary, which were often ordered, and typically bound. Many receipt book manuscripts show evidence of many hands, suggesting a multiplicity of authorship, reflecting a wealth of shared knowledge. They are considered in greater depth in Chapter 2.
practice. In tracing the original, common Anglo-American culture, and the
beginnings of its later American offshoot, the thesis reclaims knowledge and
practice surrounding historical botanical medicines, and in so doing,
reconstructs a piece of everyday Early Modern and Colonial life.

This thesis focuses on the plants themselves as a means of gaining
ingress into the larger domestic lay practice. It explores what plants were used,
in what manner, and what this indicates about Early Modern English and
Colonial American medicine and medical knowledge, both within the home and
within the larger community. It also explores the adaptability of this body of
herbs, examining in some depth shared old and new world plants, considering
emerging differentiation in plant use, and what implications each holds for the
wider social setting in which these plants were employed. The thesis turns
primarily to those sources written by lay authors in the home, particularly receipt
books, in order to establish the list of plants used. It also examines a range of
popular and vernacular texts where these further our understanding of what
herbs were considered appropriate, and necessary, for successful domestic
provisioning. The thesis therefore examines the plants and plant medicines and
the evidence relating to them as a means of expanding our understanding of
domestic medical practice. It first considers the ways and means by which
knowledge of medicinal plants was communicated, translated, and received, by
household practitioners, paying close attention to oral, scribal, print and popular
cultures; it then considers differences between old and new world demands and
resources, and the opportunities provided by trans-Atlantic cultures; and finally,
it examines how the Early Modern English domestic *materia medica* adapted
and evolved in Colonial households in the eighteenth-century. In turn, this plant-based approach to the material allows the thesis to build a defining framework for what it terms Anglo-American ‘domestic botanical cultures’.

The terms ‘botanicals’, ‘herbal medicines’, and ‘botanical medicines’ all hold an approximate meaning, and are used interchangeably throughout this work. The term ‘botanical medicinal knowledge’ refers specifically to those herbal medical preparations written down in domestic recipe, or ‘receipt’, books throughout the Early Modern period. Equally, as the thesis proposes that domestic botanical medicines and domestic medical practice are largely synonymous, as household practitioners typically eschewed medical theory, instead equating medicines with remedial treatment, they are typically treated as interchangeable entities except where otherwise noted. As the reach of the thesis spans over two centuries and stretches across the Atlantic, source materials and evidence are organised in such a way as to both illustrate continuity where it exists, and highlight variations where they occur. The terms ‘Anglo-American’, ‘trans-Atlantic’, and ‘Early Modern English and Colonial American’ all refer to households of the expanded, trans-Atlantic, British empire. Unless otherwise stated, particularly as occurs in Chapters four and six, it is the shared, inherited, Early Modern English practice which is referred to when speaking of a ‘domestic botanical culture’. Where the thesis is concerned with establishing continuity of practice across the chronological span of the culture, sources are typically consulted by progressive date. Sources providing

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6 There are instances of individual domestic authors who clearly do not fit this simple ‘medicines constitute medical practice’ mould, such as Lady Grace Mildmay and Elizabeth Freke, both of whom have engendered a wealth of scholarly attention. These two authors in particular are also consulted by the thesis in order to provide as well-rounded a picture of the whole of domestic provisioning as possible.
evidence of trans-Atlantic practices, however, as in Chapters four through six, have typically been organized by location of authorship rather than strictly, or solely, along chronological lines, although both the year and the place of origin are noted alongside plants and recipes throughout.

The parameters delineating this study were chosen in order to accommodate the nature of the inquiry, allowing for fuller definitions, tracing, and consideration of the nature and role of domestic medicines and domestic medical provision in common use within the Anglo-American domestic sphere. As a result, the thesis has purposefully included manuscript evidence from the American colonies alongside those of English authors as a means of assessing the widespread Anglo-American cultural application of domestic medicine throughout the period. This strategy has three aims: first to consider more fully and flesh out the ‘greater British’ domestic knowledge and use of botanical medicines, and secondly, to examine what new medicines found their way into the European canon, with a consideration of how English materia medica changed, or not, as a result of this influx of new world flora. The third area of focus examines the retransmission of this British household use of indigenous American plants back to the American colonies, considering how trans-Atlantic practices adopted, and adapted, these botanicals by the end of the eighteenth-century. It is by combining social history methods relative to chronology and geography in a cultural analysis of domestic plant-based medicines that a specific domestic practice is established.

Receipt books as a repository and evidence of cultural historical practices often, in themselves, offer little information pertaining to provenance, as the authors’ background and social context are often frustratingly difficult to date, with many examples remaining anonymous, and still others clearly the product of multiple, also often anonymous, compilers. Indeed, those works which have been studied in the greatest depth, such as Elizabeth Freke’s papers or Martha Washington’s *Booke of Sweetmeats*, come with an unusual amount of provenance and supportive material. This perhaps skews our idea of who typically employed botanicals in the home, or who often authored domestic receipt books, with an unfair weighting of scholarship devoted to those works produced by individuals.
living in relatively wealthy, educated, elite households. For the majority of receipt manuscripts, there are no corresponding diaries, journals, letters, or inventories. The difficulties which this presents to cultural historians seeking to place individual practices within a specific social context are less awkward in terms of establishing a narrative of the botanical medicines in use, even if that narrative is intended to be used in broadening our understanding of the wider cultural practice. In this last instance, it is by looking at the sheer weight of practice, using an almost quantitative form of analysis, rather than a qualitative one, that produces meaningful information of a culture which existed across considerable lengths of time and geographical distance, as well as across social strata. Similarly, cultural historians have devoted increasing amounts of time and attention to consideration, not only of Atlantic botanical cultures, but particularly to those cultures associated with minority groups and practices. Londa Scheibinger’s consideration of the medical knowledge held by slave groups, alongside Kay Moss’ analysis of folk medicine in the southern states of America both speak to this growing interest in trans-Atlantic, as well as ‘little’ traditions of medicine.\(^8\) In order to further both examination of that body of knowledge contained within receipt books, and to broaden our understanding of the ‘little’ Anglo-American domestic botanical culture which they represent, a range of other literary sources have also been consulted, including verse, dramatic interlude, and Robert Burton’s unique medical autobiography. More traditional sources, such as probate inventories, almanacs, printed vernacular medical books, and settler texts have also yielded important material

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concerning the nature of plants commonly found, and used, within domestic practices across the field of study.

The thesis first addresses how knowledge of plant medicines was conveyed, and received, within the Early Modern and Colonial domestic sphere. This deserves closer attention than the typical analysis it has so far received, as it sheds important and significant light on the issue of women’s medical agency and authority, as well as speaking to questions surrounding the social transmission of medical knowledge more generally. Women’s agency and knowledge in this period were largely limited to the home, therefore the extant source material through which to investigate their practice is scarcer than that generated by their male contemporaries in scholarly institutions, as the domestic milieu was less likely to preserve documentation. Historians writing on Early Modern and Colonial female agency often preface that agency in terms of the prevailing male practice, looking for instances of masculine medical theory, for example, in the female sources, as a means of authenticating and legitimizing the female knowledge base, education, and ultimately, practice.\(^9\)

Domestic practice differed from learned medicine in that it was adaptive, non-theoretical, communally derived, and communally responsive. For domestic medical practice, the use of botanical, and very occasionally non-botanical, medicines largely constituted the whole of the practice, with instances of individuals applying medical theory and concepts being the exception rather

than the norm. Thus, in order to further our understanding of the domestic use of botanicals, the thesis aims to examine the domestic practice in terms of its own coherent rationale, rather than searching for instances where it appropriated and wielded aspects of learned medical practice and authority. Considering domestic botanical cultures in light of a complexity of transmission and reception, and as a ‘little’ tradition in its own right, a composite, ‘bricolage’ picture of how knowledge of botanicals was acquired and implemented is required. Oral, scribal, and printed cultures are therefore examined in order to flesh out the particular place of botanicals within the domestic setting.

Personalized adaptation of the communal *materia medica* by individual authors and households as well as by certain networks is explored as a means of illustrating the flexibility and responsive nature of the domestic practice. That this practice was neither theoretical, nor dogmatic, enabled it to respond quickly and fruitfully to individual needs and circumstances, producing wide variations in the application of the communally defined plant lists, and allowing for individualization within the wider communal practice. The shared Anglo-American canon of herbs is then considered as part of a greater Atlantic, particularly *domestic* Atlantic, culture, becoming at the same time a distinct strand within the broader study of botanical cultures. Individual plants and plant medicines are examined in detail, particularly in terms of their preparation and administration, in order to explore further the complexity of the domestic practice. Representative old world plants are explored as the means of establishing the inherited, shared domestic Anglo-American *materia medica* and its highly individualized use. Examination of the new world botanicals illustrates
both the continuity of this combined communal and individual practice (up until
the eighteenth-century), and the flexibility and responsiveness of the underlying
materia medica itself to wider community differentiation. This last, ultimately,
allowed for greater inclusion of indigenous plants in later Colonial recipes.

Methodology

In tracing botanicals in domestic use across a broad chronological and
geographical field, the thesis has had to span several critical and theoretical
fields. It has, for example, considered oral, scribal, and textual cultures and
theories, some of which themselves borrow from a wide range of
methodologies. Oral and scribal cultures, in particular, owe much to
anthropological methods of exploration, as well as to studies in cultural
sociology. The most important of these approaches for the first Chapter, and
also informing the second and third Chapters, is the anthropological method of
applying knowledge of behaviour in one observable group to behaviours within
a second, similar group.10 In this instance the transfer of knowledge and skills
within domestic spaces is considered. While there are limitations to this method
in terms of its speculative nature and possible subjectivity, it is a primary means
of ingress into historical oral practices and cultures, and may fruitfully be
employed as such. The thesis similarly employs methods of considering cultural
and social norms by looking at how written expressions, whether scribal or
printed, reflect and represent the authorial base producing them. This work

often reads texts ‘against the grain’, that is to say, in order to elicit information specific to plants and plant medicines, and the body of knowledge surrounding plants and plant medicines, unlike the more conventional reading which is typically concerned with reading authors’ knowledge, agency, and author in order to shed light on their cultural and social lives. This atypical reading reflects the expertise and background of the thesis’s author, who holds particular knowledge and skills relating to the reading of botanicals as a medical herbalist. This specialized approach aims to both further the recovery of Early Modern and Colonial medicinal knowledge and practice, and to firmly place that knowledge within a specific domestic culture. Research approaches borrowed from economic history and trans-Atlantic cultures have informed this work also, as have methods of cultural inquiry taken from horticultural histories and Colonial narratives more broadly. The thesis is also informed by recent gender-based approaches to history, since the bulk of the domestic sources, particularly those of English provenance, are of clear female authorship, and as agency emanating from the domestic sphere in general is gendered in nature. The thesis has embraced this diversity of methodology as each brings a unique and critically important perspective to bear on the material being considered.

Because of the number and complexity of approaches employed, however, each has been considered in greater depth at the beginning of the Chapters where they can be read and considered in context along with the botanicals themselves.

The term ‘learned’, in the sense of educated, professional, formal and dominant, holds a variety of meanings in differing contexts, many of which are considered in this work. For example, ‘learned’ narratives in Early Modern and Colonial historiography often run parallel to ‘elite’ narratives, and are associated with, or refer to, class structures. Equally, the term may occur in connection with constructs associated with Empire and the infrastructure and learning associated with Empire, thus the ‘learned’ individual is equated with the ruling social order (as opposed to those peoples who were ruled), and the invading power (as opposed to indigenous peoples). In gender studies ‘learned’ practice is often used to describe public masculine authority (as opposed to domestic female knowledge); in transmission theory ‘learned’ may refer to printed authority (rather than oral histories), and so on. In the particular context of this work, where all of these topics are touched upon, ‘learned’ refers specifically to professional medical concepts, practice, and transmission, unless otherwise stated. There is no doubt that the majority of ‘learned’ medical thinking across Early Modern and Colonial Anglo-America was elite, white, European, masculine, and public, and all of these aspects are considered to some extent within the thesis. That is not to say, however, that all sources which may be described as ‘learned, white, European, masculine, and public’ or any combination of these are ‘elite’ within this context: indeed, the personal receipt
books of well-read women from demonstrably ‘elite’ households, such as the gentlewomen Lady Grace Mildmay and Elizabeth Freke are not ‘learned’ in so far as they do not purport to be medical texts written by medically trained individuals in themselves. Likewise, the printed works of Colonial propagandists such as Edward Winslow or John Josselyn, and the writings (scribal or printed) of Colonial community leaders such as Cotton Mathers, the Washingtons, or the Adams, are not ‘elite’ in this context for similar reasons. In this use ‘learned’ reflects medical knowledge derived from the prevailing public schools of practice and dissemination, whereas domestic or household knowledge reflects an inherited lay practice typical of the Early Modern and Colonial home.

For example, Edward Winslow’s writing, despite the fact that the author was learned, white, European, and from a privileged class, is that of a layman; he is not a trained medical practitioner and therefore whatever theories, constructs, and practices found within his writing reflect widespread cultural norms rather than elite, specialist training. Even the writings of those authors who were medically trained (or apprenticed, in the case of Colonial physicians) and therefore well versed in learned medical theory may fall into the non-elite, domestic camp where and when they clearly write for an intended domestic audience, and they eschew the elite technical language and theory of their profession in order to do so. Likewise, the ‘elite’ physician, Buchan, in writing a book specifically for domestic use, produces a source which is non-elite in

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12 Lady Grace Mildmay wrote in the late sixteenth- and early seventeenth-centuries, while Elizabeth Freke’s work comes from the late-seventeenth and early-eighteenth-centuries. Both authors come from relatively priveleged, elite households, each cites medical authority in her writings, and both have been the subject of scholarly attention. Their use of botanicals is considered more fully in chapters 3, 5, and 6.
nature. Both Winslow and Buchan were men from similar European backgrounds: both wrote printed texts; each represented a form of ‘authority’. Within this particular context however, neither consists an ‘elite’ source as neither is written using exclusive terminology, nor does either of them reflect current medical theory or practices requiring specialized knowledge or training. As such, printed texts produced by non-medical ‘elite’ authors are consulted as particularly important documents of a universal Anglo-American domestic culture in Chapters 4 through 6, despite the fact that they were neither written by women nor produced within a domestic setting.

Approaches to domestic medical sources and practice

The thesis’ approach to historiography has necessarily been broad and inclusive, reflecting the many areas of study and method upon which the subject touches. It has identified a new field of study in domestic botanical cultures, drawing from current historiographical examination of domestic receipt books, horticultural and trans-Atlantic histories, and the much broader field of Early Modern and Colonial medical history. In looking at botanicals employed by domestic medicine and indicative of household agency, this work is situated in the field of gender history illuminated by the works of scholars interested in re-evaluating and retrieving women’s agency. It also contributes to the field of

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botanical history, particularly as this relates to trans-Atlantic cultures and narratives of Empire. Finally, it considers domestic botanical culture within the context of oral, scribal, and print transmission histories.

The history of medicines has largely been contextualized within the history of medicine and of medical practice, and the latter has typically revolved around public practice: that is to say, that provision generally available and countenanced by societies as a whole. A number of authors have looked at this broader picture, both reflecting ‘learned’ medical practice and popular cultural perceptions of medicine. Wear writes of historiography concentrating ‘on


medicine, its theories, organization, relations with the state and its general place in society, though even this seems overly inclusive, as much traditional historiography has been concerned specifically with learned practice: the theories, understanding, and practice of professionals, rather than medical practice in its entirety. More recently, interest in domestic medical practice has focused firmly on the social history behind household medicine, particularly in looking at how the domestic delivery of medicine reflected and impacted on those women closely allied to it. Primary to this body of study have been questions of economics, power, and authority, and secondary has been a consideration of knowledge, with a particular interest in seeking out evidence of awareness of contemporaneous medical theory in these authors’ writings.

The historiography touching on gendered aspects of domestic medical provisioning has been well served. Along with Mary Lindemann’s identification of the predominant role which household provision played in providing Early Modern medical care, Elaine Leong notes that ‘we know that home-based medicine constituted the bulk of health care in the period’. While Lindemann refers to ‘legitimate practitioners’ in her discussion of regular professional health care providers, suggesting the possibility of illegitimate practitioners – both

\[ \text{References:} \]


professional and lay - Mary Fissell speaks of the value to be found in examining (or re-examining) concepts of health and healing in a much broader context to that traditionally embraced:

When we re-embed healing within more general care of the body, we abolish hierarchies of value created by learned physicians and reproduced by later generations seeking to create or endorse traditions within medicine = seeking professional ancestors as object lessons.¹⁹

Fissell’s examination of ‘medicine’ in terms of ‘care of the body’ might be fruitfully expanded to ‘care of the person’, encompassing a wider bio-psycho-social model. This latter model not only allows for the inclusion of those non-elite forms of medical practice noted by Fissell, but also goes further to embrace those aspects of well-being associated with preventative care which the Early Modern householder clearly incorporated into her larger practice. Hence for most women writing receipt books, remedy and recipe, medicine and food, were both distinct, and distinctly related.

The thesis differs from much of the current scholarship looking at Early Modern and Colonial domestic medicines in two important ways. First, it is concerned with examining the medicines themselves, while current study has tended to concentrate on individual women and women’s manuscripts, focusing on the women’s’ agency, and using household receipt books as a means of ingress into the daily cultural and social lives of Early Modern English women. These scholars, both historians and literary critics, have read the domestic sources as a means of informing our understanding of the latter’s lives, intellectual apprehension, and social standing. For example, Elaine Leong’s

work with Elizabeth Freke adds substantially to our social understanding and placement of Freke’s medical knowledge and practice, building on Raymond Anselment’s earlier commentary on Freke’s writings. Where Anselment’s work focused primarily on Freke’s social, familial, and religious life, Leong uses Freke’s medical writings to explore seventeenth-century female domestic agency, authority, and learning. Similarly, Linda Pollock’s consideration of Lady Grace Mildmay’s medical practice sits within a broader social context of church, community, and family while exploring Mildmay’s contribution as a lay medical practitioner. In both instances, these scholars have established the legitimacy of lay female practice, particularly in reference to their personal manuscript writings. This scholarship into individual practice sits well within the structural theory of female medical practice already set in place by writers such as Doreen Evenden Nagy, who established the breadth of both lay and professional medical provisioning in seventeenth-century England, and Margaret Pelling’s work examining a similar breadth of medical provisioning, including the role of women in providing domestic health care in the sixteenth- and seventeenth-centuries. While examination of these women practitioners is of vital importance in addressing our greater understanding of this period and of women’s history more generally, it is not the main aim of this thesis. Rather, the thesis interrogates the botanicals, those herbal preparations and medicaments

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made and delivered by this largely female authorship, in hopes of building a clearer picture of the medicines themselves. That picture of the canon of plants in use in turn serves to reclaim lost knowledge relating to the production and administration of herbal medicines. Moreover, this more fully developed picture in turn relates back to, and informs, those larger social and gender-defined histories by considering the sources as exemplars of a domestic botanical culture.

Secondly, this thesis differs from much of the work looking at Early Modern domestic receipt books by examining a broad field of study, both chronologically and geographically. A number of scholars have looked at single authors, as previously noted.\textsuperscript{23} Similarly, work has been directed toward examining domestic medical authors and texts representative of a particular community or coterie, such as Catherine Field’s work with Early Modern Englishwomen’s manuscripts, or Kay Moss’s detailed examination of recipes from the Carolina colonies. Looking more widely, both in terms of the number of manuscripts consulted, but also at the number of hands and voices which these receipt books represent, Catherine Field’s ‘Many Hands, Hands’ establishes the role of receipt book manuscripts in giving voice to Early Modern women’s agency, as well as providing the modern reader ingress into a range of individual’s lives and thinking. Moss’s work also examines a number of manuscript sources, here looking more specifically at medicines and medical practices in the eighteenth and early nineteenth-century Carolinas. Each of these authors examines a number of manuscripts with an eye to establishing

norms for their authorship groups, prescribed by specific geographical and chronological criteria. There has, however, been little overview of whether all of these authors represent a richer and broader, while also singular and unique, domestic Anglo-American practice as a whole.24

Yet there is ample precedence for examination of this particular extended chronological and geographical field in parallel historiographies, notably in relation to domestic and Colonial narratives. For example, Rosemary O’Day considers the ‘like versus like’ nature of Early Modern English and American Colonial history in *Women’s Agency in Early Modern Britain and the American Colonies*, looking at the agency of Anglo-American women across the sixteenth, seventeenth-, and eighteenth-centuries.25 Likewise, Atlantic historiography often considers a similar time span, as seen in Londa Scheibinger’s *Soundings in Atlantic history: latent structures and intellectual currents* which embraces the years 1500 to 1830, and Jenner and Wallis’ *The Medical Marketplace and Its Colonies* which concerns itself with an overview of commercial medicine from 1450 to 1850.26 Reflecting this broader historiography, the thesis examines botanicals mentioned in English and American receipt books, letters, and journals written between 1550 and 1800, as these particular years define a prescribing era which is particularly rich in terms of domestic practice. Indeed,

this 'long' Early Modern period allows for a detailed examination of whether, and how, domestic botanical prescribing changed across a period of exploration and cultural change, as well as contributing to the dialogue considering the transmission of medicinal knowledge already underway.

The thesis differs further from much of the existing historiography surrounding domestic medicine in its consideration of origins and nature of domestic knowledge of botanicals, particularly as this relates to transmission cultures. Without desiring to contribute to a divisive approach to medical history, this study is interested in the differences still to be fully explored between botanical usage and knowledge in different environments, and by different practitioners. Londa Schiebinger, for example, catalogues those women who adapted to, and succeeded at, the male scientific paradigm, while speaking to the difference between masculine and feminine apprehension of ‘the scientific’ in terms of academics versus ‘craft’. This differentiation of ‘science’ and ‘craft’ is an important and interesting one, and one which begs further investigation. Indeed, a particular difference may be observed between professional and domestic practices, and between theory-based elite medicine and a common, non theoretical authority, knowledge, and practice. This thesis therefore explores the distinctive nature of domestic knowledge, production, and prescribing of botanicals by householders, a subject which has been largely ignored by scholarship to date.

27 Londa Schiebinger “Maria Winkelmann at the Berlin Academy” in Gendered domains: rethinking public and private in women’s history, Dorothy Helly and Susan Reverby (eds) Cornell University Press: 1992, p. 57
Current scholarship concerned with the retrieval of Early Modern oral and scribal cultures has been read collectively and applied to the household use and knowledge of botanicals in order to build a framework for a domestic botanical culture in Chapters one and two. Peter Burke’s work on popular culture has contributed the idea of a ‘bricolage’ as well as the ideas surrounding ‘little’ versus ‘great’ medical traditions, each of which are defining characteristics of domestic botanical cultures. Fox’s and Vansina’s work in reclaiming oral cultures via textual evidence and inferred approaches regarding the nature, and role, of oral traditions has been equally invaluable in providing a basic template for the thesis’s approach to apprehending the oral roots of domestic knowledge and use of botanicals. Carole Counihan’s scholarship concerned with current culinary recipes and the correlation which may be drawn between them and historical practices as well as the role of oral transmission in each instance, also informs this work. Margaret Ezell’s work with scribal cultures broadly, and women’s domestic manuscripts specifically, is here read in conjunction with Vansina’s and Counihan’s works, providing a continuation of the analysis of gendered oral traditions into the sphere of scribal culture. Each of these authors is largely concerned with the reclamation of subaltern voices, and each necessarily embraces a wide, creative approach to methodology which the thesis has mirrored in order to construct a comprehensive and robust picture of the roots and social context of domestic botanical culture.


29 ‘Bricolage’ refers to the composite, adaptive nature of the domestic culture, and is further discussed in chapter 1.
Primary Sources, Receipt Books

Receipt books are handwritten and bound collections of recipes, often with both culinary and medicinal examples. Both English and American receipt books employ a similar range of plants, and address a similar range of ailments. Of the 128 receipt books consulted in the thesis, about eighty percent are of English authorship, with only twenty-six manuscripts, about twenty percent, holding clear Colonial American provenance. The English manuscripts also represent a far greater chronological span of authorship, from the late sixteenth-through to the early-nineteenth-centuries, with a fairly even spread across the whole of the span, though there is a clear wealth of mid-seventeenth-century representatives. The earliest American source dates from 1650, with the bulk of material written in the eighteenth-century. While this preponderance of English sources would seem lopsided on first glance, it speaks to the nature of an ongoing, organic and evolving, Anglo-American tradition, where the later Colonial works are a trans-Atlantic continuance of the earlier English model. As a result, the proportion of resources found and sampled here represents an approximate ratio of the settled, Colonial period of time in relation to the overall cultural span considered by the thesis.

Sampling of the manuscripts was determined largely by archival access. In order to produce a ‘large picture’ overview of domestic use of botanicals, manuscripts held in substantial repositories such as the Wellcome and British Libraries in London, and the Folger Shakespeare Library in Washington D.C., were given priority. Problems surrounding this method of sampling largely stem
from the nature of collections generally: the instances of manuscripts which have been preserved and collected err in favour of elite households and learned authors, with sources originating from smaller, provincial, and more socially diverse households less likely to be represented. This is, however, true of extant receipt book manuscripts more generally, as the earliest examples in particular tend to represent households with an atypical, high level of female literacy, appreciation for the practical necessity of female agency and authority, and the means and likelihood of archival historical preservation. As a result, while the aim of the thesis was to provide an overview of Anglo-American botanicals representative of a communal practice in the widest sense possible, it acknowledges that much of the evidence is overly representative of a small, elite portion of Early Modern English and Colonial American households. The inclusion of family manuscripts, sources of anonymous authorship, and many of the Colonial Quaker and German American sources redresses this imbalance to a small degree.

Of the 102 English sources, over half (some sixty-nine) of the manuscripts have an identifiable female authorship, seven of them were written by men, and twenty-six of the receipt books, about a quarter of the English manuscripts, are either anonymous, ‘family’, or communal manuscripts of some kind, with no clear individual, identifiable author. Of the twenty-six American manuscripts consulted, exactly half, thirteen, have an identifiable female author, a third of them were written by men, with only four ‘family manuscript’ examples. Statistically, the English manuscripts have a considerably higher proportion of female authorship, with a negligible (about seven percent) percentage of male
authorship, illustrating a clear gendered bias in authorship. The American sources, on the other hand, show a substantially different picture, with clear female authorship accounting for only half of the manuscripts, with family sources showing contributions from authors of both genders, and singular male authorship accounting for over a third of the overall sampling. The difference in gendered authorship here, while of particular interest to cultural and trans-Atlantic historians, is of less import in considering domestic botanical cultures. The higher proportion of male authors represented in early American sources reflects a higher proportion of single male households in Colonial settlements than in Early Modern England. In both countries the majority of receipt books with a family provenance (where there is clear reference to the care of children, for example), have female authorship. Thus, for the purposes of the thesis, the clear female bias in authorship in both sets of manuscripts allows for gendered assumptions to be made in outlining the given field of study. Further, gender issues, while relevant to establishing the framework and defining criteria of a domestic botanical culture, are not the main focus of this research, and receipt book manuscripts are read with the primary intention of recovering information relating to botanical medicines; their use, preparation, and administration. This information is used to reflect back onto the communal practice of employing the herbs, rather than providing access into the social and cultural context of individual authors or social groups.

Personal Letters & Journals

In addition to the primary receipt books, which form the main corpus of documents analysed in the thesis, a small and necessarily limited range of
letters, journal entries, and anecdotal marginalia containing botanical
information has also been consulted. Typically these sources represent the
archived papers of families, as seen in the sixteenth-century Bacon and
eighteenth-century Adams papers, although some of the later American
sources, such as Margareta Prentis’ manuscript, which bridges the receipt
book genre and that of the journal, or Moody Follesby’s ‘almanac diary’, are
clearly representative of more ordinary households. The letters of Anne
Bacon to her son and the correspondence between Abigail and John Adams,
for example, are also read across the grain, primarily in order to establish
familial evidence of domestic knowledge of botanicals, rather than as a means
of examining the social or political circumstances of either the individuals, or the
families, represented. Likewise, the jottings of Moody Follensby in the margins
of his ‘almanac diaries’ or the anecdotal relation of medicines in Prentis’s work
are included solely as a means of examining popular, lay approaches to health
and medical matters. On the whole, these sources are supplementary and read
primarily as a means of helping to establish the nature of those communal
domestic practices and perceptions underlying household botanical knowledge.
Moreover, the thesis has only looked at representative epistolary sources which
clearly reflect typical domestic apprehension of household medical matters and
the botanicals relating to them, thus relating back to the domestic canon of
herbs established by household receipt books.

30 LPL.ms.651 fol. 206: Anne Bacon Papers. Lady Anne Bacon to Anthony Bacon, (16 June
1595); Anne Bacon Papers. LPL.ms.653 fol. 362: Lady Anne Bacon to Anthony Bacon, (n.d); MHS.mss.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 8 - 10
September 1775; MHS.Mss.080473, Adams Family Papers, Letter from Abigail Adams to John
Adams, 29 March, 1797; MHS., Ms.S-288, Moody Follonsbee’s Diary & Almanac (1765-1766);
UP.ms.5034(1-4), Margareta Prentis’s Cookery & Medical Recipes (Williamsburg: 1780s).
Probate Inventories

English and Colonial probate inventories providing information about the sort of equipment, resources, and authoritative texts found in typical households have been read as a means of establishing the domestic medical agency employing botanical medicines. Two primary English inventories consulted, those of Lady Grace Mildmay and Elizabeth Freke, are well established within current scholarship and have been used for the purpose of broadening our understanding of the communal practice of domestic medicine in England. All of the American probate inventories from both the northern Plymouth colony and the Williamsburg colony of Virginia originate in the seventeenth and eighteenth-centuries, and are accessible online. These were consulted in order to establish a like-for-like continuity with that established scholarship directed towards the English sources. While the thesis acknowledges that those sources available online in no way represent the whole of the communities in question, they give a broad enough overview of the type of Colonial household, and those items to be found in Colonial households, to produce an introductory picture of Colonial domestic medical practice.

Printed Texts

While much of current scholarship is concerned with the schematics of transmission, tracing the variants of knowledge back to original sources, this thesis is more interested in identifying some of the many, varied, and organic means by which information was disseminated amongst households. Far from
suggesting that transmission, reception, adaptation, and retransmission of information within the domestic sphere was simple, linear and progressive, the thesis would argue that one of the fundamental, unique, aspects of domestic botanical cultures lies in its complex, interactive, and composite nature. As a result, a range of popular printed texts which were accessed by domestic authors, and which have been widely read by current scholars in conjunction with domestic sources, have been consulted. These are broken down rather broadly into four categories: herbals, vernacular medical texts, almanacs, and what the thesis terms ‘settler texts’.

Herbals, printed texts outlining the nature and use of medicinal plants, variously aimed at learned and domestic audiences, are read here in light of their influence on wider popular culture, as well as impact on domestic authors, and in acknowledgement of their standing amongst current historical scholarship. Early Modern English herbals were typically of male authorship as seen in the works of William Turner, John Parkinson, John Gerard, and Nicolas Culpeper; and they tended to represent an expression of ‘learned’ medical theory and practice aimed at a lay audience.31 As such, they included not only the information pertaining to botanicals that domestic practitioners would have been already closely familiar with, but also a wealth of varied theoretical

medical content, often humoral or astrological, which was outside the typical domestic purview. The two herbals which the thesis has consulted most widely are John Parkinson’s *Paradisi in Sole* (1629), and Culpeper’s *English Herbal* (1652) as information from both works may be traced in the works of a few domestic manuscript authors, and both hold substantial currency in contemporary historiography. Current scholarship has largely concerned itself with tracing the import of herbals to domestic authors and practitioners, both as repositories, and as arbitrators, of knowledge. The thesis reads against the grain here in looking at some of the problems associated with the use of herbals as resources for their contemporary readers, and by considering the ways in which domestic authors adapted herbal content to better serve the communal domestic practice.

Printed vernacular medical texts aimed at a domestic readership, or ‘home physicians’, are consulted considerably more widely than herbals, as these typically tend to limit themselves to the sorts of information and structuring found in the bulk of domestic receipt books, thus reflecting normative practice. For example, they concern themselves primarily with direct information on the botanicals, as well as including practical information relevant to production and administration of same, and are typically lacking in the humoral and astrological theorems found in herbals. Alongside their content the structure of the home physicians tends to mimic the domestic sources more obviously than the herbals, and they are read largely in this light by the thesis: as printed extensions of a domestic genre. As it is not concerned with schematics of

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transmission, the thesis has not differentiated substantially between the vernacular medical texts consulted here, but freely consults a number of authors, referring in particular to George Hartman and Gideon Harvey’s works as early, influential, examples of the type.\(^{33}\)

Almanacs of both English and American provenance such as John Swallow’s *Almanacke* or Ben Franklin’s *Poor Will*’s have been consulted, primarily in response to their treatment by scholars of lay medical history, and acknowledgement of their impact on popular culture rather than as a result of their obvious or substantial medical content and contribution to domestic practice.\(^{34}\) Almanacs did, however, have a strong practical element firmly rooted in agrarian cultures, which embraced aspects of domestic medical practice, and it is this content area which has been consulted by the thesis. While there are important examples of female authorship of English almanacs, the majority of these sources were written for bi-gendered domestic consumption by men.

Sampling of the almanacs reflects wide reading of examples from across the spectrum specifically for medical content, as well as responding to references in the current scholarly literature. Unlike the herbals, which were read as products of learned medical practice aimed at a domestic audience, or the home physicians which were read as extensions of the domestic practice itself,

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\(^{34}\) Almanacs are annual publications containing detailed calendars with agrarian information including predictive weather forecasts, planting schedules, and a variety of other information; they are considered in detail in chapter 3. John Swallow, *An Almanacke* (Cambridge, 1642); Benjamin Franklin, *Poor Richard’s Almanack* of 1753 (Gettysburg College Special Collections).

almanacs are here considered as expressions of popular culture, bridging both domestic and learned practices.

The thesis has also consulted a body of printed sources which it terms ‘setler texts’ which have been read almost entirely by scholars as a means of gaining ingress into early Colonial social and political life. These are printed books written in part as texts of Empire, looking to catalogue settler experience and the natural phenomena of the new world, and in part as Colonial propaganda, hoping to both entice, and to educate, potential Colonialists.

These works were largely written by male, European adventurers, explorers, and naturalists keen to promote exploration and emigration, men such as John Jossely, John Lawson, the Reverend Andrew Burnaby, and Peter Kalm. They reflected and propagated popular European visions of American settlement throughout the seventeenth- and eighteenth-centuries. Like the almanacs, the primary emphasis of settler texts was neither medical nor botanical in nature,

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36 John Josselyn, An Account of Two Voyages to New-England, 2nd edition (London, 1675); John Lawson, A New Voyage to Carolina; Containing the Exact Description and Natural History of That Country: Together with the Present State Thereof. And a Journal of a Thousand Miles, Travel’d Thro’ Several Nations of Indians. Giving a Particular Account of Their Customs, Manners, &c. (London,1709); Rev. Andrew Burnaby, Travels Through the Middle Settlements in North America, In the Years 1759 and 1760, with Observations upon the State of the Colonies, Edition the Third, Revised, Corrected, and Greatly Enlarged, by the Author (London,1798) original publication London, 1775); Peter Kalm, Peter Kalm’s Travels in North America; containing its natural history, and a circumstantial account of its plantations and agriculture in general (London, 1770).
and also like the almanacs, they had a strong practical element to their content, in this instance providing information vital to successful settlement in the new world. It is this last area, particularly references to those medicines considered of key importance for the survival of the average householder, which the thesis consults. Unlike any of the other printed works, these texts are not offering medical advice per se at all, but rather simply providing lists of botanical agents considered appropriate, indeed necessary, for domestic provisioning. The thesis, again, reads these sources across the grain in accessing this very small portion of information: it is primarily interested here in the listed botanicals, rather than in the wider social and political circumstances or individual lives of the authors.

Chapter One of the thesis considers the communal nature of domestic knowledge and use of plant medicines, establishing the concept of a domestic botanical culture. This culture is then examined as an example of a ‘little’ medical tradition separate from prevailing ‘grand’ traditions of the period. The thesis then considers the composite, ‘bricolage’ nature of this culture, building on current theory surrounding the nature and role of oral cultures in order better to define the body of knowledge and practice as a singular, communal, entity. It is particularly concerned with the female nature of oral traditions, and the role of oral familial transmission in building and shaping the communal domestic botanical culture.
Chapter Two examines the ways and means by which authors and households personalized the communal domestic botanical culture by examining both the shared *materia medica*, and individual variations in adapting and applying that body of botanicals. Scribal sources and cultures are interrogated in order further to establish the shared aspects of this culture, as well as to identify that flexibility of practice which allowed for individualization. Questions of personal expertise, attribution, and possible networks, are addressed in relation to the broader botanical culture represented by scribal sources, focusing particularly on receipt book manuscripts, as a means of strengthening our understanding of the culture’s organic, adaptive nature.

Chapter Three examines the relationship between domestic knowledge of botanicals and wider, popular culture. By examining a range of printed sources available to, and aimed at, a domestic audience, the relative differences between learned medical perspectives and domestic medical practices are explored. Tracing examples of individual recipes across domestic scribal and printed text sources, the thesis identifies areas of shared practice, and aspects of practice which are more typical of the domestic culture.

Chapter Four introduces a framework from which to view the nature of a shared trans-Atlantic domestic botanical culture. The thesis investigates European perception of the new world in order to juxtapose and contextualize this with domestic English adoption of new world botanicals. It further examines both printed and scribal sources, referring heavily to travel writing and those settler texts which provided a domestic audience with lists of those botanicals
deemed necessary for successful domestic settlement. The Chapter finally looks at instances of Colonial communications pertaining to botanicals back to the old world, considering the nature and the role of a continuing 'singular' domestic, as well as a shared popular, botanical culture.

Chapter Five considers four case studies of old world botanicals in order to showcase the inherited and shared trans-Atlantic botanical culture employed by households in both England and America. It looks at particular botanicals representative of certain classes of plant material: flower, berry, and aromatic plant; as well as considering the use of poppies across Anglo-American households. Examination of specific recipes across households illustrates both the continuity and similarity of practice seen across the whole of the practice, but equally establishes its considerable ability to reflect that personal adaptation according to need and circumstance which is a key aspect of the domestic culture as a whole.

Chapter Six examines new world botanicals, again illustrating the complex, shared communal Anglo-American botanical culture by tracing the first, and few, indigenous American plants to infiltrate the English canon in use on either side of the Atlantic. It traces the shared domestic culture here by examining the five case study new world botanicals which are to be found across the domestic Anglo-American canon: guaiacum, sassafras, sarsaparilla, tobacco, and Jesuit’s bark. The Chapter then turns to look at diverging cultures in the eighteenth-century when Colonial sources may be seen to include increased use of a wider range of indigenous North American plants. This
evidence of emerging differentiation is briefly examined in order to further explore the nature of domestic botanical cultures as communally responsive and dependent practices, with the adaptive Colonial canon reflecting a broader breakdown in trans-Atlantic Anglo-American social systems.
Chapter 1. Communal Practices: Domestic Medicine and Oral Cultures

This Chapter traces the complexities of domestic botanical culture, outlining the main criteria differentiating this from learned practice, and considering it as a largely feminine ‘little’ tradition which sits within the ‘greater’, largely masculine, tradition of Early Modern and Colonial medical history. It considers the nature of a domestic botanical culture, looking first at its complex composition and transmission in terms of ‘bricolage’, with the practice reflecting a mosaic of contributors and practitioners, before considering the roles of familial, and communal, networks and cultures in its dissemination. The thesis traces oral traditions, as these are largely representative of the original communal, ‘grass-roots’, and un-archived voice typical of domestic botanical cultures. In so doing, the thesis turns to two primary evidentiary forms of methodology: the first employs extrapolated, or inferred, concepts of traditional practice from known common practice, and is borrowed from anthropological extrapolation methodology, and the second looks for instances where we may glimpse earlier oral practices through a textual veil.\(^\text{37}\) The Chapter is fundamentally concerned with establishing some of the boundaries and criteria by which a ‘domestic botanical culture’ may be defined, focusing on its communal, reflexive, adaptive, non theoretical, and organic nature. It is equally interested in establishing both what the domestic culture itself consisted of, and

those ways and means by which its origins influenced, and indeed, may be seen in both print and scribal sources.

The methodological difficulties in tracing non-elite, irregular (private household) practice has translated into a body of scholarship largely concerned with tracing the transmission of medical knowledge across the professional, and into private, spheres of practice, looking at the assimilation of intellectual theory by domestic authors. If there is any evidence that transmission took place in the opposite direction, whereby common lay practice was adopted by professionals, it will be found in part by tracing how domestic information itself was disseminated and received. As such, we would need to trace the path of specific remedial practice (in this instance of botanical knowledge and use) within both the private and public spheres, and in order to do so, oral, scribal, and textual cultures need to be closely examined. Looking outside of elitist intellectual history, a number of similarities may be seen in the transmission of different forms of information. For example Adam Fox’s examination of ballad transmission and Hull or Wilson and Brear’s consideration of the history of cooking and food share a number of traits: notably, each of these authors refer to the multi-evidential nature of sources, and the need to build a composite

picture of transmission where a preponderance of evidence builds a convincing picture of complex communication routes.\(^{39}\)

Fox writes of the ballad ‘Chevy Chase’ in terms of the difficulty in describing whether it is ‘the product of oral, scribal, or print culture’.\(^{40}\) The comparison between ballad and medical recipe is not necessarily an obvious one, ballads exemplifying ‘popular culture’ active within the public realm, whereas recipes dealing with inherited household medical knowledge were considered and delivered within a private domestic space, yet useful comparisons may be drawn. Both consider the transmission of information which took place in all three cultures: oral, scribal, and print. Indeed, Fox’s observation that ‘the sixteenth and seventeenth centuries … [saw] a society in which the three media of speech, script, and print infused and interacted with each other in a myriad of ways’ reflects as truly upon transmission of domestic medical practice as it does forms of popular culture and dissemination of knowledge.\(^{41}\) In this light, one could reframe the concept of domestic practice within this ‘popular’ context, as one which, although carried out within the private sphere of the home, was widespread enough, both chronologically and geographically, to constitute a ‘popular’ practice. While Fox’s example sees a vaguely scribal, oral and print evolution, it may be that the transmission of information specific to domestic botanical culture generally followed this pattern,


\(^{41}\) IBID, p.5.
but also reflects a more complex tangle of concurrent practices and transmission routes.

In speaking of what constitutes and makes up ‘popular culture’, Burke writes that ‘the elements from which [any one] individual can draw are relatively limited … these elements are combined in stereotyped ways with relatively little attempt at modification – this is the principle of *bricolage*’. In this context, we may define *bricolage* as ‘the construction or creation of a work from a diverse range of things which happen to be available’, and is a theory that may well be applied to Early Modern medical practice and its transmission. For the purposes of the thesis, it suggests an adaptive, non theoretical based approach to medical practice as well as the willingness to use whatever works and is readily available from a wide range of botanical usage. Knowledge of specific indigenous botanical medicines resulted from a manied, complex, layered and inter-dependent, inter-relating series of systems, practices, and methods, a great many of them untutored. This was also probably equally true of the ways and means in which people used botanical medicines, which has been widely considered and commented on in the literature, as well as of the ways and means by which botanical knowledge was transmitted and received. In looking at each mode of transmission, we see that none existed entirely on its own in the dissemination of domestic botanical knowledge, and this picture of ‘untutored’ *bricolage* applies to the patchwork of methods employed.

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The *bricolage* nature of domestic medicine’s ‘little tradition’ meant both that there was a progressive layering and learning taking place (across oral, scribal, and print cultures), but also that there was an adaptable flexibility of practice. An example of the first exists in the ‘proving’ of remedies by individuals, with that approval, as much as the botanical recipe itself, either inherited or passed on via a variety of routes. Secondly, the common nature of the domestic practice was ironically illustrated by the many remedial approaches towards any one given complaint, even within single sources, most of which would have been accepted, and acceptable, to Early Modern and Colonial domestic practitioners generally. For the domestic culture, there was no one right way to approach these plants and their properties; rather practitioners adopted a flexibility of approach capable of responding to the variables of each particular instance of need. Reference to the ‘greater’ tradition of learned medical practice has occurred throughout the thesis in order to establish the parameters of a ‘little’ domestic botanical culture. This in no way contradicts cultural norms for the period, for Early Modern and Colonial trans-Atlantic attitudes towards both lay and professional medical practice were complicated, and often contradictory. Individuals, and communities, felt free to combine consultations with either or both set of practitioners with variable praise and condemnation of each. Equally, a degree of ‘medical’ knowledge appropriation was made by domestic authors, as well as a co-transmission, or

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44 Further consideration of the *bricolage* nature of the domestic culture, particularly in relation to receipt books, occurs in chapter two.


46 The willingness of authors to provide many recipes addressing a single ailment is considered in chapters two, four, and five.
movement of medical knowledge in the opposite direction, from lay, domestic sources into professional fields of practice and dissemination.

Harold Love’s theory of transmission suggests that in some instances the sheer weight and momentum of amassed manuscript material spills over from the private domestic sphere into the public, printed sphere. This may well have happened in the case of domestic receipt books and vernacular printings, particularly in later Early Modern England, where the line between learned women and households and their relationship to learned public thought was blurred. Indeed, this may be interpreted as a sort of escalation of thought, with an elite body of authority ultimately distilled from the accumulation of grassroots practice. Love interprets W.J. Cameron’s work with Restoration verse in terms of ‘the texts … contained in a substantial body of manuscripts can be assumed, in the absence of countervailing evidence in the variants themselves, to derive from single archetypes’, with an inability to draw connections between the various manuscripts on the part of scholars put down to a kind of ‘blindness to the nature and persistence of this culture’. In the case of domestic medical knowledge regarding botanicals, this might be interpreted similarly, where the momentum of common practice and thought eventually becomes so great that it influences scholarship. In this instance, movement of recipes from domestic manuscripts to almanacs and vernacular works may well have occurred in some instances as a result of the sheer bulk of amassed material which is then translated into the more authoritative print medium. The sheer volume of manuscript evidence in this instance is then transformed into established

practice and given weight by its translation, first into the vernacular (almanacs), and then by specialized (medical) texts.

There is a commonality of practice in the domestic sources, however, which speaks to a degree of transmission, if not delineating its manner. Indeed, this blurring of the lines of transmission between oral, scribal, and manuscript transmission neatly illustrates Love and Fox’s assertion of a complex, multilayering of information dissemination. Clearly transmission and reception of botanical knowledge within Early Modern Anglo-American households was a complex, messy business, incorporating the utilization of oral, scribal, and textual means. That printed sources supplemented, and eventually largely supplanted, the oral culture in the transmission of domestic botanical knowledge is equally undeniable. Counihan wrote of ‘the widespread circulation of printed works on cooking, etiquette and household management … at a period when the changing socio-economic structure made mobility, social and geographical’ possible. She also pointed to a dramatic change in the social fabric as contributing ‘in a wider sense, to the weakening of sub-cultures in the society, since the ‘secrets’ of one group were being made public to all others’.48 In drawing attention to the role of printed works in facilitating social change, Counihan highlights their eventual impact on both the loss of domestic botanical knowledge, and of its transmission. Conversely, the emphasis on its demise serves further to draw attention to both the universality and the import of the earlier practice. A high degree of interchange occurred between botanical cultures, and across transmission routes, yet the very mutability of transmission,

and flexibility of practice, seen in domestic sources denotes a unique culture: one that was equally responsive to popular, text-based information, and to individual householders’ needs. It is this *bricolage* nature which determines the ‘little’ tradition of domestic medicine, and which, rather than weakening it, made it resilient and purposeful.

The composite make up of domestic botanical culture, as well as its flexible, adaptive nature, may also be viewed as an entity separate from, though largely related to, the regular, learned medical practice of the period. Peter Burke builds upon Robert Redfield’s theory of concurrent cultural traditions which run parallel through a society, speaking of

> the ‘great tradition’ of the educated few, and the ‘little tradition’ of the rest … the great tradition is cultivated in schools or temples; the little tradition works itself out and keeps itself going in the lives of the unlettered in their village communities … The two traditions are interdependent. Great tradition and little tradition have long affected each other and continue to do so.  

Burke emphasizes ‘what might be called a ‘residual’ definition of popular culture, as the culture or tradition of the non-learned, the un-lettered, the non-elite’. It may well be that non-elite practices, the little traditions such as that of domestic medicine, were more likely to use *bricolage* in terms of their dissemination than their professional, public counterparts. Indeed, Burke describes the relationship between the ‘great tradition’ and the ‘little tradition’ in terms of a reforming of popular culture whereby ‘the systematic attempt by

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49 Robert Redfield, *Peasant Society and Culture*, (Chicago, 1956), pp.41-42, as cited by Peter Burke, IBID, p.50.
50 IBID.
some of the educated … to change the attitudes and values of the rest of the population, … to ‘improve’ them.\textsuperscript{51} He further writes that

in the domain of medicine, a shift in the later eighteenth century in France and Italy from traditional to more scientific arguments and remedies has been noted. On the other hand, the ‘cunning folk’ seem to have remained active enough in the nineteenth and even the early twentieth century in many parts of Europe, surviving the scepticism of the upper classes.\textsuperscript{52}

While speaking of this ‘great’ versus ‘little’ tradition in Early Modern medical practice, Burke is clearly differentiating between both urban, ‘schooled’ traditions and their rural counterparts, but also between ‘learned’ and ‘lay’ traditions; that is to say, between the practices of professional physicians, barber surgeons, apothecaries and the like, and those of lay herbalists, tooth pullers, sooth sayers, and others with no formal education. The consideration of a social shift away from lay practice towards a professional one coincides with increased popularity and access to print culture, and the two may well be usefully viewed in relation to each other. This would fit nicely with a move away from that messy \textit{bricolage} system which embraced a wide variety of dissemination channels informing a plethora of practices across society: not only does a society become reliant on a single primary form of medical practice, but that practice becomes increasingly reliant on a single method of transmission. Ultimately, access to common printed texts fed into, and reflected, a homogeneity of knowledge and practice surrounding medicines in both professional and lay practices, eroding differences between the two.

Equally, that this occurred concurrently with better training of, and increased

\textsuperscript{51} Peter Burke, IBID, p.289.
\textsuperscript{52} Peter Burke, IBID, p.332. Ramsey (1988) and Pastore (2004) wrote about this phenomenon in Italy, and Mandrou (1968) examined it in France. Mandrou was criticised by Certeau (1969) ‘for making too sharp a distinction between learned and popular culture’.
access to, medical professionals, ensured that the more linear transmission route of progressive printed text prevailed over the composite domestic practice. In terms of the domestic botanical culture, reliance on print within households may be seen to coincide largely with its common demise.

Ehrenrich and Weber’s examination of male versus female authorities may be viewed here in terms of a professional versus domestic authority whereby female authors disseminating within the public sphere may be viewed as professionals asserting an elite authority as well as adopting a masculine voice. For example, Weber notes that both Sarah Jinner and Mary Holden considered themselves ‘students’ of medicine, equating this to the current concept of ‘scholar’. In many ways this assertion of authority harks back to earlier female claims to personal association with elite masculine knowledge and status, as well as presaging female practitioners to come. There exists substantial evidence supporting this comparative model. And there is no doubt that Early Modern and Colonial cultural norms dictated a substantial, and meaningful, difference between the professional practice of physicians and the domestic practice to be found in most homes of the period, as do our own cultural norms. Indeed, there is a typical social assumption in the medical traditions of western Europe and the European Americas that professional

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55 A.S. Weber, *IBID*, p. 374. Weber cites Dorothy Meads’ account of Elizabeth Grey’s practice, Pollock’s work on Mildmay, and Leong’s consideration of Freke, so much so that Weber applauds Elizabeth Grey as being ‘widely noted for her skill as a physician and apothecary’ before stating of Mildmay that she practiced ‘far beyond the kitchen physick of her day and in fact was an extremely knowledgeable practicing physician’.
practice is of a substantially more skilled and demanding nature than that of the
domestic practice. This assumption may be seen in writings across the period.
For example, James I’s tirade against empirical physick may be read as an
altogether typical ‘popular’ expression of dismissal towards the untutored
practice of medicine, with its clear association with women and women’s
medical practice: ‘I pray you, what foolish boy, what sillie wench, what olde
doting wife, or ignorant countrey clowne, is not a physician for the toothache, for
the cholicke, and divers such common diseases’. Yet this statement is at
odds with similar messages regarding the role of empirical ‘physic’, the practice
of women, and non theoretical medicine in the public sphere. Allowing the elite
voice of James I to represent at least something of what we currently know of
‘popular’ culture, that is to say, of sentiment expressed and espoused in the
public sphere, we might equally look to the public messages of other public
figures, on both sides of the Atlantic. Indeed, public antidotes to James’
seventeenth-century tirade against unlearned, empiric medicine as
administered by any one ‘sillie wench’ or ‘doting wife’ may be traced back to
Henry VIII’s ‘Quack’s Charter’ of the sixteenth-century where the rights of
‘every Person … having Knowledge and Experience of the Nature of Herbs,
Roots, and Waters, or of the Operation of the same’ to practice medicine are
enshrined in law, or, indeed, equally seen in the eighteenth-century gentle
approbation to be found in personal letters and journals such as those of John
Adams and family. Clearly appreciation for the ‘little’ tradition of empiric
medicine generally, and its use by women specifically, provoked a range of

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57 Henry the VIII, The Herbalist's Charter, 1543.
emotion; what is of little doubt is that this provisioning was both common and commonly consulted.

Jan Vansina’s adaptation of an anthropological approach to oral culture considers the ‘esoteric’, or informed (possibly ‘learned’, though this would not necessarily include or imply bookish study), nature of successful oral transmission. This may almost be interpreted as arguing for an elitist role within the domestic sphere, whereby specialist medical knowledge is held and transmitted by a particular individual or individuals, ‘either by training people to whom the tradition is then entrusted, or by exercising some form of control over each recital of the tradition’.

Vansina differentiates between oral culture or ‘tradition’, and the simple, ordinary, everyday oral transmission of information. Here, the definition for an oral culture consists of ‘verbal messages which are reported statements from the past beyond the present generation’ with an emphasis that ‘there must be transmission by word of mouth over at least a generation’. In some ways, what Vansina is describing here is different from an oral ‘history’, that is to say, a narrative retelling of how things were transmitted across generations, though oral histories may well be an example of oral traditions, or cultures. Indeed, the oral instruction passing on specific technical and practical knowledge (agricultural, culinary, or in this case, relating to the production and use of botanical medicines) does not reflect the traditional ‘history’ of a people as such, looking at the events and circumstances experienced by them, but rather reflects their practice, and thus tells us something of how they experienced and moulded their lives. Indeed, Vansina

59 IBID, p. 28.
addresses this, pointing to J.C.Miller’s restrictive definition of oral traditions as those which relate solely to ‘conscious historical statements; [whereby] the person who tells them wants to communicate the past to us’ commenting instead that ‘much can be learned from the past from oral sources that are not concerned with the past and hence testify despite themselves’.60

Vansina clearly distinguishes between oral and written evidence as entirely separate entities, noting that our awareness, and understanding, of oral traditions is entirely based on their ‘reported’ nature. While current work in anthropology, sociology, and oral history may well have access to actual oral testimony, historians concerned with the examination of more distant periods are reliant on textual versions of ‘reported statements’, thus blurring the line between oral and written source. Peter Burke addresses the impossibility of direct extraction of oral testimony for many historians, comparing it to the relatively easier, and more rewarding, solicitation of modern historians: ‘the information we possess on the techniques of divining and folk-medicine in France or Norway or Yugoslavia is incomparably more detailed for the twentieth century than for earlier periods’.61 Burke further notes that our methodology may be, in part, at fault, writing that ‘historians whose sources consist of fragmentary texts have a lot to learn from folklorists and anthropologists whose sources are living people, who can be observed at work and even questioned’. On first reading, this passage seems to fail to recognize and address the initial point that historians, in researching the past, do not typically have access to actual voices, but it may actually simply be suggesting a more lateral, generous

reading of what evidence we do have. Although we cannot audibly reconstruct the Early Modern domestic voice, we can perhaps borrow on the methodology of the social sciences to build an approximation of same by combining existing current oral testimony of domestic practice and usage with period-derived textual sources. For example, Carole Counihan notes that what we know of culinary recipe exchange illustrates the complexity, both of the female social transmission systems in play here, but also between individuals and groups, as well as oral and written dissemination more broadly. She writes that

in the social interaction that characterizes these … families, women verbally exchange recipes with one another across regional boundaries and are eager to experiment with them. The oral exchange of recipes is, from the technical point of view, the elementary process that underlies the production …of cookbooks. In many of the introductions to these cookbooks, the authors thank women they have known in various metropolitan contexts for sharing recipes and skills.62

Devolving from the initial, largely amorphous, nature of oral transmission, recipes printed in cookbooks, or written in Early Modern manuscripts, themselves become the subject for further exchange amongst women, both verbally and via correspondence. The anthropological approach which allows for a reasonable assumption of the continuance of practice based on extrapolation that what we currently see in terms of domestic exchange and transmission of recipes also reflects historical domestic practice.

Further, a close reading of cultural works produced by, and largely reflecting, a period provides clues to its oral traditions. Kate Giglio’s work examining Spenser’s portrayal of sixteenth-century female medical practitioners, for example, hints at the oral nature of feminine practice. Both

Giglio’s concern with Spenser’s ‘fluctuating opinion of admiration and derision towards the] oral tradition of medicine and its female practitioners’ and the very fact that Spenser chronicles this particular phenomenon are of interest here.63

Equally, the role of women and women’s role in delivering medicine, and its basis in oral transmission, was both noted, and commented upon, in the learned masculine medical literature of the period. For example, Gerard’s *Herball* (largely produced for a domestic audience), warns of heeding information originating from ‘old wives’, while Parkinson wrote that

> Many idle tales have been set down in writing, and delivered also by report,… and have been tolerated by the Chief magistrates … notwithstanding that they have been informed that such practices were mere deceit and insufferable.64

Adam Fox also notes both that oral transmission of medical knowledge was widely acknowledged by popular culture in the Early Modern period, and that it was treated in this mixed fashion: being equally assimilated and denigrated by male authors.65 For example, John Aubrey writes of how

> old customes, and old wives fables are gross things: but yet ought not to be quite rejected: there may some truth and usefullnesse be elicited out of them: besides ‘tis a pleasure to consider the errours that enveloped former ages: as also the present.66

Moreover, Aubrey’s account allows us to reconstruct the process of oral transmission via direct textual accounts. Not only did Aubrey write very specifically about oral traditions and their possible value, but also he clearly had a particular interest in female narratives. Robert Boyle noted Aubrey’s

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confession that he ‘not disdain to learn from ignorant old women’, and, as with other Early Modern male authors, Aubrey’s mixed attitude towards these female sources is notable, and complex. ⁶⁷ He writes of one possible pathway of transmission, originating in this instance from a learned male domain of knowledge:

& no question many fryars (whose names & many of theire inventions are buryed in oblivion) found out many good medicines, which they did communicate to theire friends & Penitents (especially the good women) whose Daughters have handed downe many to this age, that doe admirable cures. ⁶⁸

Fox writes further of how in the Early Modern period the ‘environment all around us was also the source of an immense amount of medical lore with which it was expected that every housewife would be conversant and pass on to her daughters’. ⁶⁹ Clearly the role which oral transmission played in the dissemination of knowledge and skill, for example, in the understanding and making of domestic medicines, is intimately tied up with a question of ‘expectations’, or Early Modern concepts of social duty, as well as with the larger idea of a shared communal knowledge transmitted via ‘lore’, a concept which has been developed by Carol Counihan in her examination of culinary recipes. ⁷⁰

Counihan again employs methodology whereby a practice is inferred on a like for like basis between similar social groups, and speaks further of the ‘concrete context’ of oral transmission which stresses ‘the relation of teacher to

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⁶⁷ Boyle vi, 544 as cited in Dragstra, p.41.
⁶⁸ Attributed to Aubrey’s lost work, Adversaria Physica in Robert Plot’s Analecta, cited by Henk Dragstra ‘Before Woomen were Readers’, p. 42.
⁷⁰ IBID, ‘the environment all around was also the source of an immense amount of medical lore with which it was expected that every housewife would be conversant and pass on to her daughters’. 
pupil, e.g. of mother to daughter ... for oral learning tends to reduplicate the
“initial situation”, the process of socialization’. Undoubtedly this familial
transmission commonly occurred in homes across the social and geographical
strata, at least to some extent, bringing us back to Adam Fox’s comment that
‘every housewife would be conversant with the knowledge and use of botanical
medicines, and would also further transfer this information on to her
daughters’. In this regard, instructing young women as to the preparation and
use of botanicals would have been a vital part of the process tied to learning
how to ‘manage’ (elite and middling sort families) or ‘keep’ (middle to labouring
households) a home throughout the Early Modern period, and this instruction
would have continued to be implemented primarily via oral means, in the
garden, the kitchen, and the sickroom. Indeed, John Aubrey referred to this
particular route of information as part of a larger train of transmission in his
Wiltshire Antiquities, where he notes the specific transference of stories ‘derived
downe from mother to daughter’ in his Natural History and Antiquities of the
County of Surrey. Fox also notes that Early Modern women were ‘frequently
custodians of family history and were responsible for its transmission’, as they
undoubtedly were of the family’s domestic knowledge and practice. This role
of mother/daughter, familial transmission is noted by numerous authors in
numerous texts. The oral nature of transmission here is clearly a female one,
relating back to the female sphere of domestic agency which first produced the
domestic botanical culture.

72 John Aubrey, The Natural History & Antiquities of the County of Surrey; Begun in the year
1673 (5 Vols, London, 1718-19), iii, 366-67 as cited by Adam Fox, Oral & Literate Culture in
Referring back to Burke’s idea of the ‘great tradition’ and the ‘little tradition’, Counihan’s consideration of the history of cooking looks at this division of traditions in light of geographical, specifically ‘urban versus rural’, necessities while Barry Reay describes the primary social categories in terms of economic divisions, using the terms ‘respectable’ and ‘rough’ to refer to the middle class professions and the labouring classes. For Counihan, there is a clear urban versus rural divide:

literate cooking is constraining (if one follows the book) ... partly because, as in the case above, it often provides instruction (“programmed learning!”) for individuals who do not themselves know how to prepare the dishes. In the town, where children spend a large part of their time at school and are not required to make a great contribution to the house or garden, individuals often learn cooking indirectly from books rather than directly from the familial setting. Such a process necessitates “following a (written) recipe”, rather than learning by participation i.e. by oral means.

The possible dualistic nature of oral versus scribal cultures at the end of the middle ages and beginning of the Early Modern period, lends itself to very particular, and interesting, implications where botanicals are concerned. Reay writes of Keith Thomas’ work looking at rural populations that

the agricultural workers of our [the Early Modern] period had a large vocabulary which enabled them to draw subtle distinctions between various kinds of flora and fauna. They had a detailed knowledge of the natural world – often highly localised – which could be handed on from generation to generation. There were, for example, some fifty different names for the marsh marigold.

There is a real relationship between rural peoples and the plants which they employ: so much so that the Early Modern mind often perceived a connection

between the two. Aubrey writes of this relationship between local diet, including indigenous dietary herbs, and character:

In North Wiltshire, and like the vale of Gloucestershire (a dirty clayey country) the Indigense, or Aborigines, speake drawling; they are phlegmatique, skins pale and livid, slow and dull, heavy of spirit: hereabout is but little, tillage or hard labour, they only milk the cowes and make cheese; they feed chiefly on milke meates, which cooles their braines too much, and hurts their inventions. These circumstances make them melancholy, contemplative, and malicious; by consequence whereof come more law suites out of North Wilts, at least double to the Southern Parts. And by the same reason they are generally more apt to be fanatiques: their persons are generally plump and feggy: gallipot eies, and some black: but they are generally handsome enough. It is a woodsere country, abounding much with sowre and austere plants, as sorrel, &c. which makes their humours sowre, and fixes their spirits.  

Of course sorrel and other ‘sowre and austere’ plants are by no means confined to Wiltshire (indeed wood sorrel may be found across all of England); rather it is Aubrey’s association of it and its consumption which is interesting here. Further scholarship examining the role of locale on perception, understanding, and usage of botanicals is needed, for it is entirely possible that there are real differences to be uncovered here, particularly in terms of transmission with a greater reliance on simple oral dissemination to be found in rural, labouring households, and an increasingly complex form of *bricolage* embraced by urban, middle class households. Here Aubrey’s fusty ‘Aborigines’ might well represent a sort of little tradition within the greater ‘little tradition’ of domestic practice as a whole.

This association of rural and urban with little and grand traditions is one of many readings of the subaltern practice in relation to the prevailing culture,

however. Equal to geographically defined social groupings are chronological, gendered, and status derived parallels, suggesting that a dualistic reading of Early Modern society (and transmission) is overly simplistic. John Ray wrote in the introductory letter addressed to John Aubrey at the beginning of the latter’s *The Wiltshire Antiquities*: ‘Neither is yr observation universally true that the sons of labourers and rusticks are more dull and indocile than those of gentlemen and tradesmen’, clearly indicating that for some, at least, there was a recognition that intelligence and ‘wit’ were not the sole province of any one social group or peoples.\(^7\)\(^8\) While Aubrey may lay himself open to criticism by his peers for his dismissive and patronizing attitude towards ‘yokels’, he is by no means unaware of the value and role of transcribing oral traditions, writing that ‘I know that some will nauseate these old fables: but I doe profess, to regard them as the most considerable pieces of Antiquity, I collect: and … that they are to be registered for Posterity’.\(^7\)\(^9\) Further, although Aubrey ostensibly places women: their relationships, networks, and transmission of knowledge, that which is ‘derived downe from mother to daughter’, alongside ‘fusty Aboriginals’ and ‘yokels’, he also speaks of their knowledge of ‘many good medicines’.\(^8\)\(^0\) That Aubrey perceives a rich complexity here between unlearned women, provincial knowledge of botanicals, and the richness of inherited wisdom and practice, is clear.

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**Learned and Lay Practices: Medical Cultures of the Home.**

\(^7\) John Aubrey, IBID.  
\(^8\) John Aubrey, *Monumenta* i, 66 as cited by Dragstra ‘Before Woomen were Readers’, IBID.  
Much of current historiography in the field of domestic medicine focuses on the assimilation of elite medical theory and knowledge by some lay householders. What has yet to be considered and discussed in the same depth is the more elusive social history surrounding a non-elitist, unprofessional, largely non-theoretical domestic knowledge, one which does not reflect back on the intellectual theories of the day. In part, the lack of scholarship relevant to the domestic practice reflects pragmatic concerns. As is the case with academic inquiry focusing on thought and practice within the domestic sphere more generally, what evidence we have is by its nature more isolated, private, and difficult to discover than learned practice, theory, and writings, and in many instances, possibly no longer extant at all. Pollock has touched on this, writing that ‘Galenic, Paracelsian and astrological medicine were all ‘book’ systems’ while

… in practice the most significant influence on medical practice was likely to be folklore, passed on down the centuries from generation to generation. This consisted of long-established common-sense remedies gained from experience in treating the sick, knowledge of plants and herbs, and ritual healing.81

Indeed, both the anecdotal knowledge contained within ‘folklore’, and the empirical knowledge of ‘experience’, produce little concrete evidence; and the means of ingress into any non-theoretical practice and its dissemination often prove elusive. Those channels employed by domestic botanical culture were likely to have been poorly catalogued, oftentimes oral or scribal in nature, and largely private and individual, making consistent evidence of its transmission more difficult to find and interpret than that reflecting learned practice..

Porter also referred to a certain degree of bias on the part of historians, writing that ‘academics have traditionally made ‘learned medicine’ or ‘scientific medicine’ their study’ before going on to state how common sense suggests that the elements indispensable to the enterprise of medical popularisation are a body of authorized medicine; doctors or writers eager to undertake the work of spreading it; a medium of diffusion, be it printed book, flysheet, handbill, pamphlet, or newspaper column; and finally, a literate audience keen, prepared, or possibly compelled to imbibe such publications.82

A number of assumptions are being made here, not least that what was accepted as ‘medical practice’ by the majority of people throughout the Early Modern period consisted of a regular, elitist form of medicine, and that the movement towards ‘popularisation’ which gathers momentum and force over the period is driven largely by this ‘intellectual’ medical practice. If this is the case, then there may well be little need to, or indeed interest in, examining medical practices outside of this authoritative medium. Yet non-authoritative practice, particularly a widespread, common, and relatively successful domestic practice, also played a role in later medical popularisation, and the thesis examines transmission theories associated with oral, scribal, and print cultures in the hopes of redressing the current imbalance in the literature.

Intellectual history may be seen as belonging to the people and culture of a period, and its transmission and dissemination may be indicative of that society’s infrastructure, not only of its strata, but also in terms of the material culture providing a foundation for it. Examples of this range from educational systems providing individuals with the means to receive and communicate

complex thought, through courier systems capable of moving correspondence from one individual to another, to means of mass producing, storing, and disseminating information (scribes or presses, libraries, schools). It could be argued that those practices which occurred in private households, however, may be equally indicative of a society’s perception of itself and its individual members, as well as providing important information regarding supply and demand, provision and reception of both practice and goods. Scholars have provided convincing arguments for the demand and supply which predicates a necessary domestic medical provision across the breadth of the long Early Modern period, based equally on demographic and geographical consideration as well as manuscript evidence of actual practice. If this domestic practice was not only widespread, but indeed likely to have been virtually universal, and if there are consistent, common threads in its practice and dissemination across both the geographical and chronological fields, it becomes evident that that practice must have played an important role in the social perceptions and practices surrounding both medicines and ‘the medical’ more generally, even to the extent that the lay practice may claim to have influenced the intellectual and professional.

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83 A number of authors have examined this in depth, notably Doreen Evedon Nagy, Margaret Pelling, Lois Magner and Roy Porter. Nagy, in particular, examines the impact of geography and economics on early modern popular medicine in detail in the first two chapters of her _Popular Medicine in Seventeenth-Century England_. Pelling, Magner and Porter use the demographic statistics to build a highly complex picture of early modern medical provision in general, including not only that of the domestic practitioners and of physicians, but also of a range of professional and other commercial providers (barber surgeons, apothecaries, herbalists, etc.). Evedon Nagy, 'Lay & learned medicine in early modern England', _Health, disease and society in Europe 1500-1800_ p.43. Margaret Pelling, ‘Medicine: trade or profession?’ _Health, disease and society in Europe 1500–1800_, pp.32, 25; Lois N. Magner, _A History of Medicine_, (NY: Marcel Dekker, 1992), pp.217-218; Roy Porter, _Disease, medicine and society in England_, pp.11 & 14.
Typically, historians have viewed Early Modern and Colonial botanicals and botanical prescribing as a largely homogeneous entity, with differences really only occurring between the bigger, well documented, and contentious differences in elite theory and doctrine. On closer examination, however, we see substantial differences between female, domestic and male, professional prescribing in terms of what agents are listed and employed within their respective materia medica, with these differences clearly reflecting greater differences in the medical cultures as a whole. This is particularly true in terms of the underlying rationale for prescribing medicines, as well as in the medical canon employed. In the first instance, domestic prescribing tended to be based on a common, inherited, anecdotal basis which was then augmented by the practitioner’s empirical observations and experience in treating patients, whereas the learned medical model typically referred back to either humoral or astrological theory. Direct comparisons between theoretical learned writing and non theoretical domestic prescribing between learned and domestic sources, and across the span of time in question, bear this out. For example, the 1621 definition of ‘diacodion’ in the medically authored An English Expositor contains only the most basic of information about the preparation’s makeup and production, being primarily concerned with the medicine’s humoral nature: ‘Diacodion. A cold sirupe made of the tops of poppies, vsed in phisicke sometime against hote diseases, and to stay the falling downe of humours out of the head.’ In comparison, Mary Faussett’s later recipe for ‘Surup of

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84 As is considered, for example, in Rebecca Tannenbaum’s analysis of recipes from Dr Palmer’s and the Brigham manuscripts, below. Rebecca J. Tannenbaum, The Healer’s Calling, Women and Medicine in Early New England, (Ithaca: Cornell University Press, 2002), p.7-8.
dicordiam’ written in either the late-eighteenth or very early-nineteenth century, England, contains information relating to preparation, dosage, diagnostic use, and shelf life:

Surup of diacodiam
Take 3 ounces of black popy heads or 4 of white bruse ym & put to ym 3 pints of boylng water yn strain it of & add 3 pound of 8 peny sugar, let it boyle abotte an hower & it will be a pretty thick surup, for a child in ye mouth a large tea spoonful, & for one of 3 or 4 years old a child’s spoonful, for a woman grown 2 large spoon=fulls given att night when they goe to bed its good to be given when children are bad with breeking of teeth or for any little fever but not soe proper in a violent one … [you must] let your popys infuse 3 days after you have put the water to yt firing it severall times a day, this diacodiam will keep 7 year.86

While the Expositor’s definition is not ostensibly intended to be read as a medical treatise per se, it clearly places the botanical within a humoral context and framework. Faussett’s recipe, on the other hand, provides a wealth of information, showing both diagnostic and prescribing differentiation as well as preparation skills and familiarity with issues surrounding storage, longevity and remedy effectiveness, all without any reference at all to a theoretical model. This is a working, practical receipt based on anecdotal and empirical evidence and experience as opposed to the theoretical content seen in the Expositor, and typical of learned sources generally. Moreover, the theoretical context of the Expositor is authoritative and directive in tone, while the domestic remedy is conversational and intimate. The first reflects the overarching authority typical of printed sources, the second reflects the domestic culture’s oral foundations.

Further, the ingredients of professional and domestic remedies may differ, reflecting different modes of transmission. ‘Learned’ recipes often reflect the latest thinking in prevailing professional practice, and are quick (or quicker)

to pick up on theoretical and practical changes communicated through contemporary print. For example, the list of ingredients typically to be found in the learned canon includes far more chemical and animal products and recipes than seen in the domestic receipt books. Non-botanical ingredients are regularly prescribed and advocated by medical practitioners, often in distressing combinations and unhealthy doses, as seen, for example, in a Dr Thomas Palmer’s recipe cited in Rebecca Tannenbaum’s *The Healer’s Calling*, which is based on the topical use of white lead. This is not to suggest that domestic authors never used either, indeed there are numerous examples of snails, toads, swallows and earthworms, not to mention various forms of lead and mercury, in domestic sources. However, these ingredients appear in a very small number of receipts, within a minority of the domestic manuscripts: they are atypical and non-representative of remedial agents in domestic use.

Dr Palmer’s lead-based recipe is of interest as Tannenbaum compares it directly to a domestic recipe from the medical receipts of the Brigham family of Massachusetts, concluding that the two are largely like for like with the exception of the Doctor’s learned embrace of Paracelsian prescribing:

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Take a pounde of boares grease 8 handfulls of Sage, a pounde of fresh butter, chope ye sage small, & set all on ye fire, with 4 ounces of wax & let boyle … [Brigham receipt]
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Rx. Fresh butter, oyl of roses, of each 1 oz … [and] white lead, washed, grind them in a mortar for an unguent. If ye pain be vehement, take the yolk of an egg, oyle of roses, Juice of poppy or henbane. [Dr Palmer’s recipe]
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Both recipes use herbs, and both make ointments out of household ingredients like butter and eggs. Palmer’s recipe calls for lead, showing a familiarity with Paracelsian medicine that the Brighams did not have. Other than that, the recipes are very similar.\textsuperscript{88}

Tannenbaum’s reference to ‘Paracelsian prescribing’ refers specifically to the inclusion of white lead, and infers that the primary difference between professional, learned, medical practice and lay, domestic, medicine lies in the willingness of the latter to embrace chemical agents as medicines. While this difference is indeed key (and altogether typical of learned versus lay prescribing), there are substantial, and important, differences in each remedy’s choice of herbs. The lead-free, Brigham recipe uses a simple compound ointment of sage, which is strongly astringent, while the Palmer recipe combines lead with rose, a carminative relaxant, as well as calling for the narcotics, poppy and henbane. When applied topically, the sage-based Brigham ointment might be expected to bind weeping tissues and reduce inflammation, and would be particularly indicated for the treatment of wounds. It is a fairly innocuous botanical preparation with no likely side-effects. The more complex rose, poppy, henbane, lead ointment, on the other hand, has clear relaxant, analgesic properties relevant ‘if ye pain be vehement’, but unlike the Brigham recipe the Palmer ointment is potentially dangerous: while the butter and rose oil are entirely safe agents, the lead, poppy, and henbane are not. External exposure to lead produces heavy metal poisoning affecting virtually all internal organs as well as bone and nervous system development and growth, while both the poppy and henbane are strong, potentially addictive, plants, and

both, in quantity, possess narcotic qualities which in large enough doses are capable of relaxing smooth muscle to the point of arresting cardiac contraction. Indeed, contrary to Tannenbaum’s analysis, apart from the fact that both recipes are for ointments and contain ingredients of plant origin, they are entirely different. Palmer’s lead and narcotic based ointment clearly illustrates that learned practitioners were not only more likely to use non-botanical ingredients in their medicines than were women in the home, but they were also more likely to use plants with extreme, and potentially dangerous, effects. Nor is Palmer’s recipe an unusual example of learned prescribing. On the contrary, virtually all learned texts (with the exception of the herbals) show evidence of Paracelsian prescribing, with numerous recipes combining plant and heavy metal ingredients, and while there are certainly domestic practitioners using non-botanical ingredients, including lead products, these are relatively rare and not representative of the majority of domestic remedies, or indeed, the majority of domestic authors. This reflect back on the nature of transmission between cultures: the learned practice is more concerned with questions surrounding advancement of knowledge and practice, and is relatively quick to embrace new remedial agents which are perceived to be powerful and effective, while the domestic culture more steadily reflects inherited practices, domestic resources, and the individual practitioner’s perception of efficacy.
In a letter to her son, Anthony, Anne Bacon writes regarding his brother’s gout, noting how ‘your brother nich towld me my cousi kempe as he lately towd me that one tyme at the end of his gowt’, neatly demonstrating not only a scribal culture of maternal instruction, but the busy oral communications preceding, and couched within, it.\(^8^9\) Bacon is clearly concerned for those whom she perceives to be within her sphere of care, admonishing Anthony further to ‘take hede I pray yow how yow do all your phisick practises’, and in another letter, ‘do what you can to expel the gowt by diet & seasonable sleeping use not your self to be twanged a slepe but naturally it wyll grow into a tedious custome & hinder yow much’.\(^9^0\) That Bacon speaks to her sons, as well as writing to them frequently with her great store of maternal advice, is documented within the letters themselves: the oral giving birth to the scribal, and evidence of domestic medical concern in each. And evidence of the ‘oral in the scribal’ is not limited to epistolary sources; indeed, an American ‘oralicity’ derived from scribal sources is as complex as the inherited practice and transmission routes witnessed in these epistolary sources.\(^9^1\) For example, Elizabeth Coates Paschall of eighteenth-century Philadelphia regularly attributes remedies to friends, including one ‘For a Fellon’ given to her by ‘Susannah Fowler an old Acquaintance of mine from her Childhood & a person of Good Reputation’. Yet

\(^{89}\) LPL.ms.653 fol. 362: Lady Anne Bacon to Anthony Bacon, n.d.  
\(^{90}\) LPL.ms.651 fol. 206: Lady Anne Bacon to Anthony Bacon, 16 June 1595. The business of mothers offering medical advice to kin is not confined solely to Bacon, though her efforts have been well catalogued: Brilliana Harley, Lady Grace Mildmay, and Lady Horrington have all also left epistolatory evidence of maternal medical advice, as noted in several papers delivered at the 2011 Cultures of Correspondence Conference, Plymouth. Of particular note was Johanna Harris’ examination of Brilliana Harley’s advice in ‘The Material Letter: Lady Brilliana Harley and the Literature of Advice’, Gemma Allen and Katy Mair’s consideration of Anne Bacon’s authority in ‘Women as Counsellors in Sixteenth-Century England: The Letters of Lady Anne Bacon and Lady Elizabeth Russell’ and ‘Material lies: parental anxiety and epistolary practice in the correspondence of Anne Lady Bacon and Anthony Bacon’ respectively.  
\(^{91}\) Attribution and the relationship between ‘learned’ and ‘lay’ knowledge, in both English and colonial manuscripts, is more widely considered in chapter three.
she also clearly identifies more complex routes of oral transmission, writing that she

was Informed By a High German who had a Nail Run rite through his hand … whereof I Saw which was perfectly well. Except the streak. that the accident hapned butt three Days before which Made me verry Inquisitive  about the Cure. Because he was his own Docter, Said that he applied no Other Medicine Butte the one out of his own.  

For each of these domestic authors, the implication of an intimate oral exchange is either specified or implied. Indeed, their written work, and its value, is largely predicated by an implied association with its oral association: these are communal and communally recognized and accepted remedies, as ‘proven’ by their association with verbal exchange.

Early modern English and Colonial American domestic botanical culture was largely a feminine ‘little’ tradition running concurrently alongside the well-studied ‘great’ tradition of learned medical practice. It was derived from, and expressed via, a complex transmission network, with its roots firmly anchored in oral traditions. Its basic composition may be viewed in terms of ‘bricolage’, with a number of discrete practices building a larger collective culture. It consisted of a shared *materia medica*, which allowed for a great flexibility and individualization between practitioners and households. It was largely familial, and entirely couched within individual communities. By employing a range of methodologies, the thesis has begun the process of establishing domestic botanical cultures within these oral and familial cultures by extrapolating concepts from known common practice back onto traditional practice, alongside reading instances where earlier oral practices are more directly referred to in

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text sources. By introducing the domestic tradition in terms of its ‘bricolage’
nature, and defining it as a little tradition in the context of prevailing professional
practices, while outlining its likely feminine, oral roots, Chapter One has
established a basic framework for a domestic botanical culture. This foundation
is then further explored, and delineated, in terms of its scribal expression and
relationship to printed text in Chapters two and three.
Chapter 2. Scribal Cultures: Individualization of Communal Practice

This Chapter examines domestic scribal sources as a means of gaining direct, and meaningful, ingress into how domestic authors and practitioners employed, shared, and demonstrated knowledge of botanicals, in order to more fully understand the individualized expression of the communal botanical practice outlined in Chapter One. One aspect of the broader domestic practice feeding into the botanical culture was a readiness and willingness on the part of householders to engage with medical matters in general. Indeed, this engagement predicates their use of botanicals, and as such is a defining, if silent, aspect of the culture itself. If the domestic botanical culture may be seen to have had its origins in oral traditions, its practice was commonly expressed in scribal form, and any full understanding of the culture must therefore refer back to written sources and their authors. Receipt books play a critical role in fleshing out our understanding of a domestic botanical culture in that they constitute the single most substantial body of source material dealing directly with those botanicals in Early Modern household use. Ancillary scribal sources such as correspondence and journals supplement this considerable body of evidence, illustrating the complexity of the knowledge base, its transmission, and those networks employing it. The question of domestic authority and agency is also examined here as a means of furthering our understanding of the unique domestic culture supporting the Anglo-American domestic botanical culture. The ability of women to cast a critical eye over recipes, appropriate and adapt preparation instructions, and differentiate in diagnosis, all speaks to the

93 This individualization of the common culture is developed further in chapters four through six.
personal relationship authors held with the botanicals they employed. Moreover, receipt books and other forms of household scribal evidence are of value not only in listing herbs, but in placing them within the context of remedial preparations and preparation making, illustrating the common uses of botanical medicines, and illustrating typical formulae found in domestic recipes.

As noted in Chapter One, our knowledge of the domestic botanical culture is derived primarily from scribal sources, including instances where medical advice was readily meted out by mothers in correspondence with their children. Along with Anne Bacon’s instructions to her sons regarding the treatment of their ‘gowt’, epistolary evidence of maternal medical advice may be found in the writings of Lady Grace Mildmay, Brilliana Harley, and Lady Katherine Ranelagh, for example. Nor was familial advice by any means limited solely either to English women, or to that of mother towards child: the future Presidential wife, Abigail Adams, wrote to her husband on several occasions with advice. For example, she frets in a letter of March of 1797 that

I have felt very anxious about your cold. I wish you to get a portion of Rhubarb and calomel, and take. If you was to repeat it, in the course of 5 or 6 days it would be of service to you at this season of the year, when you usually require some medicine of that kind, and the more so as you will not so early get your annual ride and which the grievous for the time, was never the less salutary.

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95 MHS.mS.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 8 - 10 September 1775.
Clearly Adams felt confident both in her long-distance diagnostic skills (at least where her husband is concerned) and her prescriptive knowledge. Again, in a letter dated some twenty two years later, she wrote to John that

*I will come however and Nurse you, and submit to any inconvenience. If you do not soon get better, you must get some oxemal squills, and take two Teaspoon full in any tea drink of Hysop or Sage, or Balm at Bed time. Has William escaped a cold.*

While the previous year, John had written to Abigail on Christmas Eve to inform her during his absence both of his ongoing state of ill-health, and of his attempts to self remedy, saying that his health would be no better for your being a witness of any Pains of Acks I might have. I have had recourse to an old medicine, Sulphur, Cream of Tartar and honey which has done me more good than Lockier or Rush. I Sleep well, appetite is good, work hard, Conscience is neat and easy. Content to live and willing to die.

Personal references to malady and medicine abound in both English and American correspondence. For example, in 1697 Elizabeth Savage wrote of their daughter’s ailments from her home in the Virginia settlement to her husband, Francis Nicolson, travelling in England; ‘ye Little Queen of virginne has been never free from a Cold since she Came to towne: wch makes me wishe my self in ye Country againe where I hope to be in March’, while over a century later, Maria Randolph’s letter written from her home in Williamsburg and addressed to ‘Betsey’ speaks of how

*This wet weather has brought along with it a of evils for me – I am again wrapt in my cloake - & frequently compelled to use*

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96 MHS,MS.080473, Adams Family Papers, Letter from Abigail Adams to John Adams, 29 March, 1797.
mustard plaister for the rheumatism, otherwise, I am much better than I have been since you left me. Total confinement to the house is bad for the spirits, & contrary to my usual practice I am often pacing up & down the room.  

While clearly scribal in nature, these letters follow none of the formal epistolary conventions which one would expect to see in formal correspondence of the period, but instead allow for the much more personal, and intimate, communication extending naturally from a relationship where the participants are familiar with each other.

In her work with the medical content in Lady Katherine Ranelagh’s letters, Michelle DiMeo has suggested that the epistolary form of transmission allowed women a more private form of personal communication than receipt books; arguing that the latter could be lent or copied, while we might reasonably suppose that the letter was intended for the recipient’s eyes only. One way in which this theory might be interpreted would lead us to expect to see an authorial personalization within letters of the more communal knowledge contained within receipt book manuscripts. Thus the sharing of remedy recipes in household books both orally and scribally, whether we are considering discreet individual recipes as is seen in those remedies attributed to named others, or the copying of a complete corpus of material as occurred with the posthumous production of three copies of a single ‘medical book’ containing Lady Grace Mildmay’s medical knowledge, may be seen to grow out of an ongoing tradition spanning generations and communities, while the letters

98 CWA.ms.86.10, Francis Nicholson Papers, ‘Elizabeth Savage letter to Francis Nicholson, 26 January [1696/7], London; CWA.ms.91.06, Peyton Randolph Papers, Maria Randolph ‘letter to ‘Betsey’, February 27’.  
contain information derived from the individual author’s personal empirical experience of wielding that body of knowledge. Rather than being the repository of a collective knowledge of practice derived primarily from oral traditions, letters provided a venue for the individual to demonstrate her mastery of that knowledge. While DiMeo argues this differentiation in material transmission effectively in the case of individualized medical knowledge, it is less likely to apply as easily to knowledge surrounding botanicals and botanical usage. The question of what constitutes ‘medical theory’ and how that theory is interpreted in the field is a different one from the question of how to identify plants, prepare them effectively, and apply them correctly. Instances of the former abound, not only in Ranelagh’s writing, but also occurring in Mildmay, Bacon, Harley, and Freke’s letters, although there are fewer instances of surviving botanical recipes being included alongside the medical advice. That this clearly did happen is perhaps best illustrated, as above, by the ancillary evidence of recipes attributed to secondary authors in the manuscript books themselves. In answer to this apparent gap in the epistolary transmission of medical information, DiMeo has further suggested that remedy recipes might have been included as separate slips, or side-notes, to the main body of the letter. If so, this is in itself interesting. While it would no doubt explain why there are so few instances of recipes in those letters well established within the scholarship to date, it suggests the question of why this particular material would be so delivered. It may be (if remedies were indeed

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transmitted in this manner), that the strategy was purely practical: ‘separates’ could be easily removed to the kitchen and distillery to be used or copied at will. On the other hand, a practice of this sort might have further signified a separation of the practical from the theoretical: working recipe from applied elite knowledge. In the latter case, letter-writers might have chosen the epistolary form to showcase their individual apprehension of knowledge and theory, while the ‘slips’ which served to convey communal knowledge, may be easily peeled off and taken to back to the working rooms of the house.

Receipt Books

Although letters play an interesting, and perhaps occasionally vital, role in knowledge transmission, there is no doubt that the vast bulk of information available to us in relation specifically to householders’ botanical knowledge and usage is found in the household manuscripts. And while it is possible that these books were, as DiMeo suggests, capable of being lent and or copied, it is unlikely that this occurred to any meaningful extent insofar as these were working books, continually needed on hand in case of ill-health. It is in no way difficult to imagine the copying out of discrete remedies, either by the owner of the receipt book, to be sent off to a deserving or needy relative or friend, or by the hand of that recipient herself whilst sat at the working table of the donor’s home. It is, however, difficult to imagine allowing this vital repository of knowledge to stray far from its owner and her kitchen botanicals for any length of time, as need of the information contained therein could occur at any time. These manuscript books were not simply pretty samplers of feminine practice,
nor were they generally ‘presentation’ copies of authoritative text; they were
jobbing works supplementing the oral practice of medicine on a daily basis
within most homes. Catherine Field analyses these domestic recipe books as
an ‘alternative window into the expression of the Early Modern self’, embracing
a genre which was ‘a flexible one, drawing on multiple texts, technologies, and
writers’ which allowed for the authors to draw upon, and relate to, both
‘individual practice and coterie’. 101  If we look at ‘practice and profession’ (that
which we do) as expressions of our selves, then these receipt books may be
seen to express both the Early Modern householder, and the larger occurrence
of the Early Modern ‘social’ self. That is to say, they reflect a norm of Early
Modern domestic behaviour and knowledge.

Margaret Ezell outlines Harold Love’s theory of scribal publication, which
excludes Early Modern women’s manuscript recipe volumes as a significant
body of evidence, arguing that, on the contrary, they form a crucial addition to
that ‘group of manuscript materials [Ezell] calls ‘domestic papers’. 102  Not only
do they serve as vital artefacts testifying to a specific gendered history, but they
also represent remnants of a broader oral tradition as well. Ezell writes of them
as ‘messy volumes’ which were not written with a public readership in mind, but
rather existed within the private sphere of the home, and shared between

101 Catherine Field, “Many hands hands': Writing the Self in Early Modern Women's Recipe
Books’ Chapter 4, Eckerle, Julie A. & Dowd, Michelle M. Genre and women's life writing in early
102 Margaret J.M. Ezell, cites Harold Love’s Scribal Publications in Seventeenth-Century
England in 'Domestic Papers: Manuscript Culture and Early Modern Women's Life Writing'
Chapter 3, Eckerle, Julie A. & Dowd, Michelle M. Genre and women's life writing in early
familiar individuals. Indeed, examples where there is commentary suggest a certain degree of self-awareness, whether this is intended as a 'note to self' or a 'note to the reader'. In this light, these receipt books contribute not only to our awareness of Early Modern knowledge and practice, both in abstract medicinal terms and in relation to domestic and gendered studies, but also they further contribute to our understanding of domestic social networks, communication, and information transmission. Likewise, Mary Fissell notes 'the rich social networks of interactions that produced the array of recipes inscribed in a single volume', and these works may indeed be viewed as ‘settled’ accounts of complex oral and scribal traditions: post-vocalization, and pre-printed text.

Alongside the more formal written exchange of domestic information relating to botanicals, there would have also been informal oral sharing of knowledge both within, and between, households. This would be particularly true of those illiterate households where no written records of domestic medicine existed in any guise, yet where attempts to maintain health and alleviate illness would have naturally occurred. It remains important to note that the beginning of the Early Modern period saw a predominantly oral society, with literacy and familiarity with both script and print restricted to the more elite echelons of society. However, Fox writes that the ‘oral exchange remained the primary mode of receiving and transmitting cultural capital for most people’ despite advances in 'popular literacy and the new technology of print first made

a real impact on society'. This differentiation between the oral and the printed cultures reflects differences also seen in domestic and professional botanical cultures generally, with a blurring of the cultures accompanying increased literacy. Moreover, the diffusion of literacy throughout the social classes across the length and the span considered here seems to be well reflected in those relatively few surviving domestic manuscripts available. While manuscripts from the first half of the period examined include a number clearly written by women from the English aristocracy: Lady Grace Mildmay’s *Medicinal papers* (c.1552), Alethea Howard’s *Natura exenterate* (1585-1654); and Elizabeth Grey, the Countess of Kent’s *A Choice Manual of Rare and Select Secrets in Physick and Chyrurgery* (1653).

From the early 1700s onwards, the upper and upper middle classes continue to be well represented, as in the cases of those manuscripts written by aristocracy, or American social elites such as Martha Washington (daughter of a plantation owner and wife of the first President of the United States), we also see a far greater number of manuscripts written by women authors where the provenance has been lost: we know little about who they were, where they came from or how they lived. This lack of known history itself suggests

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106 NRO W/A misc.vol.32-33, 35. Lady Grace Mildmay, *Medical Papers*, v.32, ff.35r-35v, v.33, ff 40-41; Alethea Howard, *Natura exenterate; or Nature unbowelled by the most exquisite anatomizers of her* (London, 1655); Elizabeth Grey, Countess of Kent, *A choice manual of rare and select secrets in physick and chyrurgery collected and practised by the Right Honorable, the Countesse of Kent, late deceased; as also most exquisite ways of preserving, conserving, candying, &c.* (London, 1653). Instances of aristocratic authorship may be found in several mss, including: BL.Add.ms.56248, Lady Mary Dacres’ Receipt book; BL.S.ms.1367, Lady Ranelagh’s Medical Receipts; FSL.a.940, Lady Grace Castleton’s Receipt book and; NLS.ms.W3031, Lady Anne Elcho & Jane Wemyss’s Receipt book.
107 Anonymous works in Wellcome, as well as the myriad of works in all of the archives where the name, and occasionally date, inscribed inside the front cover are the only authorial
perhaps the sort of anonymity synonymous with a lack of elitist importance.

These women’s lives were not chronicled either publicly by the popular culture of the period, or by subsequent historians; nor were they commonly or frequently recommended by their own hand in a manner which was valued and preserved by their own families and communities. In some ways, the majority of these later manuscripts may be seen to truly represent common practice in every home, their authors everywoman.

These domestic works may very well be seen to not only represent a shared, inherited, and communal transmission within the private sphere of the household, but one which carried on long after public oral traditions had been largely replaced by text. Indeed, there is a clear continuity of practice traced within household transmission with similar recipes (in terms of their format, botanical content, and ailments addressed) across the whole of the chronological time span. \(^{108}\)

Several manuscripts are written in numerous hands, virtually all of them acknowledge others’ contributions, and there is a clear shared canon of herbs and herbal practices across all of the domestic manuscripts. As such, the manuscripts may be read as a single body representing a complex organization of Early Modern household knowledge and skill appertaining to the whole of the domestic culture. Thus, while public, ‘masculine’ forms of transmission were rapidly changing, the domestic, ‘feminine’, culture and transmission routes may be seen to have adapted much more slowly and organically.

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\(^{108}\) Examples of this continuity and its individualized expression are looked at in detail in chapters five and six.
Sara Pennell writes of ‘recipe compilation volumes’ representing what she terms a ‘gendered knowledge form’. She also notes, however, that the Early Modern ‘household compilation is certainly an amorphous creature, born of the many varieties of manuscript writing - verse miscellanies, table books, adversaria’.\textsuperscript{109} Even the seemingly unambiguous term ‘recipe book’ can mislead us about a manuscript's contents, implying that it was a handwritten repository of directions for concocting combinations of meats, plants, herbs, and liquids, whether for ‘the good of man or beast or both’.\textsuperscript{110} There is perhaps a degree of prevarication here as the vast majority of receipt books clearly focus on providing recipes for human consumption, and in the case of those receipts which are medical in nature there is a clear intention of specific remedial action directed towards clearly defined human ailments. Ezell argues, however, that there is a distinct and substantial difference between the recipes found in domestic manuscripts and those of the ‘100 plus printed manuals of culinary texts published between 1650 and 1750 cited by Pennell’, largely because they are ‘part of a manuscript culture (in both their methods of recording and their complete contents)’ which are reflective of the ‘messy’ ‘volumes of domestic life’.\textsuperscript{111} And this ‘messiness’ is indeed a key characteristic of the scribal evidence and culture; it is fundamentally organic, piecemeal, eclectic and all-inclusive, as opposed to the systematic, systematized, organized and categorized plethora of printed texts.


\textsuperscript{111} IBID.
The handwritten scripts are much more akin to oral transmissions in a number of ways than they are to printed traditions, despite being an example of written culture. Ezell argues that domestic manuscripts were ‘open-ended narratives, lacking a defined ending’, unlike printed works which were logically structured, with a ‘beginning, middle, and end’, allowing for a ‘layering of time, continuous self-analysis and reworking’.¹¹² This conflation of the oral and the scribal may be seen in those receipt books written in several hands, with script and recipe amendments and additions, and well as with the addition of later commentary.¹¹³ For example, the first, medicinal portion of Mary Glover’s receipt book (1688) is written in a large, fairly loose, slightly slanted script, while the later pages are in a much neater, tighter hand [appendice 1]. Likewise, there are clearly two different hands in Ann Goodenough’s receipt book of 1700-1775: not only is the first considerably smaller and neater than the looser scrawl of the second, but there are significant differences in the formation of particular letters, as seen in the two hands’ capital ‘T’ s [appendice 2]. Also, the first hand also consistently capitalized throughout her recipe headings, whereas the second capitalizes only the first letter and proper names, and there are differences in minor spellings, ‘to make’ in the first hand, is written as ‘too make’ in the second. Pollock also notes the inclusion of at least three distinctive hands in Lady Grace Mildmay’s receipt books, and Catherine Field discusses a number of manuscripts with added commentary and recipes in multiple hands. The communal nature of these manuscript is a distinct feature of women’s

¹¹² Ibid, p.46.
receipt books. Indeed of the more one hundred manuscripts consulted for this thesis at least a third have two or more hands.\textsuperscript{114} Ezell also refers to the multiple hands which typically play a part in producing domestic manuscripts, speaking of ‘intergenerational domestic papers’ which is a fair description of many of the extant receipt books.\textsuperscript{115} It is not at all uncommon for a single manuscript to have two or more acknowledged authors: for example, Mary Baumfylde and Catherine Thatcher’s medical, cookery receipt book \& verses (1626, 1707); the Boyle and Townsend ‘family’ manuscripts (1636-1647); or Anne and Mary Granville’s Receipt book (1740).\textsuperscript{116} And others still, as previously noted, contain material written by more than one hand. Likewise, Field notes the ‘receipt book’s close relationship to the house (where women were considered experts in medicine and cooking), its emphasis on collaboration as well as empirical practice’.\textsuperscript{117} Moreover, individual and communal voice and ownership are compounded and inextricably woven together, so that a collective practice and body of knowledge was built up across generations, which may be seen even within discreet manuscripts with identified individual authors. In this light, it could well be argued that any emphasis on the individual as ‘author’ of text, at least in this case of the receipt, is perhaps undeserved. Indeed, the consistency of practice over a great


\textsuperscript{117} C. Field, ‘Many hands hands’, Op Cit., p.50.
number of manuscripts produced across a great period of time across the Anglo-American sphere of influence, combined with enough variation to speak to individual practice, suggests a greater communal authorship and knowledge. Thus, these domestic manuscripts may be seen as composite evidence of a collective oral practice, reflecting both the individual author’s immediate authority, and the hands of her family and close circle of acquaintances.

The often bold, individualized frontispieces to domestic manuscripts suggests that their authors personally identified, and wished to be identified, as ‘owners’ of the communal knowledge contained within their pages. Indeed, these pages devoted to signatures and dates suggest not only ‘ownership’ of the receipt books themselves, but also, by inference, of the information contained therein. And examples of this may be seen in the majority of books, including those of Grace Blome Randolph, Mary Doggett, Elizabeth Fowle, Mrs Sarah Longe, and Penelope Jephson Patrick. Even more delightful examples of this are to be found on Susanna Pack’s front page, with Her Book and ‘Anno Dom, 1674’ written in beautiful curlicues (this is repeated word by word on the second page) and Constance Hall’s beautiful, highly decorated,

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118 Cf. Catherine Field, ‘Many hands hands’, IBID; Rebecca LaRoche, Medical Authority and Englishwomen’s Herbal Texts, Op.cit.
119 FSL.ms.V.b.301, unfoliated. Grace Blome Randolph’s Receipt Book. – Randolph’s manuscript is a good example of culinary recipe book containing no overtly medical content, but plenty of examples of medicinal foods – waters, wines, syrups and cordials containing botanic with great alphabetical indexes at front of book - alphabetized contents may also be seen in FSL.ms.Va.429, Rose Kendell et al’s receipt book (as well as FSLms.V.b.14, Jane Dawson’s receipt book, the latter containing similar content to that of Blome Randolph’s, with a range of ‘culinary’ botanicals, i.e. for Cowslip Wine, p.5 and Birch wine, p.15; although there are some obviously medicinal recipes here also, i.e. for ‘Surflit Water’ p.6, ‘Wormwood Watter’ p.18, ‘Metheglin’ p.19). BL.Add.ms.27466, Mary Doggett, Receipt Book; FSL. ms.V.a.468, Elizabeth Fowler, Receipt Book; FSL.ms.Va.425Mrs Sarah Longe Her Receipt book; FSL.ms.V.a.396, Penelope Jephson Patrick’s Receipt Book, 1674.
and hand illustrated frontispiece of 1672. Yet these statements of ‘ownership’ are far from statements of personal intellectual property; rather they may be viewed as an example of personal participation in the shared universal domestic medical authority. Indeed, examples of hubris associated with authorship and authority seem to be largely missing from the oral, and scribal, traditions. Behind their proud frontispieces, these scripts typically acknowledge a multiplicity of attribution with its shared knowledge and many hands. As such, the corpus of domestic manuscripts tends to represent a collective consensus of knowledge and practice.

**Communities and Communal Knowledge in Domestic Manuscripts.**

Knowledge of botanical medicines, as evidenced by domestic receipt books was disseminated through families, most obviously between the ‘womenfolk’: mothers, grandmothers, and sisters. The English Eyton manuscript (1691-1738) includes a recipe titled ‘My Sister Keys way to make Surup of Clove July flowers’, while Anne Brockman gives two of her mother’s recipes: ‘A Note of my Mothers Salve water’ and another similar ‘note of my Mothers Salve’ (England, n.d.), and Elizabeth Digby includes ‘A singular good Medicine of my Mothers for the greene Sickness’, and an assertion that a Lucatello recipe was given to her ‘Grandmother Mulso’ by the remedy’s original author in Lady Elizabeth Dolben’s English recipe collection of 1690. In

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121 WL.ms.2323, fol.59v, Amy and Mary Eyton, *Receipts*, 1691-1738; BL.Add.ms.45197, fol.68-69, Anne Brockman, *medical receipt book*; BL..EG.ms.2197, fol.8v, Elizabeth Digby, *Receipts*; LC.ms.88209869, Lady Elizabeth Dolben, who writes ‘This receipt was given by Lucatello to my Grandmother Mulso’ p.166*Cookery Book*, c.1690. - *Lucatella recipes are considered in greater detail elsewhere.*
examining changes in household size and constituents, the social historian, Peter Laslett, questioned modern understanding of what is meant by Early Modern concepts of ‘family’ and ‘household’, both of which, for him, are distinct from ‘community’. It is likely that the Early Modern period extended those concepts of ‘wholeness’, that is to say, to an ordered inter-relatedness of things associated with the home and garden as well as to concepts of the ‘family’ and the ‘community’. This conceptual idea of social order grows clearly from the established medieval concept of a community wherein each member plays a vital role within the corpus of the larger social entity, with families existing firmly within that larger social network, and where the domestic medical provisioner has a clear, vital, social position. In this instance the transmission of knowledge, whether written or oral, then becomes an extension of the organic nature of the social entity. In this social ‘whole’, the family, familial traditions and practices, and familial transmission of information all provide the bedrock for a domestic culture generally: the family and community defined practice becomes a universal Anglo-American domestic cultural norm.

The broader approach to family and household networking is detailed by Stine in her examination both of Anne Howard, Countess of Arundel’s receipt books (of which three copies were apparently made and disseminated to family members), and of the links to ‘manuscripts of other families with whom [the Howard family] shared a social connection. Linda Pollock suggests that this idea would also be embraced by Mildmay, who held a ‘concept of a community in which each individual utilized his or her own talent fully in order that all should

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prosper’.\textsuperscript{124} Indeed, there is an obvious complexity, and intertextuality, as well as wider intermodality of transmission, apparent in these manuscripts. Catherine Field speaks of ‘the textual fragment of the recipe itself – either invented by the author/practitioner, or culled from written sources (in print or manuscripts), or originating with friends, family members, or medical practitioners’.\textsuperscript{125} This lack of authorial absolutism, whereby knowledge is communally shared and dispersed via a range of mediums, means that there is no clearly defined border between those concepts belonging to a larger community and those held by a single person, so that knowledge is both part and parcel of a larger social infrastructure as well as a personal entity transmitted via private relationships.

Perhaps the intimate, and individual, relationship between the body of knowledge and its transmission within the household provides an explanation for gross omissions in instructions within manuscripts, so that a basic assumption of working knowledge and its scribal transmission is accompanied by an oral ‘fleshing out’ of material information. Thus, Fissell’s awareness of how that ‘gap between the fully and the functionally literate, and the literate and the illiterate, was constantly bridged by the association of words with images and by the practice of reading aloud’ is augmented by personal directive in terms of instruction and reception of material.\textsuperscript{126} Girls would have learned house-holding skills and familiarity with botanical medicines from their mothers and mistresses within communal areas of the home, particularly the kitchen.

\textsuperscript{125} C.Field, ‘Many hands hands’, Op Cit., p.51.
Remedial recipes would have been shared in this manner much as culinary ones were, indeed, much as instructive cooking has always occurred, with one woman instructing orally, or reading aloud a recipe, as her companion learner measures out the specified ingredients, mixes, prepares utensils, and so on.

Alongside non-textual evidence of the ‘collective nature’ of these manuscripts, further development of scribal transmission may also be found within the receipt books themselves, both in terms of multiplicity of authorship, as seen in the case of the receipt book of Rose Kendall (1682), as well as with recipes attributed to the authorship of someone other than the manuscript compiler. The latter indicates the sharing of medical recipes not only amongst families, but also between and across households and communities: Mary Doggett provides a recipe for ‘The Lady Cervetts Water’ (1604), Jane Dawson includes recipes for ‘the Lady Dalton Receipt, for a greate Cake’ and ‘the Lady Altton Receipt for Stewing Oyssters’ and ‘Syrrup of Violetts, Mrs Copleys’ (c.1650-1699), Margaret Baker includes a remedy attributed to ‘my cousin lauton’ for ‘a coffe’ (1675-1710), and the Granville manuscript contains a number of attributes, including a recipe ‘For Aches, Thomas Blothers Seare Cloaths’, and another simply titled ‘Mr John Rutters’ (1740).

127 FSL.V.a.429, unfoliated Rose Kendall et al, cookery and medical receipt book, p.20. One of the front pages is marked ‘Rose Kendell & Ann Cater there Book’, 1682, while two pages on is written ‘Anna-Maria Wentworth, Her Book, 1725’.
128 BL.Add.ms.27466, fol.14v., Mary Doggett, Her Booke of Receipts, 1604, p.15; FSL.ms.V.b.14, Jane Dawson, Receipt Book, pp.45,57; BL.Sloane.ms.2485, Margaret Baker’s receipt book in two parts containing mainly medical and some culinary receipts, 1650, Baker’s book contains a wide range of attributed recipes, both culinary and medicinal, such as ‘Mrs Barker’s receipt for a cordial water against feveavers and loosesies and consumptions’ (fol.62v.) and ‘mistres Smithsons poudre against the winde’ (fol.65r); FSL.ms.V.a.430, f.91, Mary Granville and Anne Granville Dewes, Receipt book, pp.91.4. Other examples from the Granville’s mss include ‘Goodwife Lawrence her Salve’ (p.3) and several recipes attributed to physicians which are examined in the chapter on ‘Authority’.
Some recipes are attributed rather vaguely to authors known only to the manuscript author, as in the case of Sarah Longe’s ‘sirrope for a Cough For the lungs. By D.R.’ (c.1610), while a number of recipes in several manuscripts are attributed not to obvious family friends or kin at all, but rather to physicians, as is the case, for example, in the Kendall et al manuscript’s instructions for ‘Dr Stephens Water’ (1682).\textsuperscript{129} The association with ‘authority’ on the part of domestic authors may be further seen in the typical claims to a range of communal recipes, typically differing in makeup according to author and household, seen across manuscripts. These include recipes for remedies attributed to Paracelsus, Lucatella (as already discussed), Dr Gascoine, and so on, and are found across the whole of the Anglo-American spectrum. This phenomenon is perhaps most markedly seen in the longevity of Gascoyne powder: Doggett includes a recipe ‘To make Gascoyne Powder’ in 1604, Susanna Pack one for ‘Goscons powder’ in her receipt book dated 1674, while Martha Washington includes several recipes for powder attributed to a Doctor Gascoyne in her manuscript from the late-eighteenth-century.\textsuperscript{130} Reference to a contributor using simple initials seems to imply a degree of familiarity: this is a text intended to be read only by those with intimate knowledge for whom the reference would suffice in order to identify the author. Attribution to a physician, or other learned authority, on the other hand, conferred authority and legitimacy both to the specific recipe and to the individual’s work as a whole.\textsuperscript{131}


\textsuperscript{130} BL.Add.ms.27466, fol.43v., Mary Doggett’s Receit bok, ‘Gascoyne Powder’; FSL.ms.V.a.215, unfoliated, Susanna Pack, Her Booke, 1674, p.109; Martha Washington, Booke of Cookery and Booke of Sweetmeats, Karen Hess trans. pp.428, 429, 430: these recipes include two for Gascoyne’s ‘cordial powders’, and a third for another, untitled ‘powder’. Hess discussed the provenance very briefly, notes, p. 428.

\textsuperscript{131} This question of authority and authorship, particularly as it relates to the inclusion of recipes attributed to physicians has been considered by a number of authors, including Pollock, Leong,
Catherine Field writes of how ‘the continued elasticity of receipt books in terms of theme and organization allowed women to construct themselves as ‘expert’ on anything having to do with the body under their care’. She refers to how the ‘genre remained unstable for much of the Early Modern period’ meaning again that it does not conform to the rigid and systematic categories found in printed texts. Field further highlights that this organic flexibility is a result both of the higgledy-piggledy nature of handwritten work, and of the ‘collaborative nature of the receipt book’, which we can readily see in a number of the manuscripts. In the first instance, the organization of content appears to be almost entirely random in the majority of Early Modern domestic receipt books, for example, the written instructions ‘To make ginger bread’, is followed by a ‘A medicin against the tooth ache’ on one page, another ‘For weeke and lame limes [limbs] in children’ by a recipe ‘to make a quacking pudies’, and instructions ‘To make buns’ are followed by a receipt ‘for a Small pox in the throte’ in Margaret Baker’s receipt book of (1650). Likewise, Mary Doggett’s earlier recipe book gives instructions on making ‘A Plaister for ye chin cough to be Laid to ye Stomach’, for washing ‘Partie Colored Stockings’, and ‘to Pickle Cucumbers’ on consecutive pages (1604). Mary Cruso’s later work includes recipes for a ‘Leg of Pork Like a West phalia ham’, ‘To Make Ginger Breade’, and ‘For a Consumption’ on the same manuscript page (1689). Field has noted the second of these phenomena, writing of how
in 1681, Jane Dawson mixes both the culinary and medicinal in her table of contents. Under the letter ‘A’, she includes the recipes for cooker, ‘A good cake’, ‘Apricok Pye’, ‘Apple Cream’, as well as the medicinal, ‘A water for the scurvy’. She includes two medicinal receipts, one for ‘plague water’ and another to make a ‘small tent’ (for draining a wound), on the same page as a receipt for ‘a whit pudding of rice’.  

Even in those manuscripts where authors have attempted to differentiate between the medicinal and the culinary, there is no neat or easy categorization to be found. For example, in Jane Mosley’s Recipes (Derbyshire, 1669-1712) we can see that the first half of the manuscript clearly intends to focus on culinary recipes, the second half on medicinal ones, yet there are examples of botanicals in the form of syrups and cordials to be found in both. This ‘jumbling’ of the medicinal botanical preparations with the culinary occurs also in other manuscripts. Penelope Jephson Patrick’s seventeenth-century Colonial manuscript, for example, contains a culinary recipe index at the front and medicinal index at the back, with seemingly clear cut and precise categorization of each, so that the listing for ‘A Good Plum Cake’ is listed in the Culinary index, while a ‘Water for Convulsions the Lady St John’ is listed in the medical index. Despite the attempt at overall organisational clarity in Patrick’s work, however, the recipes remain at least occasionally jumbled together, so that the above
mentioned ‘water for convulsions’ is found on the same page in the text body as a recipe ‘To make fricase of Chicken’.  

Susanna Pack’s Receipt Book (England, 1674) differs from the preceding examples in that it is divided into several distinct sections: ‘Presardes’ (preserves), ‘Past and Cadies’, ‘Waters & Wins’, ‘Powdrs & Syrops’, ‘Cookery’, ‘Comfits’, ‘Gely & Consrve’, and ‘Oyntments’. Yet, not only do we see a lack of clarity clearly separating the culinary from the medical (where one might expect to see preserves, pastes and candies, cookery, comfits, and jellies & conserves in a single section; waters, wines, powders, syrups, and ointments in another), but also there is further confusion of categorization amongst the recipes themselves: the ‘Past and Cadies’ section contains a variety of pastes and candies, including those which are quasi-medicinal such as candied Angelica, and those which are really medicinal products (botanicals), such as candied cowslips. Likewise the ‘Waters and Wins’ section contains both prandial (mulberry wine) and medicinal (‘A water for Convulsions’) recipes; the ‘comfits’ section contains a recipe for ‘Losinges’ with two variants: the first containing ‘Aramalicum Rossalum specces’ and ‘Rosewator’ which is ‘Exceeding good for the longs helps digestion strengthen the Braine & Stumacke’, while the second is based on a combination of English liquorish and ‘Ambergreece’ recommended as ‘very good for a cough’; and the ‘Gely & Consrve’ section provides details for the production of ‘Hartshorn Gelly’, ‘Conserve of Woodsorrill’, or ‘Conserve of Bittony or Archangell’ alongside more obvious edibles. That these recipes are fundamentally medicinal in nature rather than

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139 FSL.ms.V.a.396, fol.41v., Penelop Jephson Patrick’s Receipt Book, 1671-1675. A recipe to make ‘Water for Convulsions’ is prefaced by one for ‘A Good Plum Cake’, and followed by one ‘To make fricase of Chicken’.
culinary may be found in the recipe descriptions themselves, for example, Pack recommends her ‘Hartshorn Gelly’ for the treatment of melancholy, writing that ‘it is very Refreshing to a weake person cheares the spirits’.

This ambiguity is a common trait in the majority of manuscripts, with a considerable number of recipes lying somewhere between the medicinal and the culinary. Notable here are those recipes for syrups, waters, and cordials. For example, Martha Washington’s works (1749-1799) consist of two books, a ‘Booke of Cookery’, and one of ‘Sweetmeats’, yet the second of these contains recipes for medicinal ‘syrups’, wines and cordials as well as specific botanical waters, ‘oyles’, and powders as well as classic dessert recipes and instructions for the making of preserves and candies. In these instances, the recipes are clearly intended to produce medicines, and indeed, are often themselves used as ‘ingredients’ in more complex botanical recipes. Moreover, Washington’s rose water recipe is found in the culinary section, and is itself used in a number of other culinary recipes, yet it is also co-opted for the production of botanicals, including lozenges and plaisters, and these recipes are found in the medicinal section. And in some instances, the blurring between household aspects occurs even beyond the kitchen and distillery: Dorothy Philip’s writing includes


141 Martha Washington, Martha Washington’s Booke of Cookery and Booke of Sweetmeats being a Family Manuscripts curiously copied by an unknown HAND sometime in the seventeenth century, which was in her Keeping from 1749, to the time of her Marriage to Daniel Custis, to 1799, at which time she gave it to Elanor Parke Custis, her granddaughter, on the occasion of her Marriage to Lawrence Lewis, Karen Hess trans. (New York: University of Columbia Press, 1995).
sermons and family records along with recipes, while Elizabeth Fowler’s book, though almost entirely made up of culinary recipes, includes not only the odd medicinal receipt, but also the occasional hymn, and a poem.\footnote{FSL.ms.V.a.347Dorothy Philips, \textit{A Sermon Booke}; FSL.ms.V.a.468. Elizabeth Fowler, \textit{Her Book}, (cookery book with receipts and a hymn and a poem).} For domestic practitioners, the botanical agent is neither one thing nor another; rather, plant agents are produced, and used, as a means of addressing the needs of the household, whatever they may be, with an equal emphasis on nutritional and medical demands.

**Personal Authority**

Several scholars have looked at the ability, indeed willingness, of domestic authors to ‘prove’ remedies’ medical efficacy. It is interesting to note that this was not a universal phenomenon, with those authors writing evaluative commentary tending to do so fairly consistently, while the bulk of manuscripts contain little or no scribal evidence of assessment at all. Extending the argument that these manuscripts are literally written versions of a much older oral tradition, the simple act of committing a recipe to page is an act of approbation: those recipes which have not ‘proved’ themselves time and time again do not get passed on and eventually written down. Examples where authors have pointedly remarked on a remedy’s efficacy might therefore become a point of differentiation, whereby it is hoped that the reader can pluck the best out of a number of options presented. Pollock writes of Mildmay that ‘her papers reveal that there was little difference between the care offered by a
university-trained physician and that offered by a self-taught woman’. Yet differentiation may be found in the empirical approach of domestic practitioners which revolved around received anecdote and evaluation of personal experience. Indeed, this thread of on-going assessment of the informal communal, rather than learned dogmatic, information has been commented on by a number of scholars. This shared domestic knowledge was not merely accepted and learned by rote, but rather was being actively adopted, tested, and adapted. Indeed, Catherine Field writes of domestic authors ‘foregrounding individual testing and personal experience of the receipt through their recording of whether a receipt is ‘proved’ to be effective or not’. She goes on, however, to write that

recipe writing and practice was thus a specialized type of self-certification, one encouraged by the ‘new ideas’ of the Scientific Revolution, ‘a mechanical philosophy’ that ‘validated the maker’s knowledge’ (verum factum) model of scientific explanation, the maxim of reasoning according to which to know something means knowing how to make it. The question of personal ‘provings’ is, in itself inconclusive, as both domestic and also vernacular authors may well have inherited ‘proof’ of efficacy, but the weight of evidence demonstrating sharing of botanical information across domiciles combined with the high degree of individual application of this knowledge, speaks directly to the domestic culture. Evidence of these women’s ‘proving’ of a remedy lies both in its inclusion with their manuscripts as well, possibly as the written approbation, and ultimately, in their willingness to finesse and adapt each remedy to suit their own household needs.

Margaret Baker includes more than one ‘excellent’ recipe for medicines against the plague, plural recipes for ‘a good Cordiall’, and several recipes for ‘excellent’ eye waters (1650). Mary Doggett likewise includes a number of ‘approved’ recipes which contain similar botanical content, even if their intended remedial purpose differs (1604): ‘An Extt water for many cures’ contains ‘Ginger, Galllingallm Nutmeggs graines, Cloves, AnnySeeds, Fennellseeds, Caraway seeds’ as well as ‘sage, mint, red roses, Time, Pettitory, Rose Mary, Wild time, Sllendine, & Cammamelle … Wallnutt Leaves, Cardis’ in a ‘good Gascones wine’ menstruum, while her ‘Excellt water for all surfitts or any Sudden Extremity’ contains ‘Corne roses … Annyseeds, English Liquorish … ginger, fennel, Bittany, Agrimony, Tormentill, 4 nutmegs, a handful of Angelico, a handful of balmes, as much of Rosemary as much of Cardus’ with extra ‘Rose Leaves’, a ‘graine of ambergreece’, and ‘12 Cloves’. While there are some important distinctions between the two remedies, particularly in terms of their indigenous herb content, both ‘excellent’ waters are actually built around a similar base of ‘exotics’: ginger, nutmeg, clove, aniseed, and fennel; and each contains rose, making them more similar than dissimilar. That any one of these remedies would be singled out suggests approbation of the inherited, communal practice, whereby this type of remedy, or versions thereof, are commonly perceived to be of value. In some instances it may, equally, reflect the positive experience of an individual author with one particular version of the remedy type. The occasion of both types of approbation, the inherited communal practice alongside the individual practitioner’s interpretation and application of it across domestic sources is, again, entirely in keeping with the broader domestic

145 BL.Sloane.ms.2486, fols.25r, 31r,v., 38v,rrv,45v, 46v, 48v, 50r, 55r, 62v,63r, Margaret Baker, Receipt book in two parts, pp.14-15, 16, 19.
culture. These works reflect a communal norm with a high degree of personal and household individualization, whereby perception of worth on the part of either a remedy’s maker, or an earlier practitioner source, is equally of value.

The majority of annotated texts would seem to support this theory of commentary, whereby given approbation confers a mark of distinction amongst remedies. Mary Granville’s English recipe for ‘an Admirable Good Water Against Melancholy’ (1740), annotated by her daughter who writes that it is ‘very good for them that are heauy hearted … it will comfort you very much … Probatum est’, and again, a recipe for ink is designated ‘= Verie Good’, and a further recipe with the comments ‘A most Excellent Plaister for all kind of wounds or old soars … Ye had from my sister Melborn in Essex Ye 12th of June 1683’. Each of these recipes clearly aim to communicate the author’s approbation of the botanical’s efficacy, as well as imparting worth back to the originating source, be this maternal or sororal.\textsuperscript{147} Likewise, Mary Doggett provides a recipe for ‘An Exce.\textsuperscript{t}Wat.\textsuperscript{r} for ye preservacon of Manor Woman long to Live’ (1604), Penelope Jephson Patrick one for ‘An excellente Good water for the stone’ (1671-1675), Lettice Pudsey says of her ‘Black Salve’ that it ‘is a very good salve for a boyle or any sore’ (c.1675), while Jane Dawson gives instruction on ‘How to make Metheglin a right good way’ (1650-1699). Doggett further, includes recipes for six separate waters on a single page of her folio, two with specific uses: ‘for ye Killing of any Itch or Ringworme Redness of Salt Flamed Face’ and ‘A Water for the stone’; two different yet straightforward

\textsuperscript{147} FSL.ms.V.a.430, unfoliated, Mary Granville and Anne Granville Dewes, Receipt Book, 1740, pp.7, 12, .42, 112. Catherine Field cites this recipe of the Granvilles’ in her brief examination of the importance of ‘proving’ to early modern household practitioners, in Many Hands Hands’, Genre and Women’s Lives, Op.cit. p.57.
recipes for ‘A Cordiall Water’, ‘A Sovereign Cordiall Water’ recipe; and another for ‘An Excellent Water’. Apart from the two waters with specified uses in Doggett’s manuscript, it is difficult to ascertain why she bothered including the recipes for simple cordial waters when she had two other recipes which she clearly feels are better.\footnote{BL.Add.ms.27466, fol.8r, Mary Dogget’s Receipt Book.} Doggett’s waters are a straightforward example of what we are seeing in each instance, however. Typically those recipes carrying specific approbation are, on the face of it, relatively similar in composition and application to any number of other examples within the communal cannon, and the single example may be read as highlighting the value of the whole, with exemplar remedies representing the individualized success of the communal practice.\footnote{BL.Add.ms.27466, fols.3r,5v,14v, Mary Doggett’s Receipt Book; FSL.ms.V.a.396,fol.39r, Penelope Jephson Patrick’s Receipt book; FSL.ms.V.a.450, fol.56v, Lettice Pudsey’s Receipt Book, ‘a surfeit or plague water’; FSL.ms.V.b.14, unfoliated, Jane Dawson’s Receipt book, p.33.}

Similarly, if less frequently, authors provide evidence of critical dismissal: Catherine Field found one instance of this, noting that ‘this receipt is good for nothing’ is scrawled underneath a crossed out recipe for pickled cucumbers in Lettice Pudsey’s manuscript (1675).\footnote{FSL.V.a.450(1), fol.56r, Lettice Pudsey’s receipt book, c.1675, as cited in Catherine Field, ‘Many hands hands’, Op Cit., p.57.} Jane Dawson’s receipt book also contains a single scratched out recipe for gingerbread with ~VOID~ written beside it (1650-1699).\footnote{FSL.V.b.14, unfoliated, Jane Dawson’s Receipt book, 1650-1699, p.66.} Anne Glydd’s Receipt book (1656-1700) contains a recipe for ‘An excellent Oyntment for any hott inflammation’ which has been firmly cancelled out, providing a rather contradictory analysis of the remedy whereby the initial complimentary approbation was inherited with the recipe, and the subsequent crossing out was a personal assessment on the part...
of Glydd. These disapprobations are atypical, however, occurring in less than five percent of recipes in the entire source body of manuscripts examined by the thesis. The relative lack of critical analysis of manuscript recipes could be considered evidence of a lack of critical faculty on the part of domestic authors, as though they were merely passive recipients of traditional knowledge. It is more likely, however, that the rarity of expressed disapproval serves to reinforce a larger picture of the overall communal body of knowledge across households. Far from suggesting a lack of critical awareness, the relative (in relation to affirmation of efficacy) lack of disapproval directed towards particular recipes may be seen to demonstrate the empirical nature of their oral and scribal dissemination: only those remedies which were seen to work, consistently and reliably, were communally held in high enough regard to be passed on over substantial periods of time, and eventually written down.

There are instances of domestic authors demonstrating and defending their knowledge, both of botanicals, and of medical practice more broadly, presumably in the face of authoritative censure. Indeed, the opposite side of the householders’ at least occasional deference to, and reliance on, professional practitioners, is the assertion of domestic authority and skill divorced from any association with elite authority. One such example may be found in Mary Chantrell’s Receipt book of 1690. Chantrell includes a recipe for rickets containing wormwood, chamomile, and earthworms, macerated in butter, writing that it is “ye best thing as ever was known for a Child that has ye Rickets And has cured Severall when all other means has failed if they have exactly followed

152 BL. Add.ms.45196, unfoliated, Anne Glydd’s Receipt Book, 1656-1700.
Not only does Chantrell assert the recipe’s superiority as a medicine, ‘ye best thing as ever was known’, but her faintly acerbic admonition that the remedy works, but only works, ‘if they have exactly followed it’ suggests that she writes in response to former criticism of the remedy’s efficacy.

Similarly, the frontispiece to Katherine Packer’s 1639 Receipt book is equally confident of the knowledge and material contained therein, reading: ‘A Boocke of Very Good medicines for severall deseases wounds and sores both new and olde / Reade gather and make carefull practice / ~ Katherine Packer / Ano 1639 Dominee’. Again, Packer combines an extolling of the book’s medical work, containing as it does ‘very good medicines for severall deseases’, but further requiring a degree of care in both its reading, and in the practical application of its contents, on the part of the reader practitioner. While these recipes seem to be somewhat at odds with earlier arguments concerning the fluidity of domestic transmission and practice as well as the lack of hubris amongst domestic authors as Chantrell leaves little, or no, room for individualization, they are not necessarily indicative of a wholesale design on establishing medical monopolies. Indeed, these instances are notable for their rarity. Likewise however, an argument may be made to suggest that although this vocalization of the value of work contained therein is unusual in domestic manuscripts, the very fact of the works themselves indicates their value to Early Modern and Colonial householders. They typically did not need to sing their own praises, as their worth was obvious.

\footnote{WL.ms.1548, fol.67v, Mary Chantrell’s Receipt Book, 1690.} \footnote{FSL.ms.V.a.387, Katherine Packer, Boocke of Very Good medicines, 1639, frontispeace.
Women’s provision of health care within the home was acknowledged by Early Modern and Colonial authority, if only to be inferred by the instructions found in vernacular texts of the period. Buchan’s instructional appendixes promise to provide:

A List of Simples and of such Medicinal Preparations as ought to be kept in Readiness for private Practice:

The Method of preparing and compounding such Medicines as are recommended in the former Part of the Book, with the Addition of several others of a similar Nature:

Remarks on the Doses, Uses, and Manner of applying the different Preparations. ¹⁵⁵

The assumption that this information was of use to the Early Modern and Colonial householder, along with the continued popularity of this, and other, vernacular texts as evidenced by their printing histories, further supports the commonality of domestic medical practice. Moreover, the receipt books themselves provide ample evidence highlighting the ability of domestic practitioners to differentiate not only in their diagnosis and prescribing, but in their in-depth understanding of pharmacology: how different medicines act upon different body types, ages, genders, and so on. For example, Sarah Longe’s manuscript contains a remedy titled ‘A purge for a man’, Rose Kendell’s ‘water for children for ye wind & Against fits of the Convulsion’, Mary Doggett’s another ‘To cure a sore Breast but not a Cancer’, and Elizabeth Digby’s ‘A Medicine for [illeg], or bloody fluxe which may be taken if a woman be with childe’. ¹⁵⁶ In the first two instances we see remedies with specified patient

groups, demonstrating that there wasn’t necessarily a ‘one size fits all’ attitude towards medicaments. Indeed, Longe’s purge remedy is as interesting as Kendell’s’, for while we have long been aware of Early Modern and Colonial sensitivity to the physiological differences between adults and children reflected in remedies, an appreciation of gender-based prescribing differentiation is rarer, though considerations of average sizes alone make this a reasonable aspect of prescribing to attend to. In the third of these, Doggett is clearly differentiating between forms of pathology, which not only has implications for which prescriptive is chosen (or not), but implies a confidence and awareness of diagnostic differentiation as well. Likewise, Digby’s recipe differentiation is dependent both on the diagnostics (or at the very least, an awareness of the patient’s state of fecundity) and their prescriptive implications: in the carrying of a child, a pregnant woman is fundamentally different from one who is not, both because foetuses may be inadvertently aborted, and because the woman, and child, are sensitive and responsive in ways that they would not be in any other situation.

Evidence of domestic agency and authority is not limited to receipt books, nor is it proscribed by the practice of working with botanical medicines: receipt books, journals, and letters all illustrate the breadth of domestic medical interest and knowledge, and the botanical culture extends to include the diagnostic. Indeed, the sheer range of ailments included in sources of domestic authorship suggests that domestic practitioners felt competent to diagnose, and treat, virtually all manners of ill-health. For example, Mary Baker’s manuscript

...bloody fluxe which may be taken if a woman be with childe’, to which the author has added: ‘thie Medicine hass bene many times proved, and hass always helped’. 
contains a recipe ‘for a consumption of ye lungs, green Sickness, of tissicke or shortnes of breth’ (1652), and ‘an exelent cordiall [of use] ... in any ordinary distempers, as fevers or agues’, while a single opening of Elizabeth Freke’s receipt book produces two recipes apiece for ‘yellow jaundice’, ‘Goutt’, ‘Sciatica or Bone Ach’, and single recipes for a ‘medicine to Cleer the Sightt’, ‘Pilles’*, ‘Tooth Ach’, ‘Shortt Breath or Tisick’, one ‘for the Stone’, another to cure ‘all fluxes of blood’, a gargle for a ‘swoln & sore throatt’, and a final remedy aimed at relieving ‘a pricking heatt in the Eye’. Moreover, domestic authors further clearly demonstrate familiarity with prescribing differentiation: A cordial attributed to Dr Jeffers in Mary Baker’s manuscript is purportedly useful ‘in ould or young, a man or woman may safly take three sponfuls or a child one in a morning fasting ... except women with child they need not take it’. Domestic authors are likewise capable of writing intelligently of the responsive nature of medicine delivery, as seen in Katherine Davies’ instructions for the administration of buckthorne syrup, which should be given ‘in spoonfuls according to ye age and strength of ye person it works best when given alone not mixt with anything’, illustrating not only her own authority and knowledge in knowing that the recipe is more effective if given on its own, but equally, suggesting an assumption of prior experience on the part of the anyone administering the recipe in terms of how age and ‘strength of ye person’ should affect dosage.

157 BL.Sloane.ms.2485, fols.22v, 28r, Margaret Baker, Receipt Book, 1652; BL.Add.ms.45718, fol.417, Elizabeth Freke, Her Booke.
158 BL.Sloane.ms.2485, fol.25r, Margaret Baker’s Receipt Book, 1652.
159 BL.ms.EG2214, fol.17v, Katherine Davis’s Receipt Book, c.1701.
Several household authors write in such a way as to suggest some domestic proficiency in diagnostic differentiation also. When the Adams’ son, Charlie, came down with the small pox in Braintree, Virginia, in 1775, Abigail wrote frequently to John apprising him of the child’s illness and treatment progress in terms which border on the diagnostic:

... At present all my attention is taken up with the care of our Little Charles who has been very bad. The Symptoms rose to a burning fever, a stupifaction and delirium ensued for 48 hours. The Doctor attended him as tho he had been his own child. He has the Distemper in the natural way. A most plentiful Eruption has taken place. Tho every thing has been done to lessen it that could, his face will be quite coverd, many if not all will run together. He is yet a very ill child, tho his Symptoms are lessend.¹⁶⁰

What is unclear here is whether the identification of ‘distemper’ is based on Adam’s own observation or repetition of the doctor’s diagnosis. A following addition to the same letter contains information which is far more directly suggestive of Abigail’s personal medical knowledge and skill set. She writes

Tis now two days since I wrote. As to my own Health I mend but very slowly -- have been fearful of a return of my disorder to day but feel rather better now. Hope it is only owing to my having been fatigued with looking after Tommy as he is unwilling any body but Mamma should do for him, and if he was I could not find any body that is worth having but what are taken up already with the sick. Tommy I hope is mending, his fever has abated, his Bowels are better, but was you to look in upon him you would not know him, from a hearty hale corn fed Boy, he is become pale lean and wan. Isaac is getting better, but very slowly. Patty is very bad. We cannot keep any thing down that she takes, her situation is very dangerous. Mr. Trot and one of his children are taken with the disorder.

Not only is Adams clearly demonstrating observational skills here (that is, in her description of Tommy’s transformation from a ‘heartly hale corn fed boy’ to one ‘become pale, lean, and wan’), but she is obviously noting those diagnostic

¹⁶⁰ MHS.mss.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 8-10 September 1775.
criteria which define the illness at hand by considering the boy’s fever and bowel habits. Moreover, alongside her diagnostic, and indeed, hopeful prognostic, skills, Adams is clearly engaging first-hand with both medical ministrations generally in nursing both herself and her family back to health, but also demonstrates familiarity with botanical medicines specifically.

The first half of Abigail’s letter dated September 8 contained a plea to her husband not to ‘forget my Herbs for your own sake as well as mine. -- Ever yours’, indicating that the combination of domestic provisioning continues unabated, despite, and in conjunction with, the professional provisioning she described in terms of the doctor’s visit.\textsuperscript{161} And the second (written September 10) further implores him to

\begin{quote}
By the first safe conveyance be kind eno to send me 1 oz. of turkey Rhubub, the root, and to procure me 1 quarter lb. of nutmegs for which here I used to give 2.8 Lawful, 1 oz. cloves, 1 of cinnamon. You may send me only a few of the nutmegs till Bass returns. I should be glad of 1 oz. of Indian root. So much sickness has occasioned a scarcity of Medicine.\textsuperscript{162}
\end{quote}

The Adams’ experience of domestic provisioning was both immediate and ongoing; in 1775 following an outbreak of dysentery, Abigail writes of how their ‘House is an hospital in every part’, before noting that ‘such is the distress of the neighbourhood that I can scarcely find a well person to assist me in looking after the sick’.\textsuperscript{163} It is in no large part Adams’ observational and diagnostic skills along with her treatment of ailments via the administration of her ‘herbs’ that gives credence to her agency. Her ability to practice within the wider

\textsuperscript{161} MHS.mss.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 18 August 1776.
\textsuperscript{162} MHS.mss.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 8 - 10 September 1775.
\textsuperscript{163} IBID.
neighbourhood is a direct result of her authority in accessing the wider, communal, domestic botanical culture and practice.

Nor is this agency simply an example of Colonial, ‘can do’, mentality. Domestic agency and authority surrounding the intelligent use of botanical knowledge may be ferreted out of the relationship existing between preparation instructions and application or ministrations in a number of seventeenth and eighteenth-century English recipes also. For example, in her recipe ‘for an Ague’ (1664-1729), Mary Bent stipulates that the botanical, here a simple made of powdered Jesuit’s bark, or Cinchona, be moistened and spread on leather before being applied as a plaster to the ‘writes, crown, one for ye Navill … one for each Foot to goe under the Foot to meet on ye Topp of ye Instepp’.164 And Elizabeth Freke is frequently inclusive in terms of the breadth of knowledge demonstrated in her recipes; commonly including not only ingredients and preparation instructions, but also what the remedy is good for, and how to administer it (c.1684). In her recipe titled ‘Wormwood Watter: Mr Cullpeper’, Freke instructs the householder to

Take of common & Roman Wurm wood of each a pound, Sage, Mints, Balmes of each to handfuls, Gallingall, ginger, Callamas , Aramalicus, Elicompane of each half an ounce Licorisse to ounces, anice Seed, & Sweett Fenell Seed of each half an ounce, Ciniman, Cloves, Nuttmegs of each 10 dragms, Cardemons & Cubibs each one dragme, bruise the hearbs small & beatt the spices, and infuse them 24 hours in wine or very strong March best, next day putt yt fowr Gallons of Liquor into a Limbeck and destill itt. And Mingle itt or keep itt by itt self as you think fitt only sweeten the smaller with Loaf Suger ~ this watter is a great restorer of Nature In ‘old’ people ~ spoonfuls some times.165

164 WL.ms.1127, Mary Bent’s Receipt Book, 1664-1729, p.177.
There is no recipe for ‘Wormwood Water’ in either Culpeper’s Complete Herball, or the English Physitian. Indeed, the former contains only a fraction of the herb-specific material included in the latter, but neither contains even a comparable remedy to that found in Freke’s manuscript. There are instructions on how to make simple general waters in both, however, and Culpeper’s account of Wormwood in The English Physitian includes a wealth of other information, including its use in age related ailments (alongside its ability to provoke urine, help ‘surfets [and] Swelling in the Belly’, the bite or sting of any ‘martial Creature’, ‘chollick’, and ailments of the spleen. Far from being a simple redaction of a recipe existing within the public, elite, sphere of printed knowledge, Freke’s remedy seems to be a consolidation of individual domestic knowledge garnered from a wide wealth of sources.

This ‘widening’ culture whereby domestic authors engage with, indeed adopt and adapt, aspects of the prevailing ‘great’ medical culture may be further traced in the complex relationship between advice in vernacular works and instruction in receipt books. Transmission of domestic botanical cultures and knowledge, along with its associated ‘authority’ rests in many quarters with household manuscripts combing information from oral domestic sources with material derived from printed text. For example Katherine Davis’ manuscript of 1701 is constructed using the typical English receipt book format with a wide range of medical receipts containing lists of botanical ingredients and basic preparation and application instructions. It also contains further notes on specific botanicals written in a second hand throughout the text (filling in spaces

left by K.D. for later additions). These seem to be copied from a herbal (along with one passage written in Katherine’s own hand describing ‘The Virtues of the Oke tree as I found it within an ancient manuscript’). The second hand also uses medical annotation such as ‘Rx’, suggesting at least a passing familiarity with elite, learned, medical practice. While the bulk of recipes clearly mirror the content and format of the communal domestic culture, and reflect oral, and associated scribal, cultures, these later additions suggest a familiarity with learned sources and even, in the use of ‘Rx’, of medical practice. The lack of theoretical rationale, however, equally suggests that Davis, and her co-author, are claiming those bits of printed, popular and learned, practice which best suit their domestic needs. This adoption and adaption is, by its very nature, a hallmark of domestic culture in practice. For each of the authors cited here there is a clear sense of an underpinning knowledge, skill, experience, and confidence in addressing a range of medical concerns with botanical agents. This body of knowledge and practice defined the ‘agency’ of those authors as individuals, and in turn fed into, and defined, the ‘agency’ of the communal botanical culture itself.

Scribal in Print Cultures: Colonial Sources

The mixing of cultures and transmission pathways is everywhere apparent in scribal sources, and the ‘messiness’ of some of the later, Colonial, sources is even more notable than that found in the Early Modern English manuscripts. Margaret Ezell comments on the physical nature of scribal

167 BL.Eg.ms.2214, Katherine Davis’s Receipt Book, c.1701. For example, there are notes on ‘celendine’ and ‘chamomile’ fol.12v, The ‘Oke’ recipe may be found fol.29r, examples of medical writing fol.38r.
compilations, with additions and amendments altering the original source (which may, in itself, have been compiled in a higgledy-piggledy, ad hoc, manner).\textsuperscript{168} The richest vein of information for domestic use of plants continues to be the ‘receipt books’ on both sides of the Atlantic, even these also vary hugely in their content and scope. That said, differences within receipt books are indicative that no fast or easy rules may be drawn here: Mary Corlyon’s fastidiously ordered English medicinal manuscript of 1660 is a straightforward working text compiled by an orderly and practical mind, with ease of use clearly built into its design. The contents are relatively ordered, and clearly catalogued and indexed. Contrasting with this is the very personal, anecdotal script contained in Elizabeth Coates Paschall’s Colonial Receipt Book of the early-eighteenth-century where remedies are contextualized within narratives describing the exact nature of how the author received them, often with dramatic retellings of how, where, and when they were used, with what effects. This is a rather exuberate, and personal, version of the ‘probatum est’: Paschall is not only telling us the remedy works, but she is attempting to show us via the relation of her medical stories.\textsuperscript{169} This is not to suggest that a simple Anglo-American divide existed, however; with greater reticence and decorum being exhibited by English authors, and narrative abandon regularly embraced by Colonialists.

For example, in contrast to Paschall’s manuscript is Catherine Haines’ Receipt Book, also written in early- to mid-eighteenth-century Philadelphia. This contains a far greater range of material than the Paschall source, both in

\textsuperscript{169} CP.ms.168289.Class 20e.No.352, .unfoliated, Elizabeth Coates Paschall, Receipt Book, 1702-1753.
its medicinal scope, and in its communal relativity. Thus the recipe ‘for a violent Chollick Pain in the Bowells [in a Miscarriage]’ found in Paschall’s book begins ‘I once was verry Bad with a violent pain in my Back & Bowells…’, while Haine’s recipe for ‘Deborah Morris’s Cholick Drops’ begins with a simple list of ingredients: ‘One ounce of Vollital Aromatick/ one ounce of Vollital fidit’; and ends with dosage instructions: ‘- if the Cholick Continues Violent if may be repeated every hour till Easy’. In each remedy, the botanicals used are given: Paschall recommending a topically applied oatmeal and chamomile glister, while Haines uses an internal formula based on laudanum dispersed in an aromatic distillate. The structural differences in the delivery of each remedy, however, suggest a profound difference in how each author perceives the medicines and medical practice. Indeed, Paschall’s personal, anecdotal narrative holds more in common with Moody Follensby’s ‘health journal’ than with Haine’s working Receipt Book, despite ostensibly falling into the same category as the latter.

On the one hand, Haine’s work is a jobbing text, closely mimicking early English receipt book formats. It contains a range of recipes, both culinary and medicinal, with various attributions, the occasional personal approbation, and a mixture of information relating to botanicals, manufacturing instructions, and tips on dosage and administration. On the other lies Follensby’s brief, personal health narrative history as written in the almanac’s margins over the course of a year. And somewhere in the middle lies Paschall’s relation; a far

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170 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, Notebook, 1776.
more intimate narrative recall than Haine’s work, yet containing more practical information than Follensby’s. Paschall’s work is a personal relation of her own, or a named source’s, particular illness. Here the botanical information acts almost as an effecter character within the larger tale of an illness successfully, sometimes almost miraculously, overcome, and indeed, Paschall’s recipes are almost exclusively presented in this personal narrative, case study, format. What does seem to be happening to a varying degree with these texts is a willingness on the part of the Colonial authors to break with the accepted format and stylized individualization of the Early Modern English receipt books. Equally, in this wider context, Follensby’s diary and Paschall’s work may well indicate a new world individualization in the perception of health and health care creeping into Colonial medical narratives which is further explored in Chapter Six.

Broadening out from the receipt books alone to a wider reading of domestic scribal sources, we see concern with health and health care more widely in a number of Colonial sources, including Moody Follensby’s diary, and Elizabeth Coates Paschall’s Receipt Book. In Moody Follensby’s Massachusetts’s Diaries (leafs interspersed with an Almanac of 1765-1766), references to ailments are found written within the Almanac body itself. Across from the printed text for January, 1766, Follensby summarizes his health over the whole of the year, writing

172 CP.MS.168289.Class 20e.No.352. Elizabeth Coates Paschall’s Receipt Book (1702-1753). As considered in the introduction, the thesis is concerned with identifying and tracing the domestic botanical culture generally, with the provision that it clearly existed primarily within a domestic, feminine, province, with a greater proportion of male contributors from the early colonies, as seen here in Follensby’s ‘almanac’. That caveat aside, the gender of individual authors is irrelevant when outlining other of the culture’s key characteristics.
Jan.23rd. was taken with a violent swelling in the face called St Anthony’s fire, which turned into ye gout which went into all my Limbs and confined me to my bed for a week was unable for some days to turn in my bed without help –

April 20th. Taken with ye gout in my neck right hand both knees & both feet was confined to my bed for five days, very sure of rain but ot able to go about my Room - Very free from the gout this summer till sometime in Set. The weather changing but raw in my limb and on Saturday 20th had ye gout in my right shoulder and hand very painful went into both my knees & feet kept my bed two days not able to go without crutches for a week able to go about the house Oct 11th went so far as my gate

Nov.15 taking with the gout in my left hand which swelled very much went in to bath my elbows, neck went to bed Nov. 18th and from thence into my left knee, very pain full something of it in both feet lay in bed full of pain and no use either hands till Thursday the 28th and was then got out of bed the pain greatly abated could just go across room

January 1767.

The ‘almanac diaries’ also mention ‘a cure for the yellow Jaundice’ attributed by Follensby to ‘the late L. Blakeny who cured great numbers thereby in Ireland Minorca and the Kingdom, and which he never knew to fail’, but Follensby is clearly not personally interested in the medical process, referring to his experiences as a sufferer (and occasionally, as a patient), without listing those medicines and treatments employed, or evaluating and relating their relative efficacy. This focus on health matters rather than botanical preparations is not uncommon in personal Early Modern English and Colonial American letters and journals, but it is, perhaps, suggestive of a beginning divergence in terms of ‘working books’, that is to say, rather than representing the sort of personal anecdotal information we might expect from Early Modern

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174 IBID.
and Colonial letters and journals per se, Follensby’s almanac diary, existing as it does interspersed within a reference text, may indicate an association with practical application which isn’t necessarily apparent in the ruminative, narrative communications of an intimate letter or journal entry. While not a receipt book itself, Follensby’s diary harks back to the domestic manuscripts in its expressions of individual adaptation and ownership of medical material. Follensby’s work is clearly not a communal compilation, however, but rather an individual homesteader’s notes and observations, including those concerned with health. There is a disconnect with the older European tradition, despite Follonsby’s clear personal connection (several notes in the almanac margins mention the comings and goings of acquaintances to London, for example). Nor is this simply a question of gendered authorship: Paschall’s receipt book, which is clearly derived at least in part from the earlier domestic norm, is equally an instance of personal homesteader compilation.

There seems to have been a willingness of American authors to break with those conventions in receipt book compilation which the majority of English authors adhered to. For example, while there was variation in the degree of cataloguing and indexing in the earlier English sources, as well as variation in the inclusion or not of either preparatory or delivery instruction, these manuscripts were typically fairly formal in that they were intended to act as reference works, and there is little overtly personal narrative or information other than that of attribution. This contrasts quite starkly with some of the American sources. In the later Colonial works, we see a mishmash of individualized standard domestic botanical receipts alongside recipes gleaned from learned
text, popular print, and lay anecdote, as well as a good deal of authors’ personal comment and a willingness to include the personal emotional responses to health care issues and treatment already considered, which is entirely missing from the Early Modern English works.

Elizabeth Coates Paschall’s receipt book of 1702, for example, allows for a personal narrative to emerge which changes the nature of the communal exchange: her direct anecdotal recipes bear little in common with the earlier formalized receipt book carrying few personal identifiers. Nor is Paschall’s emotive collection the only way in which Colonial manuscripts begin to differ from their English prototypes; alongside the emotive content is an increased reliance on popular print within the script sources. Margaretta Prentis’ Williamsburg work of the 1780s contains a far greater wealth of information directly attributed to popular print than is typical of English sources. Her recipe for ‘a certain cure for the cholic flux, Gripes or Indigestion’ is attributed to a ‘London Magazine, 1755’, followed by one of which Prentis writes ‘This Rec. taken from a Newspaper, where it is said to be an infallible cure for the bite of a Mad Dog’.175 Yet another ‘For the Hooping Cough’ is attributed to a ‘European Maz. Nov.1794’, with Prentis’ personal commendation that it is ‘a simple and effectual Remedy’. Unlike Paschall’s work, which refers almost entirely to personal exchange, Prentis’ work suggests that the oral origins of domestic practice are being replaced by, or substantially enhanced by, text-based sources. Earlier English and Colonial manuscripts clearly owe the majority of their contents to personal sources, whether friends or family, and it is likely that

175 UP.ms.5035.3, Margaretta Prentis, Williamsburg Cookery & Medical Recipes, 1780s, pp.25,26.
that transmission occurred via a personal route, whether oral or scribal, those recipes with designated attribution in Prentis' manuscript cite printed material. This change in transmission and reception, which is reflected widely across the eighteenth-century Colonial manuscripts, marks the end of the common ‘Anglo-America’ domestic practice as such, and heralds in a greater differentiation between the two.  

Scribal sources, particularly domestic receipt books, have been examined by the thesis in Chapter Two as a means of gaining ingress into the individualized expression of the communal botanical practice outlined in Chapter One. Indeed, this Chapter has focused on the scribal medium by which domestic botanical culture was expressed, rather than on the plants themselves, as a means of identifying some of the key characteristics of the overarching practice. These domestically authored sources speak both to the complexity of the communal knowledge base and its transmission, as well as to its flexibility and adaptation at the hands of those administering it. The question of domestic authority and ‘agency’ (as a reflection of domestic claims of ‘authority’ over, and skill in employing, the botanical canon), has also been examined here in order to provide a fuller picture of the botanical culture. This has included consideration not only of individual recipes, but also of the detailed adaptation and familiarity which domestic authors demonstrate in preparing and delivering these medicines. Ultimately, questions of agency and authority speak to both the communal, and the personal, relationships between authors and the botanical culture they employ. In particular, reflection on the structured  

176 Consideration of the difference in practice illustrated by Prentis’ manuscript is considered in the chapter on new world botanicals.
expression of the common domestic culture in English sources may be seen to
give way to more emotive Colonial individualization, reflecting the development
of larger political and social schisms in the Anglo-American world, which will be
further considered in Chapter Six and in the conclusion. There is, however, no
question that the agency of domestic authors across the whole of the culture
determined that culture’s overall shape and character. Indeed, it is the
communal willingness of individuals to engage, adapt, and personalize the
herbal canon which gave the domestic culture its composite, ‘bricolage’ nature,
and provided a strong, common ‘little’ tradition in both England the American
colonies.
Chapter 3. Popular Culture and Print

This Chapter looks at the role and influence of printed sources and popular concepts on domestic botanical culture, as well as the converse impact of the domestic culture on thinking and practice in the public sphere. The complex composite nature of the domestic practice, while originating in oral traditions, and largely evidenced in scribal sources, was responsive to, and influenced by, printed sources. The degree and manner in which these printed sources influenced the domestic practice were variable, both for individual practitioners and households, and for the domestic culture as a whole. The effect of literacy, here defined as the ability to both read and write, across genders and social strata, is examined in order better to establish the interaction of printed works and the domestic use and perception of botanicals. The Chapter examines almanacs, herbals and vernacular medical texts as exemplars of the popular knowledge and practice. It also investigates the characteristics of settler texts, which will be discussed in the context of Anglo-American practice in Chapters four through six. In further establishing what is unique about the domestic botanicals, this Chapter lastly turns to examine the multiple strands of botanical cultures: learned, popular, and domestic, considering both those characteristics which are shared across each domain, as well as establishing differences between each.

Printed text sources have long been regarded as the mainstay reservoir for information specific to engaging with past medical understanding and theory in general, and with past practical applications and knowledge surrounding
medicaments specifically. David Lindberg writes of the importance of transcribing oral information into textual resources as a means for allowing ‘the formulation of criteria by which truthfulness could be ascertained’. He further theorizes that from this ‘effort to formulate suitable criteria’ emerged rules of reasoning, which offered a foundation for serious philosophical activity’.177 This tendency towards categorization allows for a degree of rationalization within a ‘learned’ context. The systematic organization and ordering of a body of practice itself establishes patterns which then enable the discernment of further patterns, fostering the construct of a theoretical rationale which is then re-applied to the original practice. Text sources enable practitioners to explore and explain how it is that medicines work within the body, that is to say, ‘what they do’. Further, this textual body of information becomes dissociated from the human practitioner and environment, taking on a substance and legitimate life of its own. It becomes an entity to which learned practitioners refer, and build upon, a structured and rational body of work. The advent of printed source material may then be read in terms of medical progress whereby there is a greater linear process defining the body of knowledge as it passes through developing cultures. Carole Counihan also considers this typical progression of medical knowledge transference from the oral through to the printed in terms of social systems, whereby the written forms supplant oral traditions, with an increasing level of reflective knowledge corresponding to the physical organization and order. For medicine, Counihan supposes that it is print which facilitated ‘the ability to examine critically a list of ingredients, their mode of employment, and [write] reports of the results, then to share and diffuse this

knowledge for the use of practitioners and their patients. This allowed for a progressive improvement in medical provisioning generally, and in the regularization and efficacy of medicines in particular. In this line of thinking, the ability to theorize, both the attempt to explain and the ability to predict remedial results in a replicable manner, is dependent on exactly the sort of systematic approach afforded by written, particularly printed, transmission. Just as importantly in this construct, medical knowledge may be seen to be ‘evolving’ from an amorphous, unreliable, and changeable practice when implemented as part of an oral culture. The domestic culture, in contrast to the learned culture seen in written, particularly print sources, exhibits overly individualized and anecdotal characteristics which even when transcribed into receipt books, is still prone to subjectivity. In terms of medical constancy, a relatively stable, and therefore reliable, structure and format are only read as having been attained once the knowledge and practice are firmly placed within print cultures. There is an assumption, widely accepted, that the efficacy of a body of remedial agents is tied to this idea of progressive practice, which is in turn tied to both theoretical models and to the printed medium.

The largely oral and scribal expressions of a domestic botanical culture were, by their very nature, largely unconcerned with the theorizing, the ‘how’ and ‘why’, surrounding botanicals, instead focusing on simple transmission of practical, empirical information, or questions of ‘what do you have to do to make them work’. Thus, Lindberg’s observation that

\begin{quote}
giving permanent form to the spoken word does not merely encourage inspection and criticism ... it also makes possible
\end{quote}

\footnote{Carole Counihan, \textit{Food and culture: a reader}, (Routledge, 2008), p.78.}
new kinds of intellectual activity that have no counterparts (or only weak ones) in oral culture

may be read as referring entirely to the plausible rationale rather than the practical actuality of a practice. Reading ‘intellectual activity’ narrowly, and in terms of the ability to theorize, Lindberg’s statement holds true. If, however, we extend it to include the body of practice whereby anecdotal and empirical information is directly shared orally and communally, it does not. Indeed, the current scientific paradigm which privileges replicable testing, the ‘doing of a thing’, as a means of substantiating a practice, holds more in common with the oral culture than the intellectual theorizing often found in early text-based cultures. Not only was the domestic culture consisting largely of the botanical canon able to readily be adapted to given circumstances on the ground by individual practitioners in a way that theory-bound practice perhaps was not, the remedial agents underlying this flexible approach reflected communal empirical use (what was tried and tested) in a way that medicines administered according to theoretical models did not. ‘Learned’ medicine was not only highly dependent on elite theory rather than practical application, but it was also keen to embrace the use of new, highly active, agents into both theoretical models and patients’ sick rooms, with varying results. The domestic culture, drawing on inherited practice, may be seen to be far more circumspect in terms of adopting powerful new products: they typically used chemical agents, for example, far less frequently than professional practitioners. The domestic culture here may be typified as consisting of an inherently conventional and

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largely consistent canon of herbs with a circumstance-centred prescribing habit based on empirical evidence and experiences, whereas the learned practice was radical in its embrace of new ‘cutting-edge’ medicines, and commonly theory-based in prescribing. Moreover, by making medicine a theory-based practice rather than a practical one, the Early Modern professional practitioners may well have condemned their practice to the largely ineffective. Indeed, as will be explored elsewhere, it is entirely likely that the empirical, oral tradition practised within Early Modern households was considerably more effective, in measurable terms of ‘making people better’, than the professional practice. It is entirely likely that any efficacy of the domestic botanical culture was a direct result of its unwillingness to embrace the theoretical systematization afforded by textual transmission.

Domestic botanical culture, as outlined by the thesis, is largely determined by its *materia medica*, that is to say, it consists almost solely of plant-based medicines, and these medicines, their preparation and application, largely constitute the medical practice itself. Thus any practice, or source, which also limits itself largely to a botanical canon of medicines, such as herbals, exhibits as least some of the characteristics of the domestic culture. Likewise, any text which is largely non theoretical, basing the intended use of a medicine on its perceived action rather than on a humoral or astrological theoretical structure, such as the vernacular medical works, also exhibits characteristics of the domestic culture. The inclusion of theoretical frameworks, a wealth of non-botanical agents, or the absence of practical instructions within printed sources, on the other hand, may well be associated with more learned practice and
thinking. Thus almanacs and herbals, regardless of authorship, typically contain botanical-based medical advice, but this advice is often couched within theoretical terms, thus exhibiting characteristics of both cultures. Conversely, vernacular medical works, while generally authored by physicians, largely mirror the botanical content and framework of domestic sources, while eschewing theoretical rationale, thus representing a sort of domestic, oral culture accessed via a learned, print venue. In each instance, the variable defining characteristics of the printed sources, particularly as this relates to their structure, botanical information, ancillary instruction regarding preparation and administration, or the inclusion of learned medical theory, suggest a range of relationships existed between domestic culture and printed texts.

As considered in Chapter Two, a substantial amount of scholarly attention has been given to analysing, describing, and tracing intellectual medical theory across the period from Dioscorides through to Galen and the later Paracelsian and ‘chymical’ practitioners. Much of the literature surrounding Early Modern domestic practice likewise focuses on its assimilation of this theory, largely as evidence of women’s appropriation of cutting-edge scientific, elite, knowledge. Medical texts for domestic consumption had a complicated relationship with their readership across the period considered by the thesis. Some domestic authors specify the authorities they consulted,

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182 How women fit into this ‘scientific’ history of medicine specifically has been considered by authors also, as seen for example in Lynette Hunter and Sarah Hutton’s *Women, Science and Medicine 1500-1700* (Stroud: Sutton Publishing, 1997). Examination of medical theory acquisition by scholars such as Elaine Leong and Linda Pollock is further discussed in the introduction,
perhaps indicating that they felt both ‘beholden’ to these greater voices, as well as verified by their association. In the late-sixteenth-century, Lady Grace Mildmay wrote that

Every day I spent some time in the herbal and books of physic, and in ministering to one or other by the directions of the best physicians of my acquaintance.\(^{183}\)

Mildmay’s willingness not only to consult, and to consult widely, but also to acknowledge her authoritative sources, may well be seen to exemplify both a willingness, and an ability, to play with the concepts of medical theory. On the other hand, while of immense importance for intellectual work (and its historiography), it could be argued that the removal of medical and medicinal knowledge from the largely practical sphere had negative implications for medieval and Early Modern regulated (elite, professional) practice, a situation only mitigated in the case of Mildmay’s work by her continued practice in very real, physical terms of actually observing, listening to, and consulting with her patients, alongside reading elite medical theory.\(^{184}\) Moreover, while Mildmay consulted a number of learned authors, Linda Pollock notes that ‘Avicenna, Villanova, Da Monte, and Paracelsus’ are all mentioned by name in Grace Mildmay’s writings, the majority of her receipts contain little overt medical theory, but rather follow the typical domestic format: list of ingredients, written preparation instructions, and detailed information on administration.


\(^{184}\) An interesting comparison might be drawn, for example, between the experience of patients within a domestic setting receiving only household attention, and the well documented case of physicians dialoguing over the possible theoretical causations and their best remedial implications in the treatment of George III’s maladies.
Leong comments on the influence of a number of regular practitioners on the medical work of Elizabeth Freke (particularly Gerard, Culpeper, Moise Charas, and George Bate), and Stine writes on the influence of elitist knowledge in Anne Howard, Countess of Arundel’s manuscript writings.\footnote{Elaine Leong, Op.cit.; Jennifer Kay Stine, 'Opening Closets': The Discovery of Household Medicine in Early Modern England (PhD Thesis, Stanford University, 1996).} A further instance of the individual author ‘legitimizing’ her own receipts by association with expert opinion may be seen in the unique example of approbation on the frontispiece of Elizabeth Digby’s receipt book. The page is headed with the single word ‘Gerard’ followed by ‘Receipts Approved by persons of qualitie and indgment, collected by Elizabeth Digby 1650’, suggesting that Digby, like both Mildmay and Freke before her, is both familiar with elite theory, certainly she has at least read Gerard, and is claiming authority and authenticity for her own work by association.\footnote{BL. Egerton.MS.G2197, Elizabeth Digby, receipts of Elizabeth Digby, 1650.} Yet while each of these authors follow Mildmay’s example in citing authority on occasion, each equally follows the older, communal, domestic format in their usual botanical choice and use.

Catherine Field notes that the common lack of distinction between culinary and medicinal recipes is fundamentally a Galenic tradition where ‘all ingestible substances – foodstuffs, herbs, and medicinal compounds – were thought to be endowed with humoral properties that could have a beneficial or negative effect on the body’.\footnote{Catherine Field, “'Many hands hands':Writing the Self in Early Modern Women's Recipe Books” Chapter 4, Eckerle, Julie A. & Dowd, Michelle M. Genre and women's life writing in early modern England London: Ashgate Publishing 2007 p. 52.} This is actually quite a different assertion to that of Pelling, to whom Field refers. Pelling’s earlier research considered the ‘vast
grey area of overlap between medicines and food, in which women had an established role', but the relationship between the two, culinary and medicinal, is not here necessarily linked to a theoretical exposition (i.e. humoral), but may be read in a more practical light: foods are nutritive and can give sustenance, herbs are remedial and can give relief from ailments. This is an important distinction. Field writes further about the shift between foods and medicines relating to a change in theory with distinctions between culinary and medical recipes appearing ‘as the gradual influx of Paracelsian medicine (with its emphasis on chemical cures and treating a disease ‘retrospectively’) supplanted older Galenic medicine, printed collections’.

While there was a probable occurrence here within regulated medical practice and print which later impacted on domestic medicine, the relationship between Galenical theory and culinary/ medicinal associations versus Paracelsian theory and culinary/ medicinal dualism is not evident in domestic manuscripts. Indeed, for each of the small handful of extant domestic manuscripts referring to elite theory we have at least two dozen which are entirely non theoretical. And even for those personal receipt books which do include theoretical material, such as the works of Lady Grace Mildmay, Elizabeth Freke, or even the occasional reference to humours as seen in Martha Washington’s manuscript, learned theory is not consistently or universally applied. As already considered, even in Mildmay’s work, which contains the greatest amount of elite theory of those manuscripts under present scrutiny, the vast majority of recipes contain simple instructions of what to

188 IBID.
189 IBID p. 53
include, in what manner, and for which particular ailment, without theoretical underpinnings. Clearly the prevailing domestic botanical culture, even for those authors keen to embrace learned medical practices, reflects a non theoretical norm.

Nor is the simple inclusion of theory the only differentiating feature between many printed sources and domestic culture. The very nature of the information contained within sources itself was seen to change with the coming of print. Indeed, Early Modern authors themselves were aware of the dangers inherent in a system of transmission which exists solely within the printed sphere as early as the seventeenth-century. John Aubrey wrote of the danger of losing a wealth of oral information and stories due to this very phenomenon:

Before Printing, Old-wives Tales were ingeniose: and since Printing came in fashion, till a little before the Civil-warres, the ordinary sort of People were not taught to reade: now-a-days Bookes are common, and most of the poor people understand letters: and the many good Bookes, and variety of Turnes of Affaires, have putt all the old Fables out of dores'. 190

There is a danger of assuming that each form of transmission is exclusive, and of simply accepting a theory of ‘progression’ which suggests that oral traditions ‘grow’ into scribal ones, which then ‘develop’ into printed ones. Joseph Dane, in looking specifically at the written traditions, disputes this idea of ‘cataclysmic historical displacement’, writing that

any late instance of ‘the scribal’ challenges the notion of a paradigm shift of culture. Print culture (however defined) does not displace scribal culture (or at least scribal culture understood as scribal production, that is, as something evidenced by products of scribes). Scribal and print culture, if these things exist at all, coexist. They did in the late Middle Ages, they did in the Early Modern period, and they still do today. 191

190 John Aubrey, Remaines 140v as cited by Dragstra ‘Before Woomen were Readers’, p.43.
Yet Elizabeth Eisenstein successfully delineates how one might reasonably differentiate between the two (scribal and printed) cultures, partly by highlighting similarities between the scribal and the oral. For while printed texts share a certain level of homogeneity, indeed, ‘early print culture is sufficiently uniform to permit us to measure its diversity … we can estimate output, arrive at averages, trace trends’, the same cannot be said of oral and scribal traditions.\(^\text{192}\) Indeed, in tracing the adaptable nature of scribal culture, which she perceives as being ‘so fluctuating, uneven, and multiform that few long-range trends can be traced’, Eisenstein highlights the very permanence and concreteness of the textual culture. Where oral and scribal traditions are fluid and personal, print cultures are material and public – they are by their nature traceable. This very traceability both makes textual content more accessible (and likely to be referred to, for example, by historians), and also more dogmatic: that content is more likely to become the acknowledged ‘norm’, both by contemporaneous practitioners, and by subsequent scholars. Tracing this (largely masculine, elite) intellectual and theoretical medicine as evidenced by texts has been the norm for historians, rather than the exploration of those traditional practices and that body of traditional knowledge that were oral, fluid, and feminine in nature. This trend has perhaps been fed by the assumption that the very best knowledge and practice of a period is what makes it into print, which may not always have been the case.

Learned Theory and Literacy in the Domestic Setting.

A number of authors, including Stine and Leong, are interested not only in how ‘learned’ theory was appropriated and adapted by domestic practitioners, but each has considered the value of domestic medicine as an expression of knowledge and communication networks within Early Modern English society more generally.\(^\text{193}\) Leong has pointed out that domestic practitioners garnered information from a wide range of sources, including private, public, professional and charitable practices, tracing the impact of the ‘popular’ medicine of the day on personal domestic remedy making.\(^\text{194}\) Nor are these scholars alone in suggesting that physicians and regular practitioners were just as likely to borrow from domestic practitioners.\(^\text{195}\) In truth, it is likely that this was a two-way street. On the one hand, ‘learned’ theory impacted on popular culture generally, and household practice specifically, via authors like Culpeper, who mixed Galenical approaches to diagnosis and prescribing with his own astrological theory. On the other, ‘tried and tested’ empirical knowledge of the private sphere influenced practice in the public domain, with remedies originating in domestic still rooms moving into physicians’ practices.\(^\text{196}\) Pollock points to the inclusion of ‘recipes


\(^{195}\) Cf. Doreen Evedon Nagy’s examination of the recipes of one Dr Symcotts in her essay, ‘Lay and learned medicine in early modern England’, *Health, disease and society in Europe 1500-1800*, p41. Nagy writes that ‘further research is needed to establish firmly the debt which seventeenth-century physicians owed to lay practitioners of earlier generations’.

\(^{196}\) ‘Still’ rooms were domestic spaces used for the production of medicines, though this work probably occurred in the kitchen rather than in bespoke rooms in the majority of homes. The
in private circulation in the late sixteenth- and early-seventeenth-centuries that differed from contemporary publications but which could be incorporated in later works’, while Fissell writes that ‘in England in the 1650s, printed remedy books, clearly bearing the traces of their manuscript origins, became best sellers’.\(^{197}\)

Vernacular works were indebted to the earlier domestic medical practice, but equally true is their likely popularity within many Early Modern households.

Secondly, the popularity of vernacular medical works aimed at a domestic audience, has been widely recorded elsewhere by a number of scholars. For example, Michael R. Best traces the popularity of Gervase Markham’s writings, noting the number of printings, not only of Markham’s books, but of those further English editions accredited to other authors which clearly plagiarized his work.\(^{198}\) Markham’s work was popular not only with English audiences on the eastern shores of the English speaking Atlantic, but also found its way to the American colonies: Mary Tolford Wilson points to the copy of Markham’s work on ‘husbandry and huswifry bound together and for the likes of Gowges &c’ listed in the shipping records of the Virginia Company of London for export to the American colonies in 1620.\(^{199}\) Wilson also traces the practice of authors ‘borrowing’, or in many cases, simply reprinting, whole texts under their own names, specifically in relation to the ‘theft’ of Amelia Simmons’ term ‘still room’ is therefore often used to refer to the specific use of a space to distill aromatic waters.


early American cookery book. Both a full analysis of the extent to which earlier
domestic practice wended its way into authoritative texts, regardless of whether
they be vernacular works aimed at a domestic audience, or specialist medical
reference works, as well as research considering how these texts borrowed
from each other, provides grounds for substantial future research. Gauging the
influence and import of printed texts on the domestic botanical culture is difficult,
though current scholarship is making considerable inroads into doing so.
Domestic practitioners were undoubtedly capable of both reading and writing,
and equally, many were regularly accessing written material with medical
content.

Tebeaux writes of the popularity of vernacular works written for a lay,
domestic audience, which can, ‘if we use numbers of editions as an indicator,
tell us a great deal about the technologies used by women in their homes …
and about the literacy level of women readers who are often assumed to have
had poorer reading skills than men’.200 It would be wrong to assume that the
knowledge and skills surrounding domestic medical knowledge and practice
was primarily the province of an educated elite. On the contrary, those with less
wealth, education, and resources would have had less access to professional
health care and been more reliant on home self-care than privileged
households. Research into literacy rates, particularly for immigrants to the
American colonies, suggests that we need to be careful about what
assumptions we make regarding readership. By the end of the Early Modern
period, in both the British Isles and the American colonies, a substantial portion

200 Elizabeth Tebeaux, ‘Women and Technical Writing, 1475-1700: Technology, Literacy, and
Development of a Genre’ Hunter & Hutton, eds. (1997), Women, Science and Medicine 1500-
of the populace was literate; this is particularly true of Puritan communities where an ability to read the Bible was highly valued.\textsuperscript{201} Lawrence Cremin writes that ‘estimates of adult male literacy in England ran from 48 percent in the rural western midlands to 74 percent in the towns ... adult male literacy in the American colonies seems to have run from 70 percent to virtually 100 percent’.\textsuperscript{202} Likewise, Kenneth Lockridge found that

in 1660, 60 percent of New England males signed their wills; it was 70 percent in 1710, 85 percent in 1760, and 90 percent by 1790. He estimates that half of those unable to sign wills could read. Thus, there was practically universal adult male literacy in New England by 1790, with only a slightly lower level of female literacy in the same population group.\textsuperscript{203}

Considering the likelihood of widespread literacy across Anglo-American society, we may reasonably assume that print played a substantial role in domestic botanical culture across social strata. Indeed, it is unlikely that early manuscripts and receipt books are solely indicative of an elite domestic

\textsuperscript{201} Geoff Baker and Ann McGruer, ed., \textit{Readers, Audiences and Coteries in Early Modern England}, (Cambridge Scholars Press, 2006): Between 1500-1700 literacy rates in England underwent a sizeable increase. Estimates based primarily on the number of individuals who could sign their name suggest that throughout the seventeenth century, for instance, male literacy rose from thirty percent to almost fifty percent, and female literacy from ten percent to at least thirty percent. However, these figures may underestimate the actual extent to which the ability to read was spread throughout the populace. Margaret Spufford has shown that in the seventeenth-century children were generally taught to read before the age of seven, though not taught to write until they were eight. Due to the economic circumstances of many families children were often withdrawn from school when they were capable of paid labour, which was usually at the age of seven. Hence, it seems probable that reading skills were much more widespread than statistics based on the number of individuals who could sign their name would suggest. Similar arguments apply to female literacy.


practice, while the later vernacular works speak primarily to a wider readership: the relationship between text and domestic culture is more complex than this simple equation, and reflected wide community variations in domestic use of botanicals and in household literacy rates. Further to Fissell’s admonition that availability of a particular text (i.e. almanacs), while suggesting a popular and widespread readership, does not necessarily imply ‘that this book was therefore read by cowherds and clodplates’, or at least not read *solely* by the unlearned, so the existence of a handwritten manuscript does not by necessity mean that the author was a gentlewoman or member of an elite household. Reading further into burgeoning literacy rates and acquisition of ‘popular’ vernacular works, Fissell questions both the readership and the readers’ relationship to the text into a quasi-substantive relationship whereby ‘our imaginations can dream up a plethora of potential encounters between reader and book’, and as an extension, perhaps, between communities and individuals within communities and written knowledge more generally. While there may well be a correlative relationship between the author’s manuscript and vernacular works of the time, it is equally possible that Fissell’s ‘encounters’ may be extrapolated to that existing between a manuscript author as medical practitioner and the botanicals which she utilizes and transcribes to the page, both in cultural and in material terms. Indeed, we may read personal domestic manuscripts as evidence of the intimate relationships found in familial apprenticeships as well as in an individual’s personal relationship with her medicines; the receipt books themselves recording instances of ‘encounter’ within the wider domestic botanical culture.  

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204 Mary Fissell, ‘Readers, text & contexts: Vernacular medical works in early modern England’
Domestic receipt books are interesting not only in terms of what they say about the evaluation and transmission of specific knowledge, but also about how health itself was perceived. This may be seen also in almanac sources; indeed, Horrocks notes of the medical content found in early American almanacs that

the purpose of therapeutic or remedy advice was to restore a healthy equilibrium to a body that had fallen out of balance. The purpose of regiment advice, however, was to maintain a healthy balance by espousing a way of life that would protect the body from a variety of potential dangers.205

Closer to the mark is Laroche’s assertion that ‘the knowledge of herbs and their medical benefits was available through networks of derivative text and other practitioners’.206 By extending our definition of ‘practitioner’ to include those unprofessional, irregular householders carrying the ‘specialist knowledge’ which Vansina spoke of, we find ourselves arriving back at a stage whereby an admission of the role of oral transmission becomes paramount. For the non-elite household, even those where there was a degree of literacy, there may well have been an inability to write, or even to read, script. Rather than the rise of vernacular texts owing its success to ‘the demise of the oral tradition as the major method of transmitting instructions for tasks necessary to the working lives of both men and women’, it is entirely possible that vernacular works initially served to augment and reaffirm the oral practice, before largely supplanting it.207 Moreover, as Tebeaux notes, a substantial number of

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vernacular works, both medical and other, had female authorship by ‘the closing decades of the seventeenth century’. The gradual transitioning of the female ‘voice’ from domestic oral and scribal traditions into printed text seems to have coincided with the eventual erosion of the shared domestic Anglo-American culture towards the end of the eighteenth-century. This is further reflected in a general reduction in domestic medical receipt book production in both Early Modern England and Colonial America, with growing reference to, and inclusion of, matter from printed sources into those domestic sources which were still being produced. It may be seen that women’s embrace of print sources within the home coincided with, and perhaps reflected on, a growing dependency on ‘learned’ knowledge and practice across the eighteenth- and into the nineteenth-centuries. Prior to this point, however, the domestic receipt books provided the primary platform for, and resource of, the domestic culture.

Almanacs

Almanacs have been widely treated as important repositories and sources of domestic knowledge by the literature, and certainly a good deal of cross-over between the popular botanical culture expressed in almanacs, and that of the domestic sphere, existed. Alongside the vernacular herbals and specialist medical texts, a printed source of medicinal knowledge of import for the domestic practitioner is to be found in almanacs. Mary Fissell writes that

\[208\] Tebeaux, IBID, p.31.
'next to the Bible, almanacs may have been the most common form of the printed word found in English households'. Likewise, Louise Curth, in focusing her examination of popular medical knowledge on ‘the golden age’ of English almanacs between 1640 and 1799 speaks of their ‘appeal to different levels of literate society, with the unlettered often sharing in their content when read aloud’. Thomas Horrocks goes so far as to write of the American almanac tradition that ‘because its popularity spread through almost every level of American society, the almanac was, in effect, a microcosm of that society’. And, in her examination of the print history of the seventeenth-century astrologer William Lily’s *Erra Pater*, Fissell demonstrates parity in the appetite for vernacular works in both Great Britain and the American colonies throughout the eighteenth-century. What is clear from all of the scholarship is that almanacs were extremely popular across the Anglo-American spectrum, and throughout the late Early Modern period. In her further analysis of the material culture of these publications, Fissell points to a clear intention of popular dissemination, considering the thickness, weight, and worth of the paper, the quality of the woodcuts, and the cost of the edition generally, finding that the totality indicates a likely availability and readership across social strata independent of evidence of actual ownership as illustrated by finding texts in surviving libraries, or reference to them in receipt books, inventories, catalogues, or personal correspondence.

213 Mary Fissell, Op.cit, p.72-73. The American publications come later, in the 1790s, as opposed to the more regular prints available and consumed in Great Britain from the early 1700s – the earliest edition being 1535.
Commonality of practice between domestic and popular medical cultures may be read in recipes across sources. Thomas Horrocks notes a number of specific botanical remedies aimed at treating dropsy cited in almanacs, including the use of artichokes:

*Poor Richard improved* for 1764 offers a dropsy cure that includes artichoke leaves. The same remedy subsequently appeared in the *South-Carolina & Georgia Almanack* for 1767 and the *Poor Will’s Almanack* for 1771.²¹⁴ Artichoke as a specific remedy for dropsy, or oedema, was common. For example, Gerard’s *Herball* notes that ‘some write that if the buds of young Artichokes be first steeped in wine, and eaten, they provoke urine …’ with an interesting side effect:

I find moreover that the root is good against the rank smell of the arme-holes, if when the pith is taken away the same root be boiled in wine and drunk, for it sends forth plenty of stinking urine, whereby the rank and rammish savour of the whole body is much amended.²¹⁵ Yet this particular use is not typically borne out in the domestic receipt books. Indeed, artichoke is almost never referred to in Early Modern English and earlier Colonial domestic sources. Instead, there are numerous references to carduus, also plants of the thistle family, of which there are several medicinal members. For example, Freke’s receipt book contains a recipe specifying that ‘The Seeds off Cardus Benedictus stampt and drunk doth help the Griefs, pains, & prickings off the Side, and the Griping In the Guts’. Likewise, there are numerous remedies containing carduus in Mary Glover’s manuscript, ranging in use from

²¹⁵ Gerard’s *Herball* (London: 1633).
an expectorant through to a carminative.\textsuperscript{216} We don’t see ‘artichoke’ specifically identified in a domestic source until Margaretta Prentis’ Virginian manuscript of the last 1780s. She writes ‘For a Dropsy’:

Take the large Leaves that grow on the stem of the artichoke, wipe not wash them, stamp them in a mortare, and strain out the juices thro a linen cloth forcing it out. Then put a pint of the juice into a quart Bottle with a pint of good Madeira Wine, or Mountain if the other cannot be had; take three spoonfuls every morning fasting & three … [before] bed.\textsuperscript{217}

The diversity of application and use in domestic works examined here is an interesting one. That these women were using, observing, reflecting, and commenting on remedies both within their own households, and amongst their coteries, is clear. Yet if the majority of domestic authors seem to be passing along one practice, Prentis is accessing another altogether. Indeed, Prentis’ use of texts as a primary source of information, which has already been considered in Chapter Two, is well illustrated here. While the earlier English and Colonial domestic authors are using the term, and quite possibly the different plant, \textit{Carduus benedictus}, Prentis’ use has evolved to reflect the American almanac version of the remedy from \textit{Poor Richard’s Almanac}, based on artichoke, or \textit{Cynara scolymus}, itself derived from Gerard. Again, the fluidity and personal willingness to adapt and adopt within domestic practice reflects an immediate agency and practice at work entirely typical of domestic cultures. It is the ability of the culture as a whole to embrace new source material which is a hallmark of its basic nature.

\textsuperscript{217} UV.ms.5034.3, Margaretta Prentis \textit{Williamsburg Cookery and Medical Recipes}, 1780s, p.13.
Much has been made of the medical content of almanacs and their impact on Early Modern domestic medicine. It is important to note, however, that not all almanacs contained much by the way of medical content, and quite a few none at all. The sole reference to anything even vaguely ‘medical’ in Ben Franklin’s *Poor Richard’s Almanack* of 1753, for example, is the classic ‘Zodiac Man’, which relates external human anatomy to astrology. Moreover, this inclusion almost feels like a sop to those popular expectations demanding both astrological and medical content, the rest of the work consisting entirely of seasonal and climatic information as well as scientific exposition of the Earth’s place in the Solar system. Alongside the likelihood that almanacs (and other popular medical texts) influenced domestic medical practice, there is substantial proof that often the household practices provided the original material which was later resold as ‘authoritative’ advice in almanacs and other vernacular works. While Thomas Horrocks does not analyse the medical content per se, he includes a facsimile of *The Franklin Almanac* of 1838 attributing the use of indigo (*Baptisia tinctoria*) in the treatment of croup to a mother. Franklin’s specifies that this was cited originally in the *Montreal Transcript*:

The Croup

A mother, says the Montreal Transcript, gives as/ an effectual remedy for the croup – a tea spoon full of/ the solution of a piece of indigo, about the size of a pea, in a/ pint tumbler of luke warm water.

Mary Fissell, Thomas Horrocks and Roy Porter all discuss the importance and impact of vernacular works for domestic medicine. Louise Curth speaks of those studies on popular medical books, which, while they ‘have contributed greatly to our understanding of contemporary medical believes and practices … have failed to properly recognize the effect that almanacs had on early modern medicine’. ‘The Medical Content of English Almanacs 1640-1700’, Abstract, *Journal of the History of Medicine and Allied Sciences*, Vol.60, Number 3, 2005, p.255.

Ben Franklin’s *Poor Richard’s Almanack* of 1753. It should be noted that later versions of *Poor Richard’s* did contain ‘cures’ and ‘remedies’. 
This sort of roundabout transmission is entirely in keeping with earlier oral and scribal, non-elitist, communal forms of knowledge transference. The young woman, on being advised to try *Baptisia* by her mother, an aunt, or female neighbour, and finding that it works (*Baptisia* is a potent anti-bacterial immunostimulant), then shares her information with a roving local reporter, whereafter the story is then picked up by *Franklin’s*. In this instance, the almanac reflects a popular culture which exists parallel to the domestic botanical culture. The young woman’s household practice is removed from the domestic sphere, twice transcribed, and assimilated into a public practice.

The transmission of information between domestic and public cultures may be further traced via the recipe for a ‘Lucatella’s balsam’. A version of this remedy appears in Franklin’s American almanac *Poor Will’s* in 1711. Several earlier instances may be found across the receipt book sources, however, particularly in early–seventeenth-century English manuscripts. Examples include not only the ‘Lucatella’ recipe of 1690 attributed to Northamptonshire’s Lady Dolben already discussed, but also a ‘Lucatella’s Balsome’ in Mary Dogget’s *Receit book* of 1602 and ‘Lucatilles Balsome admirable for wounds the Best way’ in Anne Glyde’s receipt book of 1656. Elaine Leong also notes a recipe for ‘Lucatella’s Balsame’ in Elizabeth Freke’s manuscript of 1712, and Martha Washington included a recipe for a pomatum attributed to ‘Lady Lucas’

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(c.1749) which may be related to the earlier Lucatella remedies, speaking to the continuity of tradition.\textsuperscript{222}

Transmission of named recipes such as Lucatella’s Balsom, Parcelsus’ plaster, and so on, suggests a shared culture, whether this is derived from a learned authority, or reflects inherited communal authority, as do instances where multiple sources advocate similar practical botanical applications. For example, a list of botanicals specific ‘for treating disorders of the eyes’, which includes ‘fennel, celandine, eye-bright and vervine’, is to be found in Swallow’s English \textit{Almanacke} of 1653. An almost identical list of herbs to that listed Mary Doggett’s recipe for a ‘most notable water approved, to Clarify ye Eyes from Dimness of sight’ written in 1602, which calls for ‘the Juice of fennel of Cellendine of Rue of Eye bright of each 2 Ounces’, and Elizabeth Digby’s recipe of 1650 calling for ‘Selfe-heale, Fennell, Salladine, … and Rue’ in her water ‘for sore eyes’.\textsuperscript{223} Both of the domestic recipes predate the vernacular work, each calls for a specific botanical, celandine, in the treatment of eye related ailments, and none contains a theoretical rationale. The three household recipes clearly illustrate the communal nature of the domestic practice prior to, and couched within, the popular vernacular work. Domestic authors typically do not refer to printed sources, however, but rather cite individuals. In some cases this is a clear acknowledgement of individuals’ contributions of recipes (as discussed in Chapter Two), and in other an acknowledgement of remedies with inherited


currency across the common culture such as ‘Paracelsus’ plaister’, ‘Gascoyne’s powder’, or ‘Lucatella’s balsam’.

Luise Curth’s examination of the medical content of almanacs unintentionally points to a curiously ambiguous relationship between these vernacular works, their domestic readership, and professional medicine. Indeed, her two concluding points are concerned with elite medical theory in the first instance, and proprietary medicine in the second, and it seems clear that these are the two areas of medicine which almanacs most clearly address: learned theory and commercial product, despite the express aim of delivering working, practical information to the working household producer of medicines. There is little doubt that almanacs did purport to educate, inform, and entertain a broad readership, and yet it is virtually impossible to prove that they consistently did so. Almanac recipes often contain a theoretical rationale and framework, whether humoral or astrological, or both and little of the more practical information associated with a remedy’s making or its differentiated administration. It may be that almanacs are taking practical recipes from the domestic culture here, and repackaging them in terms acceptable to, and prefaced by, the dominant ‘great’ medical culture of the period. Thus Lucatella’s balsam, and the use of celandine for eye complaints existed in the domestic sphere prior to their inclusion in almanacs, but, with their inclusion in the printed source, they acquire a veneer of learned authority and authenticity.

Thomas Horrocks looks in depth at the stated purposes of almanacs and other popular vernacular works in *Popular Print and Popular Medicine*, writing that they were commonly intended to ‘meet the demands ...’ of ‘a nascent middle-class readership that sought self-improvement, enlightenment, and entertainment’. Both Horrocks and Curth assert that the medical content of vernacular works was widely consulted by domestic readers, but specific evidence for this is hard to find. Almanacs were popular and sold well, which may well have been due in part to their medical content, but it may equally have been down to their astrological, horticultural, climactic, and seasonal information; certainly the last instance is likely in the case of the American, largely agrarian community. Equally true is the possibility that these relatively cheap, popular prints were bought as ‘light reading’, and that the information contained within them was intelligently read in light of its quasi-informative, quasi-entertainment role, much as many readers check their horoscopes in the daily paper to this day. In any case, in light of the plethora of eclectic material which almanacs contained and without proof of any direct reference to them from authors; for example, the dearth of almanac citations by domestic medical authors in contrast to the recognition of other (familial, social, and authority) sources; it is difficult to gauge accurately whether almanacs were bought and consulted as primary medical resources by households.

**Herbals**

Herbals constitute some of the very earliest, most successful vernacular texts aimed at a domestic market. Their actual import for domestic medical

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practice, however, may be fruitfully debated. The influence of herbals within domestic botanical culture is interesting. Their popularity was somewhat at odds with their reliability as practical reference sources, introducing the question of how, and why, they were read. Indeed, there is an ambiguity regarding the purpose and role of herbals within households which is akin to that seen with almanacs. In both cases, as Rebecca LaRoche noted of Parkinson’s Paradisio, ‘the text itself begs the question of whether it is a volume indicative of women’s medicine or one of women’s leisure’. The thesis would argue that herbals were used as adjunct reference texts to the primary inherited oral/scribal culture, supporting pre-existing knowledge and practice in some, though certainly not all, households.

These texts differed from domestic sources in their purported application of botanicals; where the domestic recipes are typically developed in pragmatic terms, considering what to use, in what manner, and in what circumstances, information in herbals is often couched within theoretical jargon and structures, so that Culpeper describes Carduus benedictus as ‘an herb of Mars, and under the sign of Aries’, and celandine as ‘an herb of the Sun, and under the Celestial Lion’. In the case of both botanicals, the plants are recommended for complaints similar to those found in domestic sources. Of carduus, Culpeper writes that ‘by antipathy to other planets it cures the French pox’, while also being of use to ‘strengthen the memory’, ‘cure deafness’, agues, other ‘diseases of melancholy’, and ‘provoke urine’, the last mirroring what is typically seen in other sources, as discussed in the section on almanacs. The juice of celandine

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226 R. LaRoche, Medical Authority and Englishwomen’s Herbal Texts, Op.Cit., p.92.
is highly recommended by Culpeper to cleanse ‘the films and cloudiness which
darken the sight’, a use seen across sources, though again, Culpeper also
recommends its use for ‘obstructions of the liver and gall’, ‘the dropsy and the
itch’, ‘old sores of the legs’, and ‘tutters, ring-worms, and other such like
spreading cankers’. This polychrest approach to ascribing curative powers to
botanical agents on the part of Culpeper is entirely typical of herbals. While
overlap with other sources may indeed be found, as in the use of celandine for
eye disorders, or a member of the thistle family as a diuretic, to infer a
straightforward transmission here would provide a false reading, as the
appearance of continuity is derived from a very selective reading of the whole of
the information contained within the printed source. Because Culpeper’s
recommendations for the application of any one herb are so broad and
inclusive, it is relatively easy to point to his work as having set the precedent for
any one particular use.

A second key aspect to herbals lies in the nature of their content, as they
typically combined both visual and text information. Indeed, as Barry Reay
notes, ‘if popular culture in seventeenth-century England was predominantly
oral, it was also extremely visual’. A series of fundamental problems
regarding plant identification are to be found within both Early Modern herbals
and later, in almanacs; the majority of illustrations in Gerard’s Herbal were
largely taken from earlier works, with only sixteen original engravings, with each
illustration being further subjected to possible ‘artistic’ interpretation at each re-
issuance by subsequent draftsmen and engravers, theoretically losing

differentiating details necessary for proper plant identification in the process.229 Learning to identify plants first hand, of course, by viewing them in situ, whether this be in the wild or in the potager garden, with a knowledgeable instructor, would have been far more effective and precise.

With pictures which relay unreliable information and text which supports multi-fold, polychrest applications for most plants, the herbals were clearly not practical working sources. These books may have been valued as indicators that the occupants were well-read and savvy to current medical literature, and equally, their contents may have been referred to in order to reaffirm the domestic practitioners’ own practice, but what is unlikely is that these sources served as primary educating tools for the domestic culture. There is no doubt that ‘reading took place within a culture [at least] still partially oral in nature’.230 Oral transmission, and its immediate transcription into personal domestic recipe books, remained the primary form of transmission of lay medical knowledge within Early Modern households. In this theoretical model, domestic familiarity with both the identity and the use of plants generally, and botanicals specifically, would be supplemented by vernacular works. Herbals, far from providing the foundation of practical knowledge, would be consulted as general reference works to reinforce the historical (personal or family) knowledge and usage.

Vernacular Medical and Settler Texts

While almanacs may be said to reflect a generic, popular medical culture, insofar as they contain medical information at all, and the theoretical frameworks and context of herbals clearly identify them as products of learned medical cultures, works aimed at domestic practitioners occupy a rather different niche. Vernacular medical texts and ‘settler’ texts are both treated here as examples of printed works of elite authorship intended for domestic consumption, with each reflecting aspects of domestic, as well as public, botanical cultures.

The typical layout of seventeenth- and eighteenth-century ‘Family Physicians’ often closely mirrors that of the seventeenth-century English domestic receipt book, each recipe listing the botanicals, followed by preparation instructions. They also include practical information relating to household provisions and equipment, are often indexed, and most importantly, tend to limit themselves entirely to botanical medicines, and eschew theoretical and dogmatic rationale. They are practical, jobbing texts, in the same vein as the domestic sources. For example, George Hartman’s Physician of 1682 and William Buchan’s Domestic Medicine of 1772 both mimic the composite picture of transmission and knowledge found in domestic receipt books in both their overall structuring, and in the nature of the receipts they contain. These follow the standard domestic formatting, including list of botanicals, brief description of application, typically alluded to in the title, and practical preparation instructions.
Hartman’s ‘precious Water for the Eyes, that hathe restored the sight after some years lost in a short time’ of 1682, for example, instructs the reader to

Take red Rose-leaves dried, Smallage, Maidenhair, Hysop, Endive, Succory, red Fennel, Ribwort, Celandine, Eyebright, of each two handfuls; wash them, and dry them, and steep them in white Wine for twelve hours; then distil it, and wash the Eyes with the water.²³¹

The botanicals are listed, followed by basic preparation and administration instructions, with the purpose and value of the remedy communicated in the title. This is simple remedy, practical in nature, containing exactly that information necessary to communicate how it is to be made and administered, and nothing else.

Moreover, individual vernacular authors, much as the domestic authors considered in Chapter Two, traded ‘authoritative’ remedies, particularly those attributed to physicians. For example, George Hartman’ *Family Physitian* is diligent in identifying and crediting recipe sources, closely mirroring the style and manner of the domestic receipt book in acknowledging a number of physicians and noble ‘names’ as sources for his recipes.²³² His *Family Physitian* includes a ‘Recept Aproved for to cure the Dropsey approved by my Lady Ganesford’, an ‘Excellent Pectoral Water against a Consumption’ attributed to Doctor Hornick, and ‘The Lady Garret’s Excellent Remedy for a Cold or Cough; Approved’, alongside ‘A Corda…I Water of Clove Gilly flowers’ from the anonymous Sir K.D.²³³ This is very similar, for example, to recipes

²³³ Hartman’s inclusion of ‘approved’ here undermines the arguments of current scholarship that similar approval by the authors of domestic recipe books demonstrates the individual domestic author’s competency as a discerning medical practitioner. More likely the stamp of approval is typically inherited along with the recipe itself. Thus, while someone, at some time, has ‘proved’
found in the eighteenth-century Granville manuscript which includes remedies for ‘Doctor Burges his direction against the plague’, a ‘Doctor Butlers Receipt against a consumption’, instructions on how ‘To make Doctor Buggs sirrup of Violet’, and ‘Docter Lowers bitter Infusion’. In Hartman, as in the domestic receipt books, we see a desire to place botanical receipts within a broader social context, with a concurrent co-option of elite or learned authority alongside a clear association with, and placement within, the communal domestic culture.

A slightly different example of vernacular medical works mirroring the pragmatic nature of domestic works may be seen in Gideon Harvey’s *Physician* of 1676. Harvey’s work is less obviously drawn from the format, structure, and presentation of domestic manuscripts than Hartman’s, but it is equally indebted to the domestic culture for its straightforward, pragmatic approach to producing and dispensing medicines. His work contains information on production equipment, both what is likely to be needed by the householder, and how it is to be used, along with their pricings, as well as advice on buying raw botanical materials, again with pricings, and instructions for preparing and using same. These instructions include information on the production of a range of generic, and specific, botanical preparations, including instruction on how to make lozenges, syrups, waters, and so on. While much of this content is superficially similar to material which may be found in both almanacs and herbals, it is,

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the remedy, it is by no means certain who this was. Thus, ‘Mr. Barnet’s Excellent Diet-Drink, wherewith he cured three of his Children of the Kings-Evil; he had it from an able Physician’, is a thrice removed example.

234 FSL.ms.V.a.430, fols.41, 49, 54, 159, Mary Granville and Anne Granville Dewes’s Receipt book, 1740. This latter assertion, however, is contentious, for there are examples of women writing critical evaluations of remedies as well as ‘provings’ throughout the period for which we have extant manuscripts, and concurrently with the ‘scientific revolution’ of the late sixteenth and seventeenth centuries. Quite possibly this sort of domestic commentary predated the elite ‘scientific’ methodology which was much slower to influence the prescribing habits of regular practitioners.
again, notable in its lack of an associative didactic framework. Harvey’s text contains no mention of medical rationale whatsoever. It is solely concerned with communicating practical, working information, bereft of the ‘learned’ theoretical context. On the whole, these vernacular medical texts may be read as mirroring the non theoretical, practical content of receipt books in their focus on the practical making of medicines, and their lack of didactic, dogmatic, theoretical content. They often reflect a communal botanical *materia medica*, and, like domestic sources, highlight individualized receipts drawing on that communal canon, and containing practical, instructive information, while lacking the learned theoretical framework typical of herbals, and occasionally seen in almanacs.

While almanacs, herbals, and vernacular medical texts have all been widely, and intelligently, read in relation to Early Modern English and Colonial American domestic medical practice, ‘settler texts’ have not. The term ‘settler text’ is here used to a body of works written in order to explore, and promote, knowledge about the North American Anglo-American colonies. It includes works by explorers, antiquarians, travel writers, and settlers alike, and covers material ranging from that which is purely descriptive of the North American environs, to that which is practical and purports to advise Colonialists on the needs of successful settlement. These texts have been read almost entirely against the grain, and almost entirely as a means of providing clues to what was popularly considered to constitute essential botanical provisioning for domestic medical consumption. As they confer virtually no medical information, either in terms of conceptual theoretical frameworks, or indeed, practical material relative
to the formation and production of medicines, they are used by the thesis to produce a standard picture of the most basic, pared-down version of an Anglo-American domestic *materia medica*. Where vernacular medical texts may be read as extensions of the domestic practice, settler texts are indications and products of the trans-Atlantic, Anglo-American botanical culture. They presage and describe exactly what botanicals were considered of vital importance for household use, and are considered in greater depth in Chapter Four.

**Learned, Popular, and Domestic Cultures**

The influence of intellectual medical theory and its related jargon on domestic botanical culture, as considered in Chapter Two, reflects a larger, social, occurrence. Returning to part of the non theoretical nature of the domestic culture argument broached earlier in this Chapter, we saw that there was clearly a cultural appropriation, indeed, ownership, of much of that Early Modern intellectual medical theory by discreet individual authors, whether domestic or vernacular, though this was by no means the norm in household manuscripts. Even so, a good deal of the conceptual underpinnings of Early Modern professional medical practice may well be seen as belonging to popular culture: these are concepts which perhaps inform the Early Modern understanding of reality itself. In this vein, a wealth of material supporting the acquisition of specialist knowledge by lay individuals may be found in a number of sources quite apart from the domestic receipt books, from personal journals and correspondence to literary musings.
For example, Robert Burton’s *Anatomy of Melancholy* brings together and examines the learned theory of a number of prevailing theories attributed to classical works, both ancient and Early Modern (including Hippocrates and Galen), in his exploration of ‘melancholy’ (depression), with a particular emphasis on humoral theory. Likewise, John Donne incorporates enough medical theory and terminology in his works that D.C. Allen writes medical data, anatomical terminology, physiological theory, apothecary’s ‘drug tongue’, and physician’s jargon elbow from the pages of his poetry and sermons before pointing out that many of the titles for Donne’s poems are drawn from the *ars medica*, again demonstrating an assumed familiarity with medical concepts on the part of his readership. Shakespeare refers to ‘humour’ repeatedly throughout his writing, using humoral theory both as a means of enriching his characterization;

he is as valiant as the lion, churlish as the bear, slow as the elephant: a man into whom nature hath so crowded humours that his valour is crushed into folly, his folly sauced with discretion: there is no man hath a virtue that he hath not a glimpse of, nor any man an attainth but he carries some stain of it: he is melancholy without cause, and merry against the hair: he hath the joints of every thing, but everything so out of joint that he is a gouty Briareus, many hands and no use, or purblind Argus, all eyes and no sight.

Further, Shakespeare uses humoral language as a means of defining setting and tone: ‘all the unsettled humours of the land, rash, inconsiderate, fiery’. Both


of these suggest that the underlying medical theory was widely enough understood to be meaningful for his audience, for whom an individual ‘crowded with humours’ or a land of ‘unsettled humours’ would have been instantly recognizable. This is a simple, cognisant use of elemental theory to convey meaning. While it could be argued that Burton and Donne were writing primarily for an educated, elitist audience, Shakespeare was emphatically producing material for more general and varied consumption.

By the end of the seventeenth-century, a range of medical theories are being widely disseminated, and most likely well appropriated, by society as a whole; they are no longer specifically the province of the elite, though their medical implementation may have continued to be so. It is this question of practice which then becomes important: indeed, it is possible that the theoretical foundations of professional practice which are in some demonstrable ways more widely accepted philosophical social truths, or at least recognizable metaphorical language carrying a valuable cultural meaning, can then be divorced from medical practice, including a non-intellectual, domestic one. Thomas Horrocks writes that ‘the dropsy remedies [of almanacs] that promoted depletion to reduce the unnatural accumulation of fluid were consistent with humoralism’, and yet on a more pragmatic note, one could argue that using botanicals with diuretic actions can be seen to encourage fluid evacuation from the body, and hence might continue to be used, not because of their theoretical humoral associations, but because they lessen fluid retention, thereby causing obvious signs of swelling to disappear.²³⁸

Thus, in looking at the domestic manuscripts, one might question whether remedies should be read in light of prevailing professional theory given that that theory was demonstrably current throughout the popular culture of the day, or whether they should be read more simply, as straightforward workaday recipes. What is notable is not the few instances of elite theory quoted and which have been seized upon by scholars to date, but rather the vast lack of such reference in the vast majority of cases. Not only do the majority of manuscripts consulted here lack any reference whatsoever to an underlying rationale or theory of either action or treatment, how and why a botanical is recommended, be that rationale based on astrological, humoral, or mechanical basis, but the majority of recipes contained within manuscripts which do allude to medical authority (for example Freke and Mildmay) are in and of themselves, atheoretical. That is to say, while Mildmay may well quote prestigious authors in her musings, and occasionally refer to the underlying theory justifying particular recommendations, she is just as apt to prescribe botanicals based on ‘provings’ and experience. An example of the first of these may be seen when she suggests the use of sarsaparilla, china [root] and lignum vitae (amongst other plants) to treat a patient with ‘palsy’ who needed ‘the phlegmatic matter much passing by his back’ strengthened. Each of the identified herbs were considered hot and drying, thus fundamentally anti-phlegmatic in nature.\footnote{Lady Grace Mildmay, Receipt book [v.32, f.25v] as cited in Pollock, \textit{With Faith in Physic}, Op.cit. p. 117.} A second, atheoretical, practical remedial recipe is illustrated in the case of her prescriptive differentiation in Laudanum production, where Mildmay writes ‘if it be used for men use thereto oil of nutmegs but for women it is dangerous’.\footnote{Lady Grace Mildmay, Receipt book [v.32, f.25v] IBID, p. 136.} Both the lack of reference to either authority or theory in the majority of texts,
and the very patchy reliance on it even amongst those authors clearly intrigued by it, poses the question, not whether domestic practitioners were reading textual sources at all, but rather a question of how they were reading them.

On the contrary, in looking at how domestic practitioners used botanicals as a whole, it is vitally important to again consider the highly varied and mutable nature of household botanical usage which is allowed by the lack of singular, dogmatic authority. While there was almost certainly continuity of communal practice, this was likely to have been multiple and complex and largely based upon the shared common list of herbs and basic preparation formulae. Indeed, the tremendous variety of botanicals employed in different households against any one particular ailment illustrates the lack of a didactic remedial practice drawing from a single acknowledged authoritative source. Further, it is this adaptability, and lack of dogma, that is a hallmark of the domestic botanical culture.

Thus we see a number of householders employing a wide variety of herbs drawn from the shared communal canon, and applied to tackle exactly the same ailment. For example, Jane Baber, writing up the remedy ‘for the worms’ in 1625 instructs the householder to ‘boil, pound, and strain’ a combination of ‘bears footte & Lavinder cotton’, a good draught of said to be taken ‘morning and evening’ by the afflicted.\footnote{WL.ms.108, fol.13v, Jane Baber’s Booke of Receipts, c. 1625. Early modern usage of the term ‘bears footte’ typically referred to either Helleborus foetidus or Alchemilla vulgaris (OED, p.). The first of these is toxic when taken internally, being particularly caustic for the alimentary tract - causing vomiting and diarrhoea. The second, (the current common name is ladies’ mantle), is a strong astringent typically used to ‘tone’ and dry tissues, of particular use in the treatment of diarrhoea. Neither botanical has particularly strong anthelmintic (anti-parasitic or
Mosley of Derbyshire lists three different remedies for worms on a single page of her manuscript, calling for a simple rosemary and honey compound to be taken with bread in the first, a combination of ‘worm wood, rue, small leek, of each a handful, dry them in a pan till the are hot’ to be applied topically to the afflicted’s abdomen in the second, and ‘a drought of posit drink’ containing ‘a handful of sage and roosmary every night … wherein hath bin boyled fore cloves of garlick pilled and cut’ to be drunk in the third. Between the two of them, Baber and Mosley recommend a total of nine different herbs in four separate remedies for the treatment of worms; several of them, notably cotton lavender (*Santolina chamaecyparissus*), wormwood (*Artemisia absinthium*) and garlic (*Allium sativum*), are all strong vermicides. If the learned botanical discourse of the period may be, at least in part, typified by a dogmatic proscription of plants according to a given theoretical framework, the domestic culture allowed for, and was defined by, a much greater freedom of prescribing practice.

### Complexities of Botanical Cultures

The movement of knowledge between domestic and public spheres occurred in both directions, and via a plethora of routes. Alongside the appropriation of ‘medical’ knowledge by domestic authors which has been well

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243 The thesis is entirely aware that individual learned practitioners did adapt their practices, with the emergence of personal prescribing peccadilloes emerging, the underlying culture was proscriptive and dogmatic – indeed, causing much debate within learned circles. Nonetheless, he underlying domestic culture was eminently flexible and adaptable.
established by the literature, a co-transmission, or movement of medical knowledge in the opposite direction, from lay, domestic sources into professional fields of practice and dissemination should be noted. Harold Love’s theory of transmission suggests that in some instances the sheer weight and momentum of amassed manuscript material spills over from the private domestic sphere into the public, printed sphere. This may well have happened in the case of domestic receipt books and vernacular printings, particularly in later Early Modern England, where the line between learned women and households and their relationship to learned public thought was blurred. Indeed, this may be interpreted as a sort of escalation of thought, with an elite body of authority ultimately distilled from the accumulation of grassroots practice. Love interprets W.J. Cameron’s work with Restoration verse in terms of ‘the texts … contained in a substantial body of manuscripts can be assumed, in the absence of countervailing evidence in the variants themselves, to derive from single archetypes’, with an inability to draw connections between the various manuscripts on the part of scholars put down to a kind of ‘blindness to the nature and persistence of this culture’.244 In the case of domestic medical knowledge regarding botanicals, this might be interpreted similarly, where the momentum of common practice and thought eventually becomes so great that it influences scholarship. In this instance, movement of recipes from domestic manuscripts to almanacs and vernacular works may well have occurred in some instances as a result of the sheer bulk of amassed material which is then translated into the more authoritative print medium. The sheer volume of manuscript evidence in this instance is then transformed into established

practice and given weight by its translation, first into the vernacular (almanacs), and then by specialized (medical) texts.

However, it is equally possible that earlier transmission was more organic, less systematic, more to do with ‘friendly’ or familial advice rather than with the intervention of intentional collection. In this instance, single medicinal recipes were traded in much the same way as single culinary recipes might be, so that a particular recipe, whether by a singular author, or family, gained a reputation for particular effectiveness, and thus becomes a shared commodity in this more, organic, social manner. Indeed, parallel to, and perhaps even richer than, the evidence supporting transmission of knowledge from a professional elite down to a lay population, lies an abundant vein of evidence, both in the receipt books, and in personal correspondence, demonstrating the lateral transmission of knowledge between households and lay householders.

There is a commonality of practice at work here which suggests a degree of transmission, if not delineating its manner. Indeed, this blurring of the lines of transmission between oral, scribal, and manuscript transmission neatly illustrates Love and Fox’s assertion of a complex, multi-layering of information dissemination. There is no doubt that transmission and reception of botanical knowledge within Early Modern Anglo-American households was a complicated, messy business, incorporating the utilization of oral, scribal, and textual means.

Mrs Lyddalls ‘woorme plaister’ is mentioned in the Eyton manuscript, with the added information that ‘this doth not only cure of the worms, butt is also good in ye Measels & SmalePox & all sorts of Agews Surfeits vomitings Convultions & Rickets & also for Consumtions in your People & has bine suffisently approved in all thes cases & is of great use in all sorts of Colds or Coughs’. It is primarily a honeney plaster with capons, pennyworth, oils of mace, wormwood, and savin, along with metridate, aloes macerated therein. WL.ms.2323, fol.122v, Mary and Amy Eyton, Receipt Book, 1691-1738.

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245 Mrs Lyddals ‘woorme plaister’ is mentioned in the Eyton manuscript, with the added information that ‘this doth not only cure of the worms, butt is also good in ye Measels & SmalePox & all sorts of Agews Surfeits vomitings Convultions & Rickets & also for Consumtions in your People & has bine suffisently approved in all thes cases & is of great use in all sorts of Colds or Coughs’. It is primarily a honeney plaster with capons, pennyworth, oils of mace, wormwood, and savin, along with metridate, aloes macerated therein. WL.ms.2323, fol.122v, Mary and Amy Eyton, Receipt Book, 1691-1738.
That printed sources did come to first supplement, and then eventually to largely supplant, oral culture in the transmission of domestic botanical knowledge is undeniable. Counihan writes of ‘the widespread circulation of printed works on cooking, etiquette and household management … at a period when the changing socio-economic structure made mobility, social and geographical’ possible. She also points to this dramatic change in the social fabric as contributing ‘in a wider sense, to the weakening of sub-cultures in the society, since the ‘secrets’ of one group were being made public to all others’.  

In drawing attention to the role of printed works in facilitating social change, Counihan highlights their eventual impact on both the loss of domestic botanical knowledge, and of its transmission. Conversely, the emphasis on its demise serves to further draw attention to both the universality and the import of the earlier practice.

In examining the relationship between printed sources, the popular concepts they convey, and domestic botanical culture, Chapter Three of the thesis has established that each is perhaps best seen as part of a greater, more complex whole. Anglo-American botanical culture here exists concurrently within public and private, learned and lay, spheres, with each bringing unique practices to the whole. Moreover, that larger composite, bricolage picture is itself an incomplete piece of the broader composite pictures of Early Modern and Colonial medical, horticultural, and social histories. The bricolage nature of the ‘little’ tradition of domestic botanical culture has been explored here largely within this expanded context and via consideration of the varying degrees and

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manners in which almanacs, herbals, and vernacular medical texts impacted on it. This relationship has been examined particularly in light of those shared characteristics occurring across cultures, as well as the clear differences and defining features between them in order to highlight to unique characteristics of the domestic practice. The Chapter has considered literacy in order to better establish the possible impact of these printed works on trans-Atlantic domestic botanical cultures. The influence of printed text on the domestic culture is considered further in Chapters four through six, in light of their role in establishing (and evidencing) transference of the Early Modern English domestic botanical canon, and culture, to Colonial America.
Chapter 4. Atlantic Cultures

Having established the complex *bricolage* nature of a ‘little’ domestic botanical culture in Chapters one through three, this Chapter focuses more specifically on the early, shared, trans-Atlantic, Anglo-American aspects of this culture. The Chapter first looks at the shared domestic practice of botanical production by examining equipment and agency on both sides of the Atlantic. Reading probate inventories, vernacular reference works, and domestic manuscripts, the Chapter establishes that people were actually making, and not simply talking, or writing, about botanicals. It further looks to specific examples of herb use which cross the Atlantic, establishing a basic shared *materia medica* from both domestic receipts, and from settler text lists. The Chapter examines key shared *Aqua* recipes which reflect both the common trans-Atlantic culture and its ability to accommodate household differentiation, and in so doing illustrates the degree to which this was a series of shared practices embodying the key communal, and individualistic, characteristics of domestic botanical culture. The Chapter finally considers the beginnings of a new domestic botanical culture in the eighteenth-century, as the production of medicines in Colonial households began to diverge from the inherited practice.

Tracing the broader impact of European, and more specifically English, plant knowledge and practice on Colonial life, and the transmission of knowledge and experience of American botanicals back into the English practice, is critical in establishing evidence of a common domestic relationship...
with botanicals. Thus, a number of printed texts are consulted in this Chapter. They are read for their capacity both to shape our understanding of popular perception of botanicals, and to highlight those botanicals which were culturally considered to be of particular domestic importance. Importantly, these sources are clearly aimed at a wide lay audience, rather than at an elite, learned, readership. Changes in trans-Atlantic cultures, or the changing perceptions of trans-Atlantic peoples also impacted on reception of north American botanicals into the European canon, as did the broader, non-medical, culture of botanicals. This established trans-Atlantic botanical culture may be seen in specific shared Anglo-American remedies, such as those for *Aquas* and green salve, both of which will be explored in this Chapter.

The cultural placing of common Early Modern English and Colonial American medical botanicals may be considered in terms of a shared ‘botanical culture’ which is one strand of the much broader Anglo-American ‘Atlantic culture’. ‘Botanical cultures’ is here loosely defined using the *Plants and Cultures of Europe* definition, as ‘consisting of three interweaving aspects: intercultural dialogue, plant biodiversity, and cultural landscape’. ‘Atlantic cultures’ refers to both the shared, and the disparate, bodies of knowledge and practices existing and employed specifically in the British Isles and the North American colonies. Plants are here considered as agents with varied cultural definitions alongside that relating to their medical action. Questions surrounding the identification and naming of plants within this broad culture are considered, as are instances illustrating trans-Atlantic parity and commonality. For Anglo-

\[247\] ‘PaCE Project criteria (*Plants and Cultures of Europe*: seeds of the cultural heritage of Europe; Universities of Modena, Rome, Ravello, Bergen, Krakow, and Barcelona). PaCE employs the term ‘green cultural heritage’. ‘Atlantic cultures’ is dealt with in this chapter.
American householders, much of the originating ‘botanical culture’ was a shared one, and consisted of the inherited European canon.\textsuperscript{248} There is a good deal of cross-pollination in trans-Atlantic botanical lists of the period, with knowledge and practice originating in many cultures adopted into the Anglo-American canon. In referring to plants of ‘old’ and ‘new’ world origin, the thesis means plants existing in the European canon prior to colonization of the Americas in the first instance, and indigenous Native American botanicals in the second. In reality these lines were considerably more complex, with, for example, ‘old world’ plants originating in northern European cultures, the Levant, or the Far East. The European practices inherited by Colonial settlers, and the appropriation of North American plants into the European canon, are both considered in order to establish, and test the limits of, this shared practice. Indeed, while the initial introduction of a very few North American plants into British culture illustrates this shared greater British ‘botanical culture’, a growing willingness to adapt and adopt new botanicals widely on the part of Colonialists marked an emerging shift in botanical cultures on either side of the Anglo-Atlantic. This shift is further explored in Chapters five and six. Here, we first look at the original, European-derived botanical \textit{materia medica} in terms of both those individual plants valued by English and North American householders, particularly in light of what was deemed essential to successful settlement, and then turn to consider botanical preparations common to both. While many of the sources consulted in this Chapter in order to establish this shared botanical culture are not of household origin, they reflect the Atlantic culture shared

\textsuperscript{248} The English canon itself already contained a wealth of non-European plants, the majority of them at this point in time originating from either the Levant, or the Indian subcontinent.
across Anglo domiciles of the period, reflecting the identified need and perceived value, of botanicals.

This Chapter examines the transmission of botanical cultures across time and geographically, focusing on ‘Atlantic’ cultures, as a way of furthering the examination of the placing of domestic botanical culture and transmission considered in depth in the first three Chapters of the thesis. Two primary approaches towards Early Modern and eighteenth-century Anglo-American culture exist: the first considering English speaking peoples living on both continents as inhabitants of an expanded ‘Britain’; the second examining ‘Atlantic Cultures’ more broadly, and including a range of peoples and traditions on either side of the Atlantic. For the study of botanicals, particularly their use within the Anglo-American home, each approach offers important insights. The ‘Greater Britain’ approach, as exemplified by Ann Leighton’s *Early American Gardens*, lends itself towards the tracing of similarities and the shared commonality of plants and practices between Anglo-American households on differing continents, while the second, ‘Atlantic’ approach as pioneered by Londa Scheibinger and Claudia Swan, among others, highlights differences

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between the two which impacted back on each. For the purposes of this thesis, the term ‘Atlantic’ is of particular importance as it allows for the inclusion and examination of plants originating in those Americas not settled by the English, but which were quickly and commonly in use within Early Modern and Colonial Anglo-American households. This applies specifically, for example, to the inclusion of Jesuit’s bark, (*Cinchona officinalis*), and Lignum vitae (*Guaiacum officinale*). By both embracing the ‘Greater Britain’ concept of an extended British empire which includes the American colonies, and using aspects of Atlantic cultural theory and definitions, this Chapter hopes to uncover meaningful ways in which plants crossed, and confounded, these culturally defined boundaries.

**Botanicals & Nomenclature - Issues of Identification**

There is a lack of specificity and clarity of content and language, particularly where the names of plants are concerned, across those sources reflecting both domestic and learned cultures. Yet it is particularly important to ascertain the identity of botanicals, as far as is possible, as the naming of the thing carries implications for the practice as a whole. Moreover, the changing and irregular naming of botanicals caused confusion regarding what actual plant was used, and in what manner, for Early Modern and Colonial authors. For example, the English travel writer John Lawson writes of being introduced to ‘an odoriferous Root’ in 1702, noting it is

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of a fragrant Smell and Taste, the Name I know not; they chew it in the Mouth, and by that simple Application, heal desperate Wounds both green and old; that small Quantity I had, was given inwardly to those troubled with the Belly-ach, which Remedy fail'd not to give present Help, the Pain leaving the Patient soon after they had taken the Root. 251

Clearly the plant has impressed Lawson with its perceived efficacy, and the range of its supposed application, and yet there was a failure to identify it, in this instance, either by name, or by description. As all we are given is that this is an aromatic root, without reference at all to the original plant, even whether it was tree, vine, or herbaceous in nature, there is little hope of identifying it. Indeed, Lawson's wondrous botanical root could have come from Sarsaparilla, Sassafras, Acorus, Liquorice, or any number of other plants. In this instance all we can be certain of is that there was clear interest on the part of European explorers in new world aromatic plants, with this interest feeding back into a broader quasi-medical natural history narrative.

The difficulty of naming is also noted by the Virginian settler, Robert Beverley, in 1705, who wrote that

Mr Heriot tells us of several others, which he found at Pamtego, and gives the Indian Names of them: But that Language being not understood by the Virginians, I am not able to distinguish which he means. Particularly he takes Notice of Wasebur, an Herb; Chapacour, a Root; and Tangomockonominge, a Bark. 252

Both Lawson and Beverley address the particular issue of difficulty in identifying indigenous plants by providing tables giving the herbs' names in several Native American languages as well as English in their works. Beverly writes further on

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252 Robert Beverley, History of Virginia, BOOK II. Of the NATURAL Product and Conveniencies OF VIRGINIA; IN ITS Unimprov'd STATE, before the English went thither. CHAP. I. Of the Bounds and Coast of Virginia. 1705. p.23.
the issue, taking contemporaneous sources to task over the issue of translation and nomenclature:

They call their Physick *Wisoccan*, not from the name of any particular Root or Plant, but as it signifies Medicine in general. So that *Heriot, De Bry, Smith, Purchass* and *De Laet*, seem all to be mistaken in the meaning of this word *Wighsacan*, which they make to be the name of a particular Root: And so is *Parkinson* in the word *Woghsacan*, which he will have to be the name of a Plant. Nor do I think there is better authority for applying the word *Wisank* to the Plant *Vincetoxicum Indianum Germanicum*, or *Winank* to the *Sassafrass* Tree.\(^{253}\)

Further to this, separate authors seem to use different common names in discussing the same plant, as may be seen in Lawson’s account of a wax producing berry with medicinal properties in his *New Voyage to Carolina* of 1709, and Beverley’s account of a very similar plant in his *History of the First Settlement* of 1705. In the first of these, Lawson writes of

Laurel-Trees, in Height equalizing the lofty Oaks; the Berries and Leaves of this Tree dyes a Yellow; the Bay-Berries yield a Wax, which besides its Use in Chirurgery, makes Candles that, in burning, give a fragrant Smell.\(^{254}\)

While Beverley describes how

At the Mouth of their Rivers, and all along upon the Sea and Bay, and near many of their Creeks and Swamps, grows the Myrtle, bearing a Berry, of which they make a hard brittle Wax, of a curious green Colour, which by refining becomes almost transparent. Of this they make Candles, which are never greasie to the Touch, nor melt with lying in the hottest Weather: Neither does the Snuff of these ever offend the Smell, like that of a Tallow-Candle; but, instead of being disagreeable, if an Accident puts a Candle out, it yields a pleasant Fragrancy to all that are in the Room; insomuch, that nice People often put them out, on purpose to have the Incense of the expiring Snuff. The Melting of these Berries, is said to have been first found out by a Surgeon in *New-England*, who perform’d wonderful Things, with a Salve made of them. This Discovery

\(^{253}\) Lawson, John, *A New Voyage to Carolina; Containing the Exact Description and Natural History of That Country: Together with the Present State Thereof. And A Journal of a Thousand Miles, Travel’d Thro’ Several Nations of Indians. Giving a Particular Account of Their Customs, Manners, &c.* London: 1709 P.55.

is very modern, notwithstanding these Countries have been so long settled. The Method of managing these Berries, is by boiling.  

Although a number of plants may be described as producing wax-like berries with medicinal, or pseudo-medicinal properties, the specific description of yellow or greenish yellow was with a ‘fragrant smell’ or ‘pleasant fragrancy’ suggests that the plant in question is a member of the Myrica family, commonly known as Candleberry, or Wax-myrtle.

Confusion specific to plants exists also in medical contexts, even within learned spheres. ‘The Lady Hewits great Cordial Water for all cold Diseases’ given in Hartman’s Family Physitian, for example, calls for the inclusion of ‘Lignum’, without specifying which Lignum. This could, of course be Lignum vitae, but equally easily, might refer to Lignum aloe; and there seems there would have been no easy means of identifying which Lignum was meant even for the savvy Early Modern or Colonial householder, for each was in common domestic medical use across the period. Lignum vitae, or Guaiac wood, refers to a North American plant which acts as a febrifuge and muscle relaxant, while Lignum aloe refers to Agarwood (Aquilaria agallocha) from southeast Asia which has anxiolytic and astringent properties. Ambiguity remains also in terms of the language employed more broadly, both by early authors and medical practitioners, and by current scholars. Edward Winslow’s account of treating Massassowat in the 1620s, for example, clearly distinguishes between ‘herb’ and ‘root’:

When the day broke, we went out, it being now March, to seek herbs, but could not find any but strawberry leaves, of which I

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255 Beverley, Robert; Book Two: Of the NATURAL Product and Conveniencies OF VIRGINIA; IN ITS Unimprov’d STATE, before the English went thither p.22.
gathered a handful, and put into the same; and because I had nothing to relish it, I went forth again, and pulled up a sassafras root, and sliced a piece thereof, and boiled it, till it had a good relish, and then took it out again.257

Here Winslow is employing the then currently accepted technical definition of ‘herb’ as referring to either the herbaceous part of the plant, or to plants where the main part used is the tender, green, growing leaf part. This is quite different from using the word ‘herb’ to mean ‘botanical’, referring to any part of any plant which is employed primarily as a medicine. Moreover there are instances of authors using generic terms to indicate specific plants. Abigail Adams refers to giving her son (and later, herself) ‘the bark’, which probably refers to the use of Cinchona officinalis (Jesuits’ or Peruvian bark); while an eighteenth-century English letter prescribing ‘the woods’ cited by Mary Lindemann in Medicine & Society probably, though by no means certainly, referred to the Artemisia species which includes Wormwood and Southernwood.258 The ability to read these remedies effectively is very much tied to the immersion of the reader within the broader botanical culture. Familiarity with both the common terms, and their likely applications, allowed for domestic practitioners to quickly, and specifically, place many medicinal plants into a meaningful context in a way that individuals outside of the practice, such as Early Modern travel writers or modern readers, could not.

The passage of time and distance from the botanical cultures employing these terms engenders a greater likelihood of misreading the historical information. For example, Parkinson refers to Echinacea in his

Theatrum Botanicum (1755) when discussing a European thistle, and not the popular American coneflower, *Echinacea spp.*, which is currently associated with the term. The first plant is a useful hepatic agent, related to the *Carduus* family discussed in Chapter 3, while the second is an immune-system stimulant from the daisy family. Further, subsequent scholarship’s role in confusing botanicals may be seen in the analysis of plants found in the seventeenth-century English travel writing of William Wood. For example, Wood mentions ‘catharres’ in *New England’s Prospect*:

> Having done with their most needful clothings and ornamental deckings, may it please you to feast your eyes with their belly-timbers, which I suppose would be but stibium to weak stomachs as they cook it, though never so good of itself. In wintertime they have all manner of fowls of the water and of the land, and beasts of the land and water, pond-fish, with catharres and other roots …

This plant has been identified by the twentieth-century historian Alden T. Vaughan as catnip (*Nepeta cataria*). Vaughan further points out that catnip (or cat mint) is of European origin, suggesting either that Wood was incorrect in his overview of indigenous diet, or that there was a very early Native American adoption of European imports. A more likely identification of catharres is *Typha latifolia*, or the common American cattail, both because this is an indigenous plant which has long been used as a foodstuff, unlike catnip which really is a medicinal herb, and also because it is typically the root which is cooked and consumed in autumn and winter, and virtually all parts of the plant are edible at some point in the calendar year, unlike catnip where only the folia, or green herbaceous portion of the plant, is used (and this never as a vegetable). It is highly unlikely that Wood would be unfamiliar with *Nepeta*, which is a common

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herbaceous plant of the mint family. Thus, current literature further compounds any possible original confusion regarding plant identification, in this instance with clear old world, new world, connotations whereby the new world plant is given an old world name by the original authors, and subsequently wrongly identified in the literature. Examples of this conflation of the new and the old world may be seen in natural histories more broadly, as in the case of the ‘robin’ which refers to both the European *Erithacus rubecula* and the American *Turdus migratorius*. What is notable in both examples considered here is the lack of specificity in texts designed to inform and educate. Either there is an assumption on the part of the authors that the differences in plants do not matter, which is unlikely given the entirely differing uses in each instance, or there is an assumption of competency on the part of the domestic reader to discern what plant is actually meant. The ambiguity of named new world plants included here may therefore be read as supporting a broad social acknowledgement of competency and knowledge inherent in the shared Anglo-American domestic culture which has been lost to modern readers.

**Atlantic and Anglo-American Cultures**

Londa Schiebinger writes that ‘historians and theorists of Colonialism have developed various models for understanding Colonial science ... traditionally, these models have placed Europe at the epicentre of knowledge making’, to which we might further add that this epicentre of knowledge has
been largely made up of elite, masculine thought and practice.\textsuperscript{261} In terms of European colonisation of the Americas and the relationship of that movement of colonization to Early Modern and Colonial social and scientific cultures, the prevailing ‘old world’, European knowledge base, replete with cultural signifiers and practice, is clearly a continuation, or expression, of the existing European elite, masculine, ‘grand tradition’. The new worlds, on the other hand, opening to old world horizons provide both their own unique ‘little’ traditions via indigenous cultural knowledge and practice, and also provide new ground for existing European ‘little’ traditions, notably that of domestic cultures. Schiebinger speaks of the vital role which urban centres played ‘as repositories and clearinghouses’ of this model, with knowledge and material channelled, directed, and formed within elite, public, urban spheres, equating the prevailing elite, masculine, European, ‘grand’ tradition with cultural urbanness. A tentative corresponding assumption may allow for more rural, ‘provincial’, and (in this context), Colonial (along with domestic and indigenous) association with ‘little’ traditions. This willingness on the part of Colonialists to embrace non-elite, non-learned, medical practices embodied by their employment of petite traditions may have arisen from a Colonial willingness to ‘make do’ in a practical vein as there was often little recourse to trained physicians.

We can see from both plant lists and equipment inventories that both Early Modern English householders and Colonialists were ‘doing’ medicine. Moreover, they were ‘doing’ it in the same manner. Authors across the

spectrum are drawing from the same inherited canon of plants and plant materials, addressing similar ranges of ailments, and calling for the preparation of the same types of medicines. The common domestic possession of medicine making equipment, combined with the receipt book manuscripts and vernacular plant lists illustrate that householders possessed not only the necessary interest and equipment to make medicines, but also strongly suggests a high degree of competency and skill in doing so. Along with probate inventories, domestic manuscripts and those vernacular works written for household consumption all support this picture of domestic agency. Moreover, the parity of both equipment and plant lists all suggest that this was a continuous, shared, common and inherited domestic practice.

This ‘doing’ of medicine is seen in both implicit and explicit examples of authority and agency within the botanical recipes themselves. Familiarity with plant cultures, whether that be personal households’ ability to harvest their own botanical produce or ‘wildcraft’ effectively, or to (intelligently) consume commercial products, was clearly a priority for domestic medicine makers. Alongside their proper harvesting and storage, domestic knowledge of the treatment of botanicals in the production phase was crucially important to the successful development of a remedy. Relative to domestic botanical produce and products, Katherine Davis writes:

June ye 25 whatever vegetables you gather now or about this time (flowers or hearbs) thrust ye close into a stone pott or potts and fasten ye cover of corke or ye like with wax and [such?] they will keep all ye yeare and may be distilled att pleasure as there is accation.  

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This passage echoes some of the harvesting and storage advice found in almanacs of the period (particularly in Colonial almanacs).\textsuperscript{263} Likewise, Katherine Packer stipulates that her black salve recipe, good ‘to draw out a sore or dead flesh’ containing a range of botanicals along with ‘sallet’ oil and turpentine, ‘must be made in June’.\textsuperscript{264} Rose Kendall et al’s ‘A water for the Jaundise or Consumption’, on the other hand, contains specific instructions for its manufacturing: ‘A Rule four the disposeing of these ingredients:

\begin{itemize}
\item First put in your Salendine.
\item Secondly put in your Angellico
\item Thirdly put in your Woodsorrell
\item Fourthly put in your Bittony
\item Fiftly put in your Egrimony
\item Sixty put in your Dock root Rinde
\item Seavonthly putt in yore Barbarie Rinde
\item Eightly putt in yoe Snailes & Wormes
\item Ninethly put in Snailes beaten small
\item Tenthly put in your Saffron
\item Eleventhy put in Yoe Rosemary flowers
\item Twelfly put in yoe Rue
\item Thirteenthly put in your Bearsfoot
\item Fourteenthly put in your twelue quarts of strone Ale & lett it stand in steeping all night thin in the mourning putt in your hartshound, & distill it in a little Alembick & if the Ale be Good it will produce fouer or five quarts.\textsuperscript{265}
\end{itemize}

While this text does not offer a rationale for the precise order of ingredient inclusion, Kendall is very precise in her instructions. This is actually an unusual recipe in that remedies containing a number of ingredients typically instruct the producer to simply add ‘a handful each’. Possibly the later addition of hartshound here reflects the inclusion of more sensitive, water soluble

\begin{footnotes}
\footnotetext{263}{Almanac content is considered in both the Print and Popular Culture chapter, and also, to some extent, in the chapters on Atlantic Botanicals and New World Botanicals.}
\footnotetext{264}{BL., ms.EG2214, Katherine Davis, Op.cit, pdf.p.5.}
\footnotetext{265}{FSL.V.a.429, Rose Kendell et all, \textit{cookery and medical receipt book}. One of the front pages is marked ‘Rose Kendell & Ann Cater there Book’, 1682, while two pages on is written ‘Anna-Maria Wentworth, \textit{Her Book}, 1725’.
}\end{footnotes}
constituents which would be lost in the more intensive overnight macerate, or which might interact with other ingredients prior to the stabilizing addition of alcohol. What is clear is that Doggett perceives the very precise ordering of plant additives to the menstruum to be of paramount importance illustrating a personal agency (and authority) on the part of Doggett in her expression of the domestic culture.

Moreover, households clearly had the means of producing medicines. Instructions for equipment found in vernacular texts available and read on both sides of the Atlantic are clearly mirrored in the domestic evidence. George Hartman’s *Family Physician*, for example, gives detailed ‘Directions how to use this ENGINE for Distilling in Balneo Mariae, which is the best way for Distilling the choicest Waters’, with differentiating instructions for water based distillates produced in the ‘Balneo Maria’ (bain Marie) and those distilled ‘in Sand’, suggesting both that households may be expected to own a range of equipment, and further, that householders will be proficient in their use. Lists of equipment necessary for domestic medical production may also be found in Thomas Brugis’ *Marrow of Physick*, and John French’s *Art of Distillation*. These printed texts are echoed in the domestic sources, so that we find a ‘weights’ table in Katherine Davies, Margaret Baker, and Penelope Jephson Patrick’s English manuscripts, suggestive of relatively sophisticated approaches

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to measurement and ratios. In a similar vein, Mary Doggett gives complete instructions on distilling waters in her section titled ‘For the stillatory’, Margaret Baker specifies the use of a ‘cold stille’ in her recipe for ‘the plaugwater’, and Katherine Davis’ receipt book of 1701 begins with a recipe for ‘A Codiall to be taken fo lavor’ based largely on ‘waters’, i.e. distillates and but also the by-product, ‘oyle of juniper’, predicating either the use of a sophisticated alembic still, or access to commercial supplies. Altogether, these domestic sources reinforce the picture of a household practice regularly employing the equipment and resources listed in the vernacular works.

**Inventoried Evidence of Domestic Botanical Culture**

An examination of Colonial probate inventories from both the Virginia and the Plymouth settlements were examined here, and each probate account from the Williamsburg Library examined contained equipment which could have been used for the making of botanicals, though this is not necessarily an indication that medicine production did take place in each household, as the blurring of lines between culinary and medicinal preparation meant that many, indeed most, of these items were used both for cooking and for remedy preparation. For example, Francis Howard’s inventory of 1747 includes ‘1 Case Bottles’, a ‘Fruit Strainer’, ‘1 pair brass Scales & Weights’, ‘1 bell Metal Spice/ Mortar and

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268 BL.Eg.ms.2214, fol.2r, Katherine Davies’ medical and cookery receipts, 1638; BL.Sloane.ms.2485, fol.10v, Margaret Baker, *receipt book in two parts containing mainly medical and some culinary receipts*, 1652; FSL.ms.V.a.396, fol.4r, Penelope Jephson Patrick, *Receipt Book*, 1671-1675.

Pestle’, ‘9 Juggs and a warming pan’, '12 Bottles Sweet Oyl', ‘200 Quart Bottles & 3 Tubs’, virtually any and all of which could be used equally for the production of botanicals, spirits, or culinary preserves. Moreover, the status and means of a household's owner was by no means indicative of their ability, and propensity, to make medicines.\textsuperscript{270} Thus, Sarah Green’s simple inventory of goods from her hall, hall closet, chamber, upper chamber, porch and kitchen contains a still as well as a mortar and pestle. The considerably more affluent Thomas Hornsby’s inventory of 1773 mentions a wide range of kitchen equipment, including mortars and pestles, but contains no still.\textsuperscript{271} The prevalence of stills, the household distilling equipment typically used to make aqueous botanical preparations (hydrolats, or floral waters) along with weights, domestic scales, mortars and pestles, and so on, all speaks to the regularity of domestic medicine production, as well as to the confidence and experience of householders in carrying out this production. These are typical instruments found across households, and speak to a common practice.

There is no reason to assume in this instance that the presence of a still in a woman’s inventory and its absence from a man’s indicates a gender based differentiation in ownership in the Virginian settlement (or possibly in employment and usage, even though this may have actually been the case), as several stills are found in the inventories of other men. Nor can we necessarily infer that richer households eschewed stills as they had a lesser need for them, presuming that increased wealth meant greater access, and possibly recourse, to expensive and relatively rare commercial products. The inventory list from

\textsuperscript{270} CWA, Francis Howard, \textit{Probate Inventory}, May 16, 1748.
\textsuperscript{271} CWA, Sarah Green, \textit{Probate Inventory}, April 1, 1759; CWA, Thomas Hornsby, \textit{Probate Inventory}, August 4, 1773.
Hugh Nelson’s probate of 1800, for example, contains ‘2 Small tin Stills’ as well as numerous instruments (including a cellaret and a harpsichord), a range of fine furniture, china, silver, linen, and sundry other expensive items, as well as listing twenty nine named slaves ‘in town’, and a further ten named slaves ‘at the Quarter’. Of course stills were commonly used not only in the production of distillates (floral waters and oils), but also in brewing a variety of alcoholic beverages, and there is no clear way of discerning from inventories alone which use stills were put to. Simple assumptions regarding a still’s use may be incorrect. Giles Moody’s inventory of 1730 contains a still as well as a spice mortar. It also lists an old bellmetal, 4 stone jugs, 3 carboys, a case of bottle, ‘stone bowls & stone & earthenware’, and a further 1½ Gross bottles in the cellar, along with 25 Gallons of rum, 15 lbs of hops, 4 dozen bottles of Madera wine, ‘2 dozn. Cyder’, 5 bottles beer, and ‘a wine pipe’, suggesting that his use of the still was probably not medicinal, or at least not solely medicinal. William Prentis’s inventory similarly contains a number of empty, and full, vessels in the cellar, with ‘5 empty Casks, … a Pipe of Wine … 4 Jugs Brandy, 3 Carboys, 1 Jug Rum, 16 empty Jugs and Carboys, 390 Bottles Wine, 18 Doz. Empty Bottles, and … Rum in a Hhd’. Yet while the inclusion of a such a very substantial amount of alcohol in both of these cases seems to suggest that quaffing rather than remedying was the main focus, there is no doubt that Early Modern and Colonial households would have regularly employed hard liquor in the extraction and preservation of botanicals, suggesting that medicine production may at least have been one of several possible uses to which stills were put. In most cases there is little evidence supporting either a primary use
for the production of botanicals or, as in this case, what appears to be the almost exclusive production of alcohol. What we might successfully surmise is that while the majority of extant scribal evidence that we have derives from upper to middle-upper class homes in Williamsburg, inventory evidence would suggest that households with smaller means were equally likely to have the means (as well as the need) to produce botanicals.

From the Plymouth probates, where only inventories of goods belonging to women were studied, there is an equal amount of equivocal evidence in terms of individual possession of equipment necessary for the production of botanicals, yet not exclusively used in this manner. Mary Ring’s inventory of 1633, for example, contains ‘3 brasse potts … / … 2 kettles/’ a ‘scumer’, ‘warming panne’, ‘1 Canne …/ 1 pr of Bellowes/ … 1 doz. of trenchers …/ 2 Sives … / 1 Frydiron … / 1 fire Iron … /; basins, cups, bowls, ‘payles’, bottles, and so on; all of which are necessary for medicine production, but none of them specific to it. More promising are the lists found in Alice Bradford’s inventory of 1670/1671, containing (along with books listed as ‘Item the Meathod of Phisicke’ and ‘Gouges domesticall dutyes’, and copious sundry kitchen utensils) ‘2 gallon glasse bottles and three pottle bottles’, ‘24 pewter platters and a brim bason … 2 Flaggons: 2 quart potts & 2 pint potts … 6 smale pewter dishes and a smale bason … [and] 7 porrengers’, ‘1 little French kettle … 2 brasse kettles … a duch pan … 3 brasse skilletts [and] 1 old brasse skimer and Ladle.’

There is a clear difference in inventories on this aspect between the Virginian and the Massachusetts material, particularly in the earlier probates, as the evidence from the Williamsburg sources often list copious amounts of alcohol, whereas the early Plymouth, Puritan, accounts do not.

PCA, Mary Ring, Probate Inventory, 1633.
PCA, 3:3-5, #P178, Alice Bradford, Probate Inventory, 31 March 1670/1671.
lists the sheer number of containment vessels, combined with heating and clarifying equipment, speaks directly to probable medicine production. Had the production of distilled alcohol products been the main objective, ‘porrengers’ and ‘skimers’ would not typically have been called for, and where preserving (for example of fruits) was carried out, this quantity of bottles would have been excessive.

Virtually all of the inventories from both colonies, and across the seventeenth and early-eighteenth-centuries, include mortar and pestles. In Williamsburg, Thomas Collier’s estate lists two separate mortar and pestles, the first, ‘A Bell metall pesell and Morter’ to be found ‘in the Room below Stairs’, the second ‘in the Kitching’, and a number of them list stills (Sarah Green, Thomas Collier’s inventory listed ‘A Large copper still and tub’, Davidson’s lists ‘1 Still wth. Stand & worn Tub £4/ 2 retorts 3 receivers & Iron 4/’, while Joseph Ring’s estate of 1704 contains ‘1 large Copper furness … and 1 smll. Ditto’ in the ‘Granary and Stables’, and ‘1 old Still’ in ‘the Chamber’). Several of the Virginian inventories also list scales and weights; a typical example being that of James Whaley: ‘1 pr. old Scales & Weights’. Henry Bowcock, Joseph Man, Thomas Collier, Robert Davidson, Thomas Dennett, Henery Ffreeman Junr, Francis Howard, Henry Hacker’s inventories all list ‘stilliards’, (Hacker’s inventory also lists several further sets of weights, found in a number of rooms and outhouses), James Shields’ inventory lists ‘1 pair Stilyards’, and Henry

278 CWA, Thomas Collier, *Probate Inventory*, June 19, 1705; CWA, Sarah Green, *Probate Inventory*, April 1, 1759; CWA, Robert Davidson, *Probate Inventory*, March 17, 1740; CWA, Joseph Ring, July 5, 1704.
Wetherburn’s a pair of ‘Stillyards’ While the ability to measure weights is important for a number of domestic tasks, the combined frequency of standard scales with stilliards (which measured heavier weights) is an interesting one, as the latter suggests that whatever was being weighed was being used in rather substantial amounts, and for processes where correct proportions were important, which rules out the baking of single domestic dishes, for example, or the production of simple products where correct ratios may be gauged by eye alone. Indeed, the production of botanicals, where ratio of plant to menstruum is crucially important, would necessitate the use of scales generally, and production of botanicals in bulk would help explain the popular use of stilliards. Likewise, in the women’s inventories from Plymouth, Margaret Carpenter owned ‘a paire of scales’ as did Alice Bradford.

Many of the inventories from both settlements list a range of containers capable of storing botanicals, including glass bottles and earthenware vessels. In the Williamsburg inventories Mary Ripping’s estate lists ‘20½ doz. empty bottles’, John Camp’s ‘2 Cases Bottles’, Thomas Collier’s ‘a gross of glas Bottells’, and Joseph Man’s ‘12 Grose of Botles’, while Henry Hacker left ‘1 Case of bottles’ in the ‘Little Room Closet’ along with ‘1 Still 1 Carboy …3 juggs

279 CWA, James Whaley, Probate Inventory, October 1, 1701; CWA, Henry Bowcock, Probate Inventory, March 16, 1730; CWA, Joseph Man, Probate Inventory, December 30, 1703; CWA, Thomas Collier, Probate Inventory, June 19, 1705; CWA, Robert Davidson, Probate Inventory, March 17, 1740; CWA, Thomas Dennett, Probate Inventory, September 8, 1673; CWA, Henry Freeman, Probate Inventory, Junior, May 13, 1676; CWA, Francis Howard, Probate Inventory, May 16, 1748; CWA, Henry Hacker, Probate Inventory, February 21, 1743; CWA, James Shields, Probate Inventory, January 21, 1751; CWA, Henry Wetherburn, Probate Inventory, December 19, 1760. (Stilliards were a relatively crude hanging form of weighing mechanism).

280 PCA, Margaret Carpenter, Probate Inventory, 1676; PCA, Alice Bradford, Probate Inventory, 1670/1671
2 Gallon bottles 1 larger Cannister … and 12/6 Jarrs’ in the ‘Shedd Closet’. 281

While Robert Davidson’s list includes’ 4 Stone juggs’, George Wells’ inventory of 1754 lists ’1 Groce Bottles 26/. 1 Cask Cyder 10/. A Parcel of Empty Casks 8/’, and Matthew Shield’s estate of 1766 contained ‘A parcel of Vials &c’ in the hall, ‘1 Case and 10 Bottles’ in the’[Cham]ber and Closet’, and a further ‘2 Doz. Bottles’ in the ‘Celler &c.’. 282 Meanwhile Ischmael Moody’s inventory of 1749 mentions ‘ 2 Gallon Do.... 1 large Case with 16 two Gallon Bottles filled with Arrack … 2 smaller Do. With 16 two Qt. Bottles …[and] 10 earthen Bowls’ in the ‘Barr Room’, ‘19 doz Bottles’ in an upstairs room, a further ‘9 Earthen Bowles 10 Mustard pots & 6 Mugs 17/ …16 large Mouth Bottles 5/’ in the ‘old Dairy’, and ‘1 Pewter Gallon pot’ in the kitchen, and ‘11 Carboys, … 12 doz bottles with Stale Liquors, … 20 Gallons Rum, … 1 Case with 12 two qt. Bottles with Cordials’ in the ‘Cellar under the Ordinary’). 283 Indeed, the variety of equipment of possible use in the making of botanicals typically found in a single estate may be seen in John Trotter’s inventory of 1745:

An Old Pestle & Morter 1/3 an old Brass Scale & Coffee pot 3/ 0..4..3
1 Large old Copper Kettle 20/ 1 Do. 30/ Water pails Tubs & Salt Box & 1 ax 6/6 2..16..6
7 doz. Quart Bottles 14/ some old Casks 7/6 2 Bushells bay Salt 4/1..5..6
1 Carboy & 2 Juggs 8/ an old warming Pan 2/ a pair Small old Scales & wts. 2/0..12..

A Case with 6 Pottle & some other Bottles 8/ a looking Glass 2/60..10..6. 284

A similar list, with storage containers, particularly bottles, may be seen in the earlier Plymouth inventories. Alice Bradford’s probate of 1671-1671 lists ‘an old

281 CWA, Mary Ripping, Probate Inventory, February 18, 1745; CWA, John Camp, Probate Inventory, March 19, 1774; CWA, Thomas Collier, Probate Inventory, June 19, 1705; CWA, Joseph Man, Probate Inventory, December 30, 1703; Henry Hacker, Probate Inventory, February 21, 1743.

282 CWA, Robert Davidson, Probate Inventory, March 17, 1740; CWA, George Wells, Probate Inventory, May 20, 1754; CWA, Mathew Shield, Probate Inventory, June 25, 1766.

283 CWA, Ischmael Moody, Probate Inventory, January 16, 1749.

284 CWA, John Trotter, Probate Inventory, June 15, 1745.
Case of bottles’ found ‘in the old Parlour’, ‘2 gallon glasse bottles and three pottle bottles’ in the kitchen, while that of James and Dorothy Brown (1673) also lists a full ‘case of bottles’.285

Virtually all of the equipment and items listed in inventories from both settlements may, as has been noted, have been employed in a range of activities, including culinary uses. Yet the production and commonality of ales and alcohols is indicative of the ease with which medicine making could be adapted within the domestic setting. Moreover, in some instances, the preponderance and combination of certain items are strongly suggestive of the production of medicines. In Moody’s case, the listing of cordials indicates the presence of botanicals in substantial quantities. Moreover, Thomas Collier’s inventory of 1705 more specifically lists ‘Physick and Books 11.1.8’, as well as a range of medicines:

<table>
<thead>
<tr>
<th>Medicines</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Old but Vendable</td>
<td>£24..18..7</td>
</tr>
<tr>
<td>More do.</td>
<td>4..3..4</td>
</tr>
<tr>
<td>Not Vendable</td>
<td>26..17..0</td>
</tr>
<tr>
<td></td>
<td>£55..18..11</td>
</tr>
<tr>
<td>A parcel New Medicines</td>
<td>20..6..3½</td>
</tr>
<tr>
<td></td>
<td>£76..5..2½</td>
</tr>
<tr>
<td></td>
<td>301..5..1½</td>
</tr>
</tbody>
</table>

Collier’s list demonstrates that he was not only buying items from an apothecary’s, as does William Pattison’s listing of ‘a box of Druggs & a plaister Salve’ in his inventory of 1703, but that these items were valued highly enough

to warrant being included in the probate inventory, *along with* the ‘do it yourself’ books. 287

Items more closely, and specifically, used in working with botanical material may also be found in these inventories. In Colonial Williamsburg, Thomas Dennett’s probate included ‘One spice Grater’ (probably specific for grating nutmeg), while Henry Hacker’s inventory lists contains ‘1 Bark Sifter 1 small Strainer 3/’ in the ‘Stairs Great room’. 288 James Michell’s inventory of 1772 lists (amongst other things) ‘2 Gro: Empty Bottles 60/... 3 large Powdering Tubbs 22/6 3 large Jarrs 20/... 1 large Case with Bottles 70/. 5 small Do. 70/... 7 Earthen Pans’ and ‘1 large lignum vite Mortar and Pestle’ in the cellar. 289 While many of these items would have multiple uses, the powdering tubs and ‘lignum vite Mortar and Pestle’ suggest medicine production. The ‘lignum vitae mortar and pestle’ here refers to a larger, heftier piece of equipment than that which would be demanded by simple culinary use (in grinding spices such as cloves, for example), as the dried bark, which would need to be further shaved or powdered prior to being distilled or tinctured, has an almost rock-like consistency, and likely was imported, and sold to domestic consumers, in small chunks. A second mortar and pestle to be found in the kitchen is specifically referred to as a ‘Spice Mortar and pestle’ (though again, the use of spices may have equally been used for culinary as well as medicinal purposes, or, more likely, both).

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288 CWA, Thomas Dennett, Probate Inventory, September 8, 1673; CWA, Henry Hacker, *Probate Inventory*, February 21, 1743.
289 CWA, James Mitchell, *Probate Inventory*, July 20, 1772. Lignum vitae is discussed in chapter six.
Evidence relating to the combined use of both professional medical practice and domestic botanicals may be derived from Joseph Ring’s inventory of 1704. Ring left ‘1 Doctor Chest’ in the old House’, and ‘a prcell of Phisick’ in ‘the Clositt in the hall’ which almost certainly refers to purchased goods from an apothecary. Along with the two stills and copper furnaces already mentioned, Ring left ‘2 Stone Juggs … 1 Earthen Jarr’ as well as ’26 old Sider Caske … 40 gall. of Rum [and] 80 gall. Madera wine’ in the ‘Seller’; a ‘Bell metle mortar & pesell’ in the ‘Kitchin’; bottles, earthenware, sifters and strainers in ‘the Old Store along with ’½ doz of alchemy Spoons & 5 dishes qt. 15½ at 9d p lb 3 qt. tumblers 6 qt. Tanketts 2 qt. potts ½ doz. plates pewter’, substantial amounts of both sugar and salt (again, both holding medicinal as well as culinary importance), ‘2 Large tine funells … 3 lb peper’ in ‘the New Store’. Crucially, (added as an addendum to the body of the inventory under the heading ‘These goods are by request of the Executrix Inventoreyed but not appraised by us the Subscribers’) the inventory includes a further ’4 ½ lb. peper/ … 12 ounces of Cloves/ … 4 ounces of Cinmon/ … 2 lb ginger/ … 2 ounces mace’. This last list of botanicals, in light of both the extensive equipment, and the obvious stores of ancillary preparatory ingredients (alcohol, sugar, and so on), strongly suggests that the Williamsburg Ring household was preparing its own botanicals as well as purchasing medicines from regular sources.

Similarly, Joseph Walker’s Williamsburg estate of 1724 leaves a ‘Limbick & Cistern 39lb’, which, while a still can theoretically be used as easily

\footnote{CWA, Joseph Ring, July 5, 1704.}

\footnote{The doctor’s chest could refer to a chest or trunk owned by a physician, but is far more likely to refer to the sort of household first aid cabinet/ chest/ trunk which were occasionally put together by domestic users, but more commonly purchased whole from apothecaries, with a range of what was deemed to be the more important remedies for domestic usage.}
to distil alcohol as distillates, the term ‘limbick’ (a form of ‘alembic’) is used
almost exclusively for medicinal distillation; and combined, as it is here, with a
tank capable of holding 39 lbs of dried material, we see that the medicine was
being produced on a fairly substantial scale.\textsuperscript{292} Walker’s inventory also lists a
number of ambiguous items (for example, a marble mortar and pestle, scales,
and a range of containers, including ‘1 Earthen pan, 1 Stone pottle Jug, 1
pipekin, 6 Stone bottles, 2 Jarrs 6 Stone butter pots, 1 Earthen butterpot, 3
Earthen plates’ and ‘A large Cannister @ 3 [unreadable] Do.’) along with
botanicals found ‘in the Store’ and under ‘Grocery’ are 7/8 Garlix 2/ ‘2.9.6/ …
29 Ells ¾ Garlix @ 14.d’, ‘8 lb. Scrap’d Ginger @64. 4/32 ¾ lb. pepper @ 22d
£3.-.-1/2’. Walker, like Ring, clearly bought in medicines, however, as seen in
the ‘box Medicines £6.3’ listed under the heading ‘Haberdashery’.

Fifty years earlier, in the late-seventeenth-century, Alice Bradford of the
Plymouth settlement likewise has access to a range of medical sources.\textsuperscript{293} Her
inventory lists a number of books, including \textit{the Meathod of Phisicke} and
‘Gouges domesticall dutyes’, suggesting that she was engaged in current
thought and advice on homemaking and medical knowledge.\textsuperscript{294} This is
comparable to Elizabeth Freke’s ‘accountt of whatt books I putt into the deep
deale box by the fire side in my own clossett’, which lists (along with a range of
religious texts, histories and romances): ‘I book of cirgiary by Colebach …I

\textsuperscript{292} Walker, Joseph, \textit{Probate Inventory}, September 2, 1724.
\textsuperscript{293} PCA, Alice Bradford, Op.cit.
\textsuperscript{294} Philip Barrough’s \textit{The method of phisick, containing the causes, signes, and cures of inward
diseases in mans body, from the head to the foote. Whereunto is added, the forme and rule of
making remedies and medicines, which our physitions commonly use at this day, with the
proportion, quantitie, and names of such medicines} first printed in 1590 by Richard Field,
London, with subsequent reprints including those of 1596, 1610, 1617, 1639, 1652; and William
Gouge, Anglican clergyman, \textit{Of Domestical Duties and the family}, Printed by John Haviland for
William Bladen, London,1622
Compleatt Herball by Peachy … 2 books of Cullpeppers physick … I abstactt of Gerralds herball of my wrightine now in the great black trunke… [and] I book of the Husband Mans Instructer’. 295 Bradford’s Colonial inventory also contains the usual range of kitchen utensils and equipment, including a ‘pewter funnell’, ‘1 great lugg and 5 smaller ones 4 earthen pans and 2 earthen potts’, several kettles (including ‘French kettles’ as well as ‘brasse’ and iron versions), ‘a brasse pestle and Mortor … [and] a paire Andjrons’, ‘potts’ and pans, a ‘skimer’, ‘tonggs’, ‘spitts’, and so on. And along with the substantial storage containers already detailed, Bradford’s estate left the typical ‘scales & weightes with an Iron beame’; the ‘iron beam’ of which, like the stilliards seen in the Williamsburg probates, perhaps suggests the measurement of substantial quantities of ingredients. This last is particularly suggestive of medicine making in light of Bradford’s ownership of a popular book on the uses and means of preparing botanical medicines. 296

Items left in probate evidence from the Plymouth settlement which relate more specifically to medicine production are scant; James and Dorothy Brown own ‘1 morter and pestle [and] 10 alcomy spoones’, while Margaret Howland owned a ‘belmettle spice Morter & pestee [and] … Tin 3s & a Glasse bottles’. 297 Although several of the Plymouth estates list various grains and livestock, not one of those examined lists plants which might be at all construed as botanicals, nor do they mention seeds (of any sort). It is almost certain that

295 Elizabeth Freke, Receipt Book, BL. MS, fol.9IV, datedi7ii, Octtober the i6.
296 All of the Plymouth inventories examined here, bar one, listed books –these were not typically further identified, apart from where Bibles, Psaim books and Psalters are specified (this occurs virtually universally). Whether the remaining books consisted of vernacular, ‘self help’ books, including medical works, or not, is impossible to tell from the inventories alone.
297 PCA, James and Dorothy Brown, Probate Inventory, 1673/1674; PCA, Margaret Howland, Probate Inventory, 1683/1684.
these households would have had the latter, and probably they would have had some form of the former also (even if ‘bought in’ from regular sources such as Apothecaries). The lack of mention in these probate inventories may suggest that these goods were so common and easily acquired (which might suggest household production over commercial acquisition) that they were not considered of enough value to list in estate evaluations. In looking at what these inventories collectively have to say about domestic agency as it relates to the knowledge, skills, and production of botanicals in the American colonies, what we may say with certainty is that these individuals had the equipment and the means of producing and storing medical compounds. Combined with earlier evidence, particularly from correspondence, there is every reason to believe that most households were doing so. Like their English friends and relatives, the early Colonialists had recourse to strong community networking and transmission routes (oral and scribal) as well as vernacular texts; they were largely engaged with agrarian pursuits and well situated to growing and supplying the bulk of their own botanical needs. That a common domestic botanical culture continued to thrive is well evidenced by the widespread, indeed, virtually universal, occurrence of production equipment. Moreover, that the Colonial practice was a continuation of the earlier English culture may be read in lists of medicinal plants themselves.

Of Plants and Plant Lists

We might consider the interplay between grand and petite traditions relative to old and new world botanicals by looking at those plants as broadly defined entities with complex cultural and commercial values. Early Modern
English and Colonial social definitions and evaluations of the plants’ desirability and worth were driven, at least in part, by a conscious desire to discover new, saleable, botanicals. Botanicals became commodities both as desirable exotic garden cultivars, and as active medical agents, as will be explored further in this Chapter. Indeed, a wealth of scholarship has been devoted specifically to the role of what is commonly identified as ‘bioprospecting’ (appropriating a very modern word and concept for historical purposes, which has its own problems, but serves well in this instance) in Early Modern European and Atlantic histories. As an historical construct, ‘bioprospecting’, may be seen as the deliberate searching for information specific to plant medicines from new world peoples and practices.  

For example, scholars studying Early Modern sciences have examined the extent to which the discovery of useful botanicals proved one of the primary motivating forces for new world exploration. Plants arriving from the Americas very quickly became valuable and central remedies across European materia medicas, while the majority of plants to be found in new world Anglo-American gardens and Apothecaries’ were of old world origin.

An unintended outcome of the exportation of ‘grand’ European cultural and physical traditions was the resulting mixture of plants and practices both within regular professional medical use, and in trans-Atlantic households. Schiebinger writes of ‘the mixing and hybridization, collecting, sorting, and extinctions of knowledges’ amongst indigenous, European, and African cultures,

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298 C.f. In the UK the History of Herbal Medicine seminar series examines both cultural and medical significance of botanicals and their employment, as does the annual Oxford (Mississippi) International Conference on the Science of Botanicals, while the American Institute for the Preservation of Medical Traditions focuses largely on historical botanical bioprospecting. Journals such as Planta Medica (pharmacognosical based research) are also including more articles relating specifically to historical research.

considering both the roles played by indigenous Americans and African slaves in the introduction of new world flora into European usage ‘brought about equally by proximity and by necessity, and the impact that these divergences had on all of the competing cultures’. 300 In the first instance, differing cultures unsurprisingly cross-pollinate each other when they are in regular contact, with the variety of unforeseen circumstances dictating the adoption of knowledge and practices, both in order to ensure individual and communal survival, and to further original commercial interests. Thus we see European plants in common use within households in the Americas as both foods and medicines, whilst also seeing plants native to the Americas becoming regular staples in European medical traditions. In the second instance, applying Schiebinger’s theory to Atlantic botanical cultures, we might expect to see specific examples of ‘extinctions of knowledge’, whereby appropriated *materia medica* supplants or supersedes previous medicines, both in the prevailing grand European, and in the indigenous petite, traditions resulting from Colonial expansionism. Schiebinger argues that it was the act of colonization which was ultimately intimately concerned with the eventual collapse of the prevailing grand theory of humoral medicine in European thought and practice. What this thesis is interested in interrogating is whether exposure to, and inclusion of, new world botanicals reflects directly on the petite tradition of Anglo-American domestic botanical knowledge and use. Consideration of the changes in what botanicals were employed in the inherited, shared, European canon allows us to establish

both the inherited communal origins of that shared practice, and the divergences which herald a new, North American, culture.

While cultural historians are interested in how botanicals were perceived and utilized by those individuals employing them, Atlantic historians are typically interested in botanicals (as well as plant foods) as commodities and items of trade.\textsuperscript{301} We know a great deal about those botanicals imported into the colonies as well as those exported back for European consumption and use. For example, looking at the 1648 London \textit{Rates of Marchandizes}, we see a number of botanicals listed (both as medicinal ‘drugs’ and as edible and other commodities). For example, there are rates listed for three separate Lignums: \textit{Lignum Aloes}, \textit{Lignum vitae}, and \textit{Lignum rhodium}. Also listed are a range of imported old world spices such as Caraway, ‘Cardomomes’, ‘Cassia’, Coriander, Cumin, Greene-Ginger, and Nutmeg; old world medicinals such as Daucus, Elleborus Albus & Niger, ‘Fenell-seedes’, Gentiana, Opium (by the pound), and ‘Bayberies’; and new world drugs such as Callamus, Ginny Pepper’, Sarsaparilla, Sassafras (root and wood), and Tobacco.\textsuperscript{302} Evidence

\textsuperscript{301} Cf. Elaine Leong, \textit{`Making Medicines in the Early Modern Household} Bulletin of the History of Medicine - Volume 82, Number 1, Spring 2008, para.1, p.156. Leong includes a list of early modern medical attributes associated with particular waters, with no analysis of where the claims come from in terms of what might/ might not be in the botanicals to justify their use for specific ailments.

\textsuperscript{302} England and Wales, \textit{Commissioners of Customs, The rates of the marchandizes as they are set downe in the booke of rates for the custome and subsidie of poundage, and for the custome and subsidie of clothes the same being signed by the Kings Maiestie} (1604). Of the plants, \textit{Lignum Aloes} probably refers to spp. from Africa, though there are American species, \textit{Lignum vitae} is Guaiac wood, or Guaiacum, originating in the Americas, and \textit{Lignum rhodium} is Rosewood, found in the Canary Islands as well as the West Indies. \textit{Daucus} is \textit{Daucus carota}, the wild carrot, \textit{Elleborus Albus & Niger} refer to \textit{Helleborus spp. i.e. Helleborus niger}, or the Christmas Rose, \textit{Callamus} is \textit{Acorus calamus}, and while calamus can be found across Europe, it was exposure to Native American use of calamus as a foodstuff and medicine that the plant entered into the English materia medica, \textit{Ginny Pepper} is probably \textit{Lepidium virginicum}, also known as Virginia pepper or pepperweed. Of the five primary new world botanicals examined in depth in the thesis, four are listed in the Rates of Marchandizes, with \textit{Cinchona officinalis} being the
suggests that the major botanicals which fed into European *materia medicae*
(which will be considered in depth in the Chapter on new world herbs) were
clearly valued as merchandise. This is particularly true of tobacco, and by the
mid-eighteenth-century, Burnaby was writing that Virginia’s trade
is large and extensive. Tobacco is the principal article of it. Of this they
export annually between fifty and sixty thousand hogsheads, each
hogshead weighing eight hundred or a thousand weight: some years they
export much more. They ship also for the Madeiras, the Streights, and
the West-Indies, several articles …. : to Great Britain, bar-iron, indigo,
and a small quantity of ginseng, though of an inferior quality.\(^\text{303}\)

Sassafras was also one of the main commodities shipped back to England on
the *Fortune*– along with beaver skins, clapboard, wainscot, and walnut. In
looking at the English tax rates on drug imports, we see that importation rates
for sassafras wood fall substantially, from 16 pence per pound in 1604, to 0.72
pence per pound in 1712, suggesting that the plant was moving from the realm
of luxury into that of staple botanical.\(^\text{304}\) Similar rates chart the rise in
importation of lignum vita, tobacco, and sarsaparilla, suggesting that American
botanicals were moving across the Atlantic in substantial, and increasing,
quantities, and were a highly valued commodity.

Plants of old world origin, however, clearly formed the bulk of produce,
both as foodstuffs and as medicines, within British households on both sides of

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\(^\text{303}\) Rev. Andrew Burnaby, *Travels Through the Middle Settlements in North America, In the
Years 1759 and 1760, with Observations upon the State of the Colonies*, Edition the Third,
Revised, Corrected, and Greatly Enlarged, by the Author, London (Printed for T.Payne, at the
Mews-Gate) 1798 p.17.

\(^\text{304}\) Smith, *New England’s Trials*, 1622 as cited in Edward Winslow, *Chronicles of the Pilgrim
Fathers*, (Alexander Young, ed.) p.236, notes.. (This inventory refers to the *Fortune’s* sailing on
are set downe in the Booke of Rates for the Cumstome and Subsidie of Poundage, and for the
Custome and Subsidie of Clothes the same being signed by the Kinds Maieste (London, 1604);
Thomas Langham, Broker, The neat duties, and the draw-back upon exportation, (al discounts
and abatements deducted) of all drugs specified in the book of rates (London, 1712).*
the Atlantic. In 1634, for example, William Woods, writing on American soil and cultivation in his Chapter titled ‘the Herbs, Fruits, Woods, Waters, and Minerals’, notes that Colonial

ground affords very good kitchen gardens for turnips, parsnips, carrots, radishes, and pumpions, muskmelon, isquouterquashes, cucumbers, onions, and whatsoever grows well in England grows as well there, many things being better and larger. There is likewise growing all manner of herbs for meat and medicine, and that not only in planted gardens but in the woods, without either the art of the help of man, as sweet marjoram, purslane, sorrel, penerial, yarrow, myrtle, saxifarilla, bays, etc. 305

Over a hundred years later, Moody Follensby’s garden diary plans written in Massachusetts are concerned with getting ‘english Beans’, lettuce, ‘pease’, and ‘carrots’ into the ground, and by the end of the eighteenth-century, John Adam’s recommendations for the perfectly stocked Colonial homestead and garden have expanded on the original Puritans’ provision lists considerably, and are notable for the wealth of old world inclusions. From John Adams’ third diary (of 1759) which contains both personal anecdote and commonplace entries:


Writing in 1634, the English author William Wood outlined useful plants for the average Colonial householder to keep on hand, combining old and new world

examples (aniseed and corn). It is notable that Adams’ much later, American, list does the same (combining red root, *Sanguinaria Canadensis*, with ‘Dandelyons’, for example). There is a comingling of old and new world plants in both English and Colonial sources, with appreciation and application of both across the culture.

This mixture of the old and new worlds may be seen, for example, in virtually all Colonial lists of the period. For example John Lawson wrote of plants commonly found in southern Colonial domestic gardens in the late seventeenth and early-eighteenth-centuries, combining the old world ‘physical’ botanicals already discussed with a variety of new world plants including

> the Scurvy-grass of *America*, I never here met any of the *European sort*; *Tobacco* of many sorts, ... two sorts spontaneous, good Vulneraries, ... *Asarum* wild in the Woods, reckon’d one of the *Snake-Roots*; ... *Ground-Ivy* spontaneous, but very small and scarce, ... four sorts of *Snake-Roots*, besides the common Species, which are great Antidotes against that Serpent's Bite, and are easily rais'd in the Garden ... *James-Town-Weed*, so called from *Virginia*, the Seed it bears is very like that of an Onion ... The Red-Root whose Leaf is like *Spear-Mint*, is good for Thrushes and fore Mouths ... [and] *Sarsaparilla*.

Interestingly, Lawson here specifies both pot-herbs, or those botanicals typically associated with the cooking pot, and those he designated as ‘The more Physical’:

> Our Pot-herbs and others of use, which we already possess, are Angelica wild and same, Balm, Bugloss, Borage, Burnet, Clary, Marigold, Pot-Majoram, and other Marjorams, Summer and Winter Savory, Columbines, Tansey, Wormwood, Nep, Mallow several Sorts, Drage red and white, Lambs Quarters, Thyme, Hyssop of a very large Growth, sweet Bazil, Rosemary, Lavender.

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308 Ibid.
Clearly he perceives a distinction between ‘cooking’ herbs and medical ones, and equally clearly, both are considered of value to the householder. What is less clear is the means by which he differentiates between the two, for in the first list he includes a number of botanicals (Bugloss, Wormwood, and the Mallow) which are not commonly considered foodstuffs, while the second ‘physical’ list, contains not only a number of botanicals typically used solely as medicinal agents (‘Carduus Benedictus, the Scurvy-grass of America… Elecampane, Comfrey, Nettle … Burdock … Poppies in the Garden, none wild yet discover’d; Wormseed, Feverfew, Rue, Datura’, or James Town Weed,) but also includes those with culinary associations, such as dill, caraway, cumin, anise, and coriander.

This combining of old and new world plants, and the lack of a coherent classification of botanicals as either medicine or foodstuff typical of the inherited Anglo-American domestic culture as outlined in the first three Chapters, is well illustrated by Robert Beverely’s writing on domestic horticulture in Colonial America:

A Kitchin-Garden don’t thrive better or faster in any part of the Universe, than there. They have all the Culinary Plants that grow in England, and in far greater perfection, than in England: Besides these, they have several Roots, Herbs, Vine fruits, and Salare-Flowers peculiar to themselves, most of which will neither increase, nor grow to Perfection in England. These they dish up various ways, and find them very delicious Sauce to their Meats, both Roast and Boild, Fresh and Salt; such are the Red-Buds, Sassafras-Flowers, Cymnels; Melons, and Potatoes, whereof I have spoken at large in the 4th Chapter of the Second Book. It is said of New-England, that several Plants will not grow there, which thrive well in England, such as Rue, Southernwood, Rosemary, Bays, and Lavender: And that others degenerate, and will not continue above a year or two at the most; such are July-Flowers, Fennel, Enula Campana, Clary, and Bloodwort: But I don’t know any English Plant, Grain, or Fruit, that miscarries in Virginia; but most of them better their kinds very much, by being sowed or planted there. It was formerly said of the Redtop Turnip,
that there in three or four years time, it degenerated into Rape; but that happen'd merely by an Error in saving the Seed; for now it appears, that if they cut off the top of such a Turnip, that has been kept out of the Ground all the Winter, and plant that top alone without the Body of the Root, it yields a Seed, which mends the Turnip in the next sowing.\textsuperscript{309}

While Beverley is ostensibly extolling the superiority of American gardens, gardening, and botanicals, he is focusing on the wide range of old world plants which thrive in the new world, particularly noting medicinal agents such as Rue, Southernwood, Lavender, Enula (\textit{Inula helenium}, commonly known as Elecampane), and Clary (\textit{Salvia sclarea}). Indeed, the number of indigenous medicinals here is slight by comparison, consisting solely of Sassafras and Bloodwort (probably \textit{Sanguinaria canadensis}). Although ostensibly a Colonial tract extolling the primary virtues of American horticulture, Beverley’s work remains largely English in botanical content, reflecting an extant Anglo-bias in the colonies at the onset of the eighteenth-century.

Ancillary to the examination of the combining of Anglo-American plants in garden lists is the consideration of how householders assimilated, adapted, and combined both old and new world plants within preparations. Indeed, combination of old and new world plants in Early Modern and Colonial domestic prescribing occurred regularly, across the entire span of time under consideration here, and in both English and American receipt books. In 1688, Mary Glover of Sussex, England, wrote an eight-page-long, complex, detailed ‘Flower of Oyntment’ recipe in a hurried, dense script into her household receipt

book. Glover’s recipe is in many ways typical of domestic lard-based ointments, and draws heavily on a long tradition of unguents containing flowers. The recipe differs substantively from its predecessors, however, both in its detail, notably the very long accolade of the remedy’s multitude of uses, and in its inclusion of a number of plants indigenous to the Americas. Alongside mainstays of medieval and Early Modern botanical prescriptives, such as sage, rose, celandine, and elder, Glover’s flower ointment contains three of the most pervasive, influential, and biologically active of the American herbs to first enter the European canon: sarsaparilla, sassafras, and guaiacum. Focusing on the three Colonial plants suggested in Glover’s ‘cure-all’ ointment, this Chapter examines this absorption of American botanicals into the English *materia medica*, particularly that body of plants employed within the private household, in order to ascertain how these plants impacted on, and were utilized by, domestic medical practice across the trans-Atlantic Anglo-American world.

A second example of old and new world botanical combining, in this instance for an internal remedy to be drunk, may be seen in Rachel Allen’s late eighteenth-century Colonial recipe for ‘A Diet Drink to be Wrought in Beer’, which calls for

2 handfuls of Water Cresses 2 handfuls of Sassafras roots 2 handfuls of Nettles 2 handfuls of Sasaborelle 2 pounds of Lignumvity 2 handfuls of Burdock roots 2 handfuls of Sweet Bryers Rots all this infuse in 3 or 4 gallons of Malt Beer – for the Consumption.311

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310 BL. Ms.57944, fol.20r-23v, Mary Glover, *Her Receipt Book*, 1688. Glover suggests this ointment would benefit a number of ailments, including its use in treating the ‘stingings or bitings of any venoumous beast’. Recipes of this sort are discussed under vernacular medical works in chapter three.

Here the indigenous sassafras and guaiacum (Lingnum vity) are employed alongside the naturalized imports, nettle and burdock. Indeed, this is an interesting recipe for its relative simplicity, and the clear parity of ‘usefulness’ and strength of action which the author attributes to all of the botanicals suggested by her recommendation of equal amounts of each. While Beverley’s earlier writing on American gardens had focused on English plants, Allen’s manuscript from the end of the eighteenth-century gave equal emphasis to both old and new world botanicals: American plants and the American medicines made from them had achieved something close to parity with their European counterparts in terms of usefulness and value for Colonial domestic authors.

In terms of their employment as medicines, botanicals take on various aspects of those areas of botanical culture already examined. These plants were subject to cross Atlantic cultural norms, with old world gardeners eager and keen to import exotic new horticultural species on the one hand, and domestic receipt books from England quickly reflecting interest in plants from the Americas on the other. Likewise, botanical plants were clearly viewed as both provisions and as commodity, illustrating the ongoing broad inclusion of foods and, in particular, medicines, typical across the field in study.

312 For example, the Trascents were horticultural explorers and nurserymen, for want of a better word, who published lists of the seeds available to for the general public to purchase. Their contribution to early modern horticulture and gardening has been well recorded, both in Leith-Ross and Potter’s works, as well as in Mea The Trascents: their plants, gardens and museum, 1570-1662 (London: Michael Joseph, 1964), amongst others; the botanist Dr John Hope’s Journal of 1766 is analysed in John H. Harvey’s, ‘A Scottish Botanist in London in 1766’, Garden History, Vol.9, No.1 (Spring, 1981), pp.50-54, 57-58; similarly, Duthie’s work lists American plants in European contexts in ‘The Planting Plans of Some Seventeenth-Century Flower Gardens’, Garden History Society, Vol.18, No. 2 (Autumn, 1990) pp.77-102; and John Schofield lists a number of American plants in ‘City of London Gardens, 1500 – c.1620’, Garden History, Vol 27, No.1, Tudor Gardens (Summer, 1999), pp. 73-88.
A number of new world plants identified by Early Modern Colonial writers as exhibiting attributed medical actions, however, clearly were not adopted by Anglo-American culture on either side of the Atlantic, by either ‘grand’ or ‘little’ traditions. Indeed, indigenous new world, specifically North American, botanicals known as medicinal agents which do not appear either in the marchandizes or in domestic sources appear in a number of Colonial vernacular works. Lawson writes of ‘the Indian tea’ which is

us’d and approv’d by all the Savages on the Coast of Carolina, and from them sent to the Westward Indians, and sold at a considerable Price. All which they cure after the same way, as they do for themselves; which is thus: They take this Plant (not only the Leaves, but the smaller Twigs along with them) and bruise it in a Mortar, till it becomes blackish, the Leaf being wholly defaced: Then they take it out, put it into one of their earthen Pots which is over the Fire, till it smoaks; stirring it all the time, till it is cur’d. Others take it, after it is bruised, and put it into a Bowl, to which they put live Coals, and cover them with the Yaupon, till they have done smoaking, often turning them over. After all, they spread it upon their Mats, and dry it in the Sun. to keep for Use. The Spaniards in New-Spain have this Plant very plentifully on the Coast of Florida, and hold it in great Esteem. Sometimes they cure it as the Indians do; or else beat it to a Powder, so mix it, as Coffee; yet before they drink it, they filter the same. They prefer it above all Liquids, to drink with Physick, to carry the same safely and speedily thro' the Passages, for which it is admirable, as I myself have experimented.  

Although Lawson has himself tried, and tested, the medicinal qualities of the tea, and found it agreeable (particularly as a carrier of other botanicals), the plant does not typically occur in either vernacular medical works or in the domestic manuscripts, regardless of their provenance or origin. Likewise, the hallucinogen, *Datura stramonium* (also known as Jimson week, or James Town weed), appears in the journals of Colonial diarists, but does not commonly appear in domestic recipes of the period. Nonetheless, there is a clear

familiarity on the part of settlers with both jimson weed and its properties:

Lawson writes of the ‘James-Town-Weed, so called from Virginia, the Seed it bears is very like that of an Onion; it is excellent for curing Burns, and asswaging Inflammations, but taken inwardly brings on a sort of drunken Madness’. While Beverley quite dramatically writes of its effects in a long passage:

The James-Town Weed (which resembles the Thorny Apple of Peru, and I take to be the Plant so call'd) is supposed to be one of the greatest Coolers in the World. This being an early Plant, was gather'd very young for a boil'd Salad, by some of the Soldiers sent thither, to pacific the Troubles of Bacon; and some of them eat plentifully of it, the Effect of which was a very pleasant Comedy; for they turn'd natural Fools upon it for several Days: One would blow up a Feather in the Air; another wou'd dart Straws at it with much Fury; and another stark naked was sitting up in a Corner, like a Monkey, grinned and making Mows at them; a Fourth would fondly kiss, and paw his Companions, and sneer in their Faces, with a Countenance more antick, than any in a Dutch Droll. In this frantick Condition they were confined, lest they should in their Folly destroy themselves; though it was observed, that all their Actions were full of Innocence and good Nature. Indeed, they were not very cleanly; for they would have wallow'd in their own Excrements, if they had not been prevented. A Thousand such simple Tricks they play'd, and after Eleven Days, return'd to the mselves again, not remembring anything that had pass'd.

Beverley’s account of the hallucinatory effects of Datura here suggest personal knowledge of the botanical, while Lawson’s briefer description illustrates that knowledge of the plant’s topical applications was also appreciated. Interestingly, both authors refer to the ‘cooling’ nature of the plant, suggesting that, at least for these authors, and the tradition which they represent, humoral theory is being applied to new world plants.

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314 John Lawson, IBID, p.78.
315 Beverley, Robert; Book Two: Of the Natural Product and Conveniencies of Virginia, In its Unimprov’d State, before the English went thither, p.24.
Aquas and the Communal Practice

There is a clear parity of botanical usage in Early Modern English and Colonial American households in terms of the recipe contents and preparation instructions to be found in domestic receipt books. This parity is seen in a number of specific ‘common’ recipes, such as those for the ‘aquas’ (mirabilis and vitae being obvious examples, but others, such as mithridate, also appearing across sources) while a commonality of practice may equally be traced in looking to the trans-Atlantic practice of combining old and new world plants in a variety of preparations. For example, there are versions of a metheglin recipe in most receipt books, from Grace Baumfylde’s receipt book of 1626 through to Lettice Pudsey’s Receipt Book of 1700. Recipes for Aqua vitae were likewise virtually universal, appearing not only in the domestic sources, but also in vernacular books such as Hartman’s Family Physician (1682). Aqua vitae as a single botanical entity is further to be found in more complex examples of polypharmacy botanicals. For example, it provides the base menstruum for other remedies in both vernacular and domestic works. The first of these may be seen in the ‘A Corda [...]l Water of Clove Gilly flowers’ recipe included in Hartman’s Family Physician of 1682, while domestic examples include Elizabeth Hirst’s English late-seventeenth-century recipe ‘To Make Usquebath’ calling for the householder to ‘Take Aquavitae of sack Lees


317 George Hartman, Family Physitian, 1682; FSL.ms. V.a.215, fols.49, 93, Susanna Pack’s Receipt Book.
one Gallon, shugar as fine as you can get a quart of a pound’ before adding further botanicals, and Hannah Huthwaite’s mid-eighteenth-century Colonial ‘Receipt for a Syack Pain’ combining ‘Bordeaux vinegar, and … aqua vita’ as the base menstruum.\textsuperscript{318} \textit{Aqua vitae} may be further found as a single ingredient in a compound mixture in other, non-remedial remedies, such as Mary Hooke’s winter ink recipe where she recommends adding ‘a Little Aquavite; [so that] it will nott frize’.\textsuperscript{319} \textit{Aqua vitae} was valued as an agent, both in its own right, and in combination with other ingredients across the span of the period covered by the thesis, as well as on either side of the Atlantic. As a single example of continued practice, this herbal preparation illustrates well the commonality of \textit{materia medica}, not only in terms of the raw botanicals contained within it, but also equally, of the broader practice employing them.

Recipes for \textit{Aqua mirabilis} may also be found in virtually all of the manuscripts, including the English Granville Receipt Book, Rose Kendall and Ann Cater’s book, and the writing of Elizabeth Freke, Margaret Baker, Mary Glover, Mary Hookes, Jane Dawson, Lady Grace Castleton, and Lettice Pudsey, as well as in the Colonial works of Rebeckah Winche and Martha Washington.\textsuperscript{320} \textit{Aqua mirabilis} recipes were particularly fashionable in early

\textsuperscript{318} Hartman, IBID; WL.ms.2840, fol.38, Elizabeth Hirst, \textit{Receipts}, 1684-c.1725; Wint.L.Doc.193, f.55r, Hannah Huthwaite’s Recipe Book (c.1720).
\textsuperscript{319} FSL.ms.A931, fol.110r, Mary Hookes’ receipt book.
seventeenth-century receipt books, as seen in Mrs Corlyon’s ‘The makinge and vertues of Aqua mirabilis et pretiosa’ or 1601, Lady Frances Catchmay’s ‘The makinge of aqua mirabilis and preci a wch is of singuler vertue’, 1629, and Jane Jackson’s simple recipe for ‘Aqua mirabilis et pretiosa’, while the receipt book of Elizabeth Jacob (and others) contains five separate recipes, including one titled ‘Aqua Mirabilis’, three others ‘To make Aqua mirabilis’, and a fifth for ‘a Water for the Lunges, and the Coldness of the Stomach, Call’d Aqua mirabilis’. \(^{321}\)

Moreover, *Aqua mirabilis* recipes typically contained similar botanicals across the Anglo-American spectrum: a recipe for ‘Mrs. Hobby’s ‘Aqua Mirabilis” is the very first entry in Rebeckah Winche’s American *Receipt Book* of 1666, and three versions, along with a long, detailed passage on ‘the uertues of this water’ may be found in Martha Washington’s late eighteenth-century Colonial manuscript.\(^{322}\) Each of these recipes tend to be made up of numerous similar botanicals, and in each case, these remedies contain a range of imported, exotic ‘hard’ spices which are typically distilled off first, followed by a second, ‘soft’ native English herb distillate. For example, Mary Hookes’ English ‘Aquamarabillis’ recipe of 1680 calls for ‘galangal, cubebs, sinamon, cardaman seeds, cloves’ (along with other botanicals), while Washington’s recipes for Aquimirabelis are all variations on a theme, with the first calling for ‘gallinggall,
quibbibs, licorish, anyseeds, cloves, nutmett, cinnamon, mace, & ginger’
before adding ‘mellilot, … angelico, cowslips, mayden hayr, margerum,
dragons, balme, mint, heart tongue, pimpernel, bay leaves, liverwort’ with the
possible addition ‘if you like ye taste’ of ye flowers of rosemary, cowslips,
bittonu, & mary Goulds, Jilleflowers, & red roses, burrage, & buglos’ before
finally adding ‘ye Juice of sullendine’.323

A particularly interesting version of *aqua mirabilis* may be found in
Frances Springatt’s manuscript from mid-seventeenth-century England which
calls for the householder to

Take on quart of ye Juce of Salendine, Bame, and Spermint,
and to yt quantity put 2 quarts of Brandy and 2 quarts of white
wine and Drugs from ye Apotecaries and put it in astill and still it
of very soft and into every bottle put a knob of Lofe Sugger
Ye Drugs are thus

Gallingall, Cardimoms, Cubibs, Melelets fflowers, Cloves, Mace
Nutmegs ginger of Each a Dram all Bruised –

The Early Modern treatment of spices as consumables indicated by Springatt’s
recipe is one which regards them as medical botanicals in the first instance, as
she instructs their purchase from the apothecary rather than the market. The
parity of both the inclusion and employment of botanicals in *aqua* recipes
across English and American sources in the seventeenth- and early eighteenth-
century sources clearly illustrates a shared, and common, domestic botanical
culture.

Hookes, Mary, *cookery book*, c.1675-1725. HSP., (Phil)Am.530.3.a., *Washington Family Papers*,
IBID.
In each of these recipes there is a mixture of typically old world spices and fresh garden herbs, often distilled into a pre-existing distillate. This is an altogether typical combination of hard and soft botanical material, and the clear staging of the recipe preparation is suggestive of domestic differentiation in dealing with these different materials. There are exceptions to this theme, however, which suggest a degree of adaptability on the part of the producer. For example, Washington’s second recipe, contrarily begins with the soft, herbaceous material, calling for the producer to take ‘ye Juice of sellandine’, and add ‘mint; mellilot flowers, rosasolis, cardimons, quibbibs, gallinggall, mace, nutmegs, cloves, and ginger … one handful of the flowers of Cowslips; and a little saffron’ all in one go, before boiling away – an action which would destroy much of the sensitive constituents of the herbaceous material. And her third receipt omits virtually all of the soft herbaceous garden herbs, and calls for the hard spices ‘cloves, mace, cardimoms, seeds, ginger, and gallinggal, nutmegs, quibbibs, and mellilot’ to be added to a mixed menstruum of ‘good white wine, or else sack, and two pintes of Aquavite or Aquicompesita, and two pintes of the Juice of Sellandine’.

While all of Washington’s recipes may seem superficially similar, their end products would have been substantially different, either as a result of differing production methods (variation of the sequence of ingredient used and changes to the extremity and duration of heat to which they were subjected), or in their omission of ingredients altogether. Clearly the last of these recipes would be well suited to the needs of householders who have no recourse to the

soft herbs, and are entirely reliant on imported medical botanicals, though the rationale behind the differences between the first two receipts is less obvious. What is curious about the three when viewed as a group, is the lack of any reflective instruction surrounding the differing receipts: they are presented simply as ‘au fait’ recipes, with an unstated assumption on the part of the author that each may be used in a similar fashion to the other.

Recipes for *aqua vitae* also vary across authors. Writing in the late sixteenth-century, Lady Grace Mildmay sends detailed instructions on the preparation of an *Aqua vitae* which closely resembles some of the *Aqua mirabilis* recipes in a letter to her housekeeper begun ‘My good Bess’,

> Evening on Tuesday distil of some of the aqua vitae from the tinctures, but not too near. Then strain and wring out hard the gums and spices from the liquor and put them to the extracted liquor of the herbs. Then put the tinctures of the cordials, rhubarb, agaric and aloes … Use your own discretion herein, but this is the form and matter.\(^{325}\)

The recipe ‘To Make aqua vite’ found in Mrs Carr’s *Receipt Book* of 1682, on the other hand, calls for a very simple compound, the householder instructed to simply ‘Take 2 gallons of the lees of sacke half a pound of Annyseeds 3 quarters of a pound of liquors well scraped & beate d put it into the liquor & putt on the symbex & let it distill softly with a soft fire’.\(^{326}\) Many of the recipes to be found in vernacular printed texts of the period seem to mimic the *aqua mirabilis* and *aqua vitae* of Mildmay, similarly containing a range of gums and hard spices with the softer, herbaceous garden herbs. Hartman’s recipe for ‘A rare Cordial Water called the Royal *Aqua Vitae*’ calls for the householder to

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\(^{325}\) NRO, W/A vol.55, fol.1, Lady Grace Mildmay, *Medical Papers*.  
\(^{326}\) WL.ms.1511, fol.31v, Mrs Carr’s Receipt Book, 1682.
Take Lignum, Aloes, Roots of Zedoary, Angelica, Carline, Thistle, and Valerian, of each one ounce; Cinamon, Mace, and Citron-rind, of each six drams; Cloves, lesser Cardamoms, and sweet Fennel-seed, of each half an ounce; flowers of Rosemary, Sage and Marjoram, of each two small handfuls, which is to be bruised, and put them into a stone Jugg or Bottle with Spirit of Wine and Malmsey Wine, of each four pints; stop the Vessel close and them macerate in a warm Bath for three days, then distil them in a sand Bath, or in Balneo Mariae, dissolving in the distilled water fine Sugar, then put it up for use. And if you would have it perfumed, you may dissolve in it Ambergreece and Musk, of each half a dram.

This Water is much esteemed and used by all the Nobles in France: The perfection of it is, that although there be not many Ingredients, yet they are of great vertue. It fortifieth the Brain, Head and Stomach, strengthens the Memory, comforts the Heart, reviveth the Spirits when enfeebled by the 147 distillation of the Spirits, or overpressed by the abundance of ill qualities or bad humors. It is to be taken fasting, from one spoonful to three in some proper liquor.  

Hartman does, however, deviate from the more standard domestic preparations in his 'Excellent Syrup of Aqua Vitae for a Cold or Cough, or Shortness of Breath', using a base made from a reduced brandy and sugar mixture to which is added ‘Oximel of Squills, which is a most Sovereign thing for the Breast and Lungs, Phthisick, Astma, and Shortness of Breath’. Not only is the menstruum fundamentally different from the aqueous household remedies, but it also differs in containing only one botanical, and that is neither a typical hard spice, nor a gum. Indeed, by Early Modern and Colonial standards, this recipe is related to aqua vitae in name only, differing entirely in spirit from the accepted remedy. Mirroring the vernacular remedies, Jane Jackson’s mid-seventeenth and mid-eighteenth-century aqua mirabilis et pretiosa recipe is preceded by one for ‘A good aquavite’, while a recipe ‘To still aqua vite’ appears next to recipes ‘To make the best aqua composite’ and ‘A very good aqua coposita to bee mixed with rosasolis cordiall and comfortable’. These examples show that

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327 George Hartman, Family Physitian, 1682, p.147.
328 IBID, p.204.
both vernacular and domestic authors produced standardized, as well as individualized, versions of standard *aqua* recipes.

The vernacular books assume that householders will have a quantity of *aqua vitae* to hand. Hartman alone uses it repeatedly as a single ingredient in more complex remedies, including in his ‘Excellent Cordial Water for Surfeits, and for an Ague’ calling for ‘six quarts of *Aqua Vitae* to which are added’ a peck of red Poppy-flowers, … Figs and Raisins stoned, of each two ounces; [and] Aniseeds beaten, half an ounce’, as well as his ‘Corda[...]l Water of Clove Gilly flowers’ which uses *aqua vitae* as the aqueous based menstruum for a simple ‘Clove Gill-flow|ers’ distillation. But domestic authors also employ *aquas* in this manner. On landing at Cape Cod, Edward Winslow wrote that

… we marched through boughs and bushes, and under hills and valleys, which tore our very armor in pieces, and yet could meet with none of them [Native Americans], nor their houses, nor find any fresh water, which we greatly desired and stood in need of; for we brought neither beer nor water with us, and our victuals was only biscuit and Holland cheese, and a little bottle of aqua-vitae, so as we were sore athirst.

Winslow’s account demonstrates early settler awareness that *aqua vitae* did little to relieve thirst, and yet its inclusion in their carefully rationed pack of supplies suggests that it was highly valued by the party. This in turn suggests that it may well have been included either as a direct medicine in its own right, used to clean wounds, for example, or as a simple ‘restorative’, or as an extraction agent for producing simple, direct herbal products ‘on the hoof’, combined, for example, with indigenous plants to make spontaneous tinctures and other simple botanical products.

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329 IBID, pp. 153, 149.
Winslow’s inclusion of *aqua vitae* in his listed supplies supports earlier domestic use of *aqua vitae* as a botanical in its own right, as seen in Grace Mildmay’s Norfolk ‘aqua vitæ’ recipe from the late-sixteenth-century or early-seventeenth-century, which is a preparation of aniseed and liquorice steeped in strong ale, rather than as a simple ‘rectified spirit’.\(^3\) There is, however a twofold development: a willingness to embrace what is to hand, and a distancing from more complex botanical polypharmacy, illustrated by the later eighteenth-century American domestic use of botanicals. It may well be this Colonial development which explains confusion over the definition of many waters existent in current scholarly discourse, with a simple equation of the later, Colonial, ‘simple spirituous’ menstruum with the far more subtle, complex, botanically active Early Modern English *aqua*.*s*. A further example of the development, and differentiation, between Early Modern English and Colonial American employment of waters as base menstruums may be found in the domestic sources. A comparison of Lady Grace Mildmay’s English receipt for the preparation of *guaiacum* written in the late-sixteenth century with similar instructions in Catherine Haines’ Philadelphia ‘notebook’ of 1770 highlights the difference in old and new world raw materials.\(^2\) Haines’ use of rum as a menstruum for her tincture, rather than in one of the ‘old world’ waters, whether this be Mildmay’s ‘mithridate’, or *aqua vitæ*, is clearly an instance of new world adaptation. Not only is she using the solvent to hand, but that solvent is not, in its own right, a compound botanical with medicinal purposes. Undoubtedly rum

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\(^3\) Mildmay's *aqua vitae* recipe is cited in Pollocks *With Faith in Physic*, Op.dit., pp.137
was used for medicinal purposes, as both an antiseptic and as a ‘warming’ agent, but this use is specific to its alcohol, rather than herbal, content.

Early English appreciation for American medicinal plants is reflected in the early assimilation of American botanicals into the English *materia medica*, an appreciation which may be traced back into the Anglo Colonial practice, as will be discussed in Chapter Six. Equally, old world plants clearly formed the bulk of domestic medical agency in the colonies from the onset of settlement through emancipation. Indeed, the import of European and Asian plants into the colonies remained consistently important, even as Colonial botanical cultures began to devolve their own *materia medica*. In his early eighteenth-century *History and Present State of Virginia*, Robert Beverley wrote that ‘as for Spicery, and other things that the Country don’t produce, they have constant supplies of ‘em from *England*’. The fundamental characteristics of shared botanical lists and individual adaptation key to the Anglo-American domestic botanical culture are everywhere apparent in Early Modern English and Colonial American sources. Authors, both domestic and vernacular, consistently include lists of medicine making equipment for domestic production of botanicals, medicinal plants from both sides of the Atlantic are perceived as critical provisions by all authors, and a clear commonality of agency and practice shows that this truly was a shared British culture. Indeed, the willingness of individual authors to use similar plants and follow inherited communal preparations while adapting botanicals to incorporate new material, suggests an appreciation for the plants’ medical action, as well as a practical flexibility on the part of the practitioners.

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The willingness of Americans to employ new menstruums in their botanical preparations hints at the beginning of a divergent culture, one which is further explored by considering botanicals employed in the eighteenth-century Colonial materia medica in Chapter Six.
Chapter 5. Inherited Cultures: Old World Botanicals

The trans-Atlantic Anglo-American domestic botanical culture explored in Chapter Four was largely based on an inherited, old world *materia medica*. Chapter Five examines this body of old world plants, reinforcing the commonality of plants used across the practice, and highlighting ways in which individual practitioners adapted these to their own household needs. As such, Chapter Five looks to both more fully ‘flesh out’ what a shared Anglo-American domestic botanical culture consisted of, as well as looking to retrieve specific plant knowledge from that culture, recovering use and practice. Examination of these old world plants allows for a greater appreciation for these dual aspects of the underlying domestic culture by highlighting the extent to which each typified botanical use in Anglo-American homes across the period, and on either side of the Atlantic. The thesis’ consideration of plants here takes place largely in the context of domestic receipts, with reference to popular literature, travel writing, and settler texts, particularly in light of how domestic recipes relate to settler ‘lists’ of plants. The Chapter first considers the list of plants included in John Josselyn’s travel writings as a basis from which to establish commonality of *materia medica*, before turning to examine both shared, and divergent, traits in the treatment of specific old world botanicals between domestic authors.

A case study approach is adopted here, as in Chapter Six. This allows the thesis to establish the key principles of the prevailing domestic culture in detail by demonstrating that domestic authors were consistently drawing upon a single *materia medica* which was then flexibly adapted by individual authors in
preparing and applying the herbs. In every instance but one, any number of representative plant substances from the domestic canon would have fruitfully served to highlight this duality of the domestic culture. The representatives chosen: rose for flowers, cinnamon for spices (seed and bark), and elderberry for fruit, each illustrate domestic agency and ingenuity in various ways which might well have been served equally well by lavender, ginger, or dried grapes, or clove gillyflower, clove, and hawthorn berry. The botanicals examined here were chosen, however, for their commonality in the popular literature as much as for their frequency of use in domestic receipt books. The one old world botanical which is largely singular in its application is the poppy, which holds a deservedly unique and prominent place in both domestic and learned materia medica.

The European Canon: Old World Herbs and New World Demands

Early Modern and Colonial authors of vernacular settler texts include lists of old world botanicals as items of primary importance.334 In his New England's Plantation, or A short and True Description of the Commodities and Discommodities of that Country of 1630, for example, the English Puritan minister and early settler of the northern American colonies, Francis Higginson, specified a need for cloves, mace, pepper, cinnamon, and nutmeg as well both ‘1 Gallon of Aquavitae’ and enough grains and fats to constitute the ‘Victuals for a whole yeere for a man’.335 Similar examples of old world remedial culinary

334 ‘Settler texts’ = books intended to both promote and inform settlement of the colonies.
335 Reverend Francis Higginson, New England’s Plantation, or, A short and True Description of the Commodities and Discommodities of that Country, (London, 1630).
botanicals designated for use in the new world may also be found in the English travel writer, William Wood’s pamphlet of 1639. Wood notes that the ‘juice of lemons, well put up, is good either to prevent or cure the scurvy’, and suggests that (along with rather generous allowances of various alcoholic beverages) the well provisioned householder will want a variety of ‘strong-waters, &c.’ as well as ‘honey, nutmegs, cloves’ and the like.\(^\text{336}\) While a culinary historian might well see this inclusion of spices as an occasion to commend early settlers on their desire to better their palate, the inclusion of these botanicals is more likely to reflect the medical needs of the Early Modern and Colonial lay population. The blurring of the boundaries between foods and medicines is again reinforced: spices may have been desirable as food enhancers, but they were necessary as medicaments. Entirely derived from the English botanical canon, Higginson’s and Woods’ lists clearly illustrate that both the medicinal and the nutritive were deemed to be of equal import for Colonial survival.

The English traveller, John Josselyn, also called for similar ‘cross over’ provisions such as mustard and vinegar (both crop up regularly in both culinary and medicinal recipes in receipt books), but further outlined a list ‘For private fresh provision’ which, while clearly indebted to Wood’s list, provided greater rationale:

You may carry with you (in case you, or any of yours should be sick at Sea) conserves of Roses, Clove-Gilliflowers, Wormwood, Green-Ginger, Burnt-Wine [brandy, also discussed at length by Wood], English Spirits … Nutmeg, Mace,

\(^{336}\) William Wood, ‘What Provision is made for a Journey at Sea and what to carry with us for our use at Land’, from New-England’s Prospect, being a true, lively and experimental Description of that part of America commonly called New-England, London 1639.
Cinnamon, Pepper and Ginger … juice of Lemmons well put to
cure, or prevent the Scurvy.\textsuperscript{337}

Josselyn, like Higginson, reckoned that ‘One Gallon of Aqua vitae’ as well as
‘One Gallon of Oyl [and] Two Gallons of Vinegar’ needed ‘to be carried out of
England for one man’, and noted that ‘of Sugar and Spice … your best way is to
buy your Sugar there, for it is cheapest, but for Spice you must carry it over with
you’. This last admonishment is crucial in highlighting the dependency of the
colonies even towards the end of the seventeenth-century on old world
provisioning for much of the domestic \textit{materia medica}. But it is equally
important to note that none of these provision lists were written by, or for,
medical professionals: they were produced specifically for a lay audience, and
meant to educate the common householder as to what provisions would be
needed on arrival in the new world. Not only were Colonialists beholden to the
importation of many of their medicinal agents, but householders clearly intended
to employ them, and indeed, would have been competent and knowledgeable in
doing so.

While the thesis does not mean to imply that ‘Josselyn’s list’ is the
defining, or determinant list of Anglo-American plants used by households, it
neatly serves as a bridge between the two sides of the Atlantic, prefaced by
English, and appended by Colonial, receipts. Of those old world botanicals
listed as best suited to addressing the medical needs of the Colonialists in
transit and on arrival in the new world, there is a relatively equal split of
indigenous English plants and ‘exotics’ (from both the far east and the near

\textsuperscript{337} John Josselyn, provisions list from \textit{An Account of Two Voyages to New-England}, 2\textsuperscript{nd} edition,
London, 1675
east. Josselyn’s list, including rose, clove-gilliflower, wormwood, green-ginger, nutmeg, mace, cinnamon, pepper, ginger, and lemon, provides a starting point for ‘old world’ plants with a clear provenance for medical usage in the new world. Indeed, the majority of domestic remedies from both sides of the Atlantic are built around, or at least include, herbs listed by Josselyn in various combinations. All of the botanicals found in ‘Josselyn’s list’ exist in the earlier English domestic receipt books, suggesting that this, and other advisory lists of medical plants, reflected the pre-existing domestic culture. In promoting their use to settlers, moreover, these lists further established the culture as a broad, trans-Atlantic entity.

The botanicals found in ‘Josselyn’s list’ are found in household receipt examples across the whole of the culture, from examples of complex English polypharmacy remedies through Colonial ‘simples’, speaking to continuity of the domestic *materia medica*. For example, Lady Grace Mildmay’s late-sixteenth-century and the mid-eighteenth-century Heppington manuscripts both contain multiple examples of polypharmacy remedies which include virtually all of Josselyn’s botanicals. In the first instance, Mildmay’s receipt for a ‘cordial water’ combined soft, northern European herbaceous plants: sage, balm (*Melissa officinalis*), rosemary, marjoram, mint, pennyroyal, calamint, elderflowers, and red rose with ‘exotic’ hard spices such as cloves, nutmeg, white and black peppers, cardamom, cinnamon, mastic, and olibanum. A very similar combination may be seen in a polypharmacy ‘wound drink’ taken from the Heppington work which called for the householder to

Gather these herbs following in ye month of may & Dry them in a close roome free from aire & turn them once a Day till they be
Dry yn mingle them altogether & put them into a canvas bag &
they will keep all ye year you must get your buds in april ye
names are as follows

<table>
<thead>
<tr>
<th>Prunells</th>
<th>sothern wood</th>
<th>strawberry leaves</th>
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<tr>
<td>Wood betony</td>
<td>dasy roots &amp; Leaves</td>
<td>sanatle</td>
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<tr>
<td>Egrymony</td>
<td>mints</td>
<td>herby grasse</td>
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<tr>
<td>Golden rood</td>
<td>wild angelica bugle</td>
<td>hawthorn buds</td>
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<tr>
<td>Ribworth</td>
<td>dragons</td>
<td>Seife hele</td>
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<td>Oakbuds</td>
<td>hunny suckle sabius</td>
<td>planitne</td>
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<tr>
<td>san rafine</td>
<td>wormwood</td>
<td>lungwort</td>
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<td>Sinkfield</td>
<td>mints</td>
<td>violet flowes</td>
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<tr>
<td>Bramble buds</td>
<td>mugworth</td>
<td>dandelion</td>
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<td>Bramble buds</td>
<td>avens</td>
<td>comfily</td>
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<td>Comfrey</td>
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<td>corehounce</td>
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<tr>
<td>White bottles</td>
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</tbody>
</table>

First take of these herbs 3 handfuls &
put them into a quart of white wine
& a pottle of spring water & boyll it
together till a 3d part of it be wasted yn
strain ye liquer from ye herbs yn put to it
a pint of Hony set it on ye fire.

As was the case with Mildmay’s earlier remedy, the herbaceous portion was
followed by an equally bountiful list of hard spices, and a second, longer
maceration. Clearly English domestic authors across a wide chronological
span were comfortable with the mixed nature and complex preparation
demands necessitated by combining varied botanical materials in these
remedies. Thus the eighteenth-century Heppington receipt mirrors the inherited
list of plants seen in Mildmay’s sixteenth-century work, with a high degree of
knowledge and skill underlying their preparation production on the part of the
author seen in each, and each containing several plants listed in the interim
writings of Josselyn.

338 NRO.ms.W/A misc.vols. 33, ff.25-7, Lady Mildmay’s medical papers.  
339 WL.ms.7997, Vol.1, unfoliated, Heppington Receipts, p.54-55. Prunells may refer to any
member of the Prunus family (including plums and cherries); sanatle possibly = Sanicula
europaea L, also known as sanicle; san rafine = ? uncertain; white bottle could be white bottle
brush, Callistemon shiress, though this plant is indigenous to Australia, and its inclusion in a
domestic colonial American source mid-eighteenth-century is unlikely as it was only introduced
in England by Joseph Bankes in 1789, slightly more plausible is Lagenaria siceraria, the bottle
gourd, or white-flowered gourd, a plant originally of African origin which was established in
European plant canon in the middle ages (it appeared in Walahfrid Strabo’s Carolingian writings
of the ninth-century), and was established in the Americas prior to European settlement; sabius
= scabius, Scabiosa spp.; corehound= horehound, Marrubium vulgare.
Complex old world combinations may also be seen in otherwise simplified remedies from American sources, demonstrating the shared botanical canon in colonial use. For example, Abigail Adams’ letter dated October 1775 outlined the treatment of what she referred to as both ‘dysentary’ and ‘distemper’, combining the aromatic spices (nutmeg, clove & cinnamon) with purgatives:

I shall write every day if I am able. Pray let me hear from you often. Heaven preserve both your life and health and all my sufferings will be but small. By the first safe conveyance be kind enou to send me 1 oz. of turkey Rhubub, the root, and to procure me 1 quarter lb. of nutmegs for which here I used to give 2.8 Lawful, 1 oz. cloves, a of cinnamon. You may send me only a few of the nutmegs till Bass returns. I should be glad of 1 oz. of Indian root. So much sickness has occasiond a scarcity of Medicine.  

Although the Colonial manuscript receipts tend, on the whole, to be less congested with complex plant combinations, they do reflect the continued willingness to use old world herbs, both ‘hard’ and ‘soft’. Catherine Haines’ modified polypharmaceutical ‘Diet Drink’ from Colonial Philadelphia, for example, contains English ‘Scurvy Grass or Water Cress … Horse Radish roots … Sena … Saffron, Fennel, Aniseed, Angelica [and] Balm’ with the simple instructions to ‘Boil the wood & roots’. While Elizabeth Coates Paschall’s early-eighteenth-century Colonial receipt ‘for the Bite of a [new world] Rattle Snake’ uses the simple old world ‘Juice of Plantain the common sort’, and Margaretta Prentis’s Williamsburg manuscript of 1755 used nutmeg in a remedy

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340 MHS. Adams Family Papers: Letter from Abigail Adams to John Adams, 8 - 10 September 1775. Indian root probably refers to Aralia racemosa, also known as American spikehead or American spikenard.
341 APS.ms.coll.52-ead, series III: W/A, Reuben Haines, Box 87: Folder 2, fol.7v, Catharine Haines, Notebook, 1776.
‘for disordered bowels’. Indeed, early American dependency on English 
botanicals may be seen in receipts ranging from Prentis’s remedy ‘for a Cough’ 
with rosemary, comfrey, hyssop, ground ivy, thyme, elecampane, and inula, to 
Abigail Adams instruction to her husband, suffering from a cold, to ‘take two 
Teaspoon full in any tea drink of Hysop or Sage, or Balm at Bed time’. All of 
these plants have ‘old world’ origins, and the availability of both naturalized 
British plants such as scurvy grass and plantain along with imported old world 
exotics such as nutmeg show an ongoing willingness, indeed, a perceived 
necessity, to embrace the whole of the inherited European canon. ‘Josselyn’s 
list’ of botanicals clearly represents part of that shared ‘old world’ *materia 
medica* which formed the basis of a combined Atlantic botanical culture.

Further examples of botanical remedies containing only one or two of 
Josselyn’s recommended staples are equally common. For example, of all of 
the herbs in Josselyn’s list, only rose occurs in Mary Doggett’s early-
seventeenth-century English manuscript recipe for infectious diseases with skin 
eruptions (she specifies measles and smallpox) though a further thirty two 
botanicals *not* included are specified:

A surfitt water good for Measells small Pox or other Infections/ … Take Sallendine Sage Rosemary Rue wormwood Mugwort 
Pepmernell Dragon Scabies Agrimony Balme Scordium Centry, 
Cardus, Benedictus Bittony Rose Solis Angelico, Germander, 
Burnett, Vervine Liverwort, Hartstongue, Spearmint, Mary golds 
flowers, Sweet margarem, mother of time of each a good 
handful/ Angelico rootes, jentian, Tormentill roots Ledoary, 
Liquorish of each half an ounch. Slice y\(^{th}\) roots and wash y\(^{th}\) 
herbs and Shake and dry y\(^{m}\) in a cloth shred them into a Gallon

342 CP.ms.168289.Class 20e.No.352, fol.8, Elizabeth Coates Paschall’ Receipt Book, 1702-
1753; UP.ms.5034-4, unfoliated, Margareta Prentis’s Cookery & Medical Recipes, 
Williamsburg: 1780s, p.15.
343 UP.ms.5034-3, unfoliated, Margareta Prentis, p.8; MHS,mss.080473, *Adams Family Papers*, 
Letter from Abigail Adams to John Adams, 20 October 1799.
of white wine or Sack let y^n lye in y^n wine 3 days & nights & more and then Stire y^n. then Still y^n in an Ordinary still.344

The domestic materia medica was an extraordinarily rich one, and a much wider range of plants may be found in common use in both Early Modern England and Colonial America than is indicated in Josselyn’s simple list. For example, celandine, comfrey, elecampane, rue, rosemary, marigold, plantain, licorice, and wormwood are all commonly seen across the sources, as are coriander, nutmeg, clove, ginger, camphor, and frankincense. On the whole, however, Josselyln’s list is useful in not only demonstrating that old world botanicals were considered necessary provisions for successful new world navigation, but also in showing that they needed to be represented by a varied range, including herbs (wormwood), flowers (rose and clove-gilliflower), fruit (lemon), and hard spices (nutmeg, mace, cinnamon). Moreover, the inherited old world body of plants informing Josselyln’s list constituted the backbone of the shared domestic practice: it is this specific materia medica which was in use on both sides of the Atlantic, and across the whole of the domestic culture’s span.

Of Opium and Poppies, Papaver spp.

Roy Porter wrote of Early Modern herbal treatments that only two, Peruvian bark (which is considered in Chapter Six), and the opium poppy were effective agents.345 Examination of the use of Papaver spp within the domestic culture establishes that the plant was regularly used, both widely and effectively, and further, speaks to specific aspects of the culture’s complexities.

344 BL.Add.ms.27466, fol.8, Mary Doggett, Her Booke of Receipts, 1604.
and detail. Poppy was used within both Early Modern English and Colonial American households across the whole of the time period under examination here. Poppy ‘water’ recipes, for example, are found in the majority of receipt books, including the English sources authored by Mary Dogget (1604), Jane Dawson (written c.1650-1699), Elizabeth Hirst (1684-c.1725), and Mary Faussett’s receipts in the Heppington receipt book from eighteenth- and early–nineteenth-century England, as well as in Colonial writings such as Margaretta Prentis’ or Martha Washington’s Virginian manuscripts of the 1780s.\textsuperscript{346} Further, domestic authors employed poppies in a wide range of products, including pills, cakes, rolls, and a range of liquid preparations, all aimed at a wealth of ailments.\textsuperscript{347} The most common of these, however, were poppy waters (the chief of which was laudanum), and syrups.

While the modern reader may well differentiate between poppy species, for example, Roy Porter specifically talks of ‘opium poppy’ as a medical agent, this distinction was not always important to the Early Modern and Colonial imagination or understanding.\textsuperscript{348} Both ‘learned’ and domestic authors were capable, and often did, differentiate between species, but their practice allowed for a nuanced employment of various poppies. Equally, the means by which they distinguished types of Papaver differ from current practice. In his

\textsuperscript{346} WL.ms.7999, Vol.3, unfoliated, Heppington Receipts; UP.ms.5034, vol.3, fols.14,32, Margaretta Prentis’ Cookery & Medical Recipes, Williamsburg, 1780s; BL.ms.27466, fol.2, Mary Dogget’s Receipt Book, 1604; FSL.ms.L:B14, Jane Dawson’s cookery book; WL.ms.2840, fol.31r, Mrs Elizabeth Hirst (& others), Household Book, 1684; NRO.ms. V.33, fol.66, Lady Grace Mildmay, Medical Papers; BL.Add.ms.27466, Mary Doggett, Her Booke of Receipts, 1604; HSP.ms. (Phi)Am.530.3.a, Washington Family Papers, Martha Washington, Her Booke of Sweetmeats.

\textsuperscript{347} The Moravian Community of North Carolina, for example, typically kept and utilized opiate resin which had been ‘worked and pounded on a board with a little water, and then … shaped into cakes or rolls for sale’. Adelaide L. Fries, ed. Records of the Moravians in North Carolina. Vols.1-6, Raleigh: North Carolina Division of Archives and History, 1970.

Herbal of 1525, Richard Banckes differentiated between species of poppy, also noting variability in their action:

Papaver This is called poppy. It is cold and dry. There is two manners of them. The white poppy is cold and moist, and it is good to cause one to sleep. The seed thereof well gathered may be kept ten year. It hath virtue of cleansing. It is put in medicines with a determination as [whether] the seed may be received from white poppy or black. For to provoke a sleep, make a plaster of each of them or one of them with woman’s milk and the white of an egg and lay it to the temples. The women of Salerno gave to young children the poppy, but they would give them no black poppy, for it made them too much heavy [sluggish]. Also, for a hot apostume in the beginning, and for chafing of the liver, take the seed of white poppy, or else the herb of it, and stamp it and meddle it with oil of roses and plaster it to the grievance. Also, for dryness in fever hectic and in other fevers, take and heat oil of violet meddled with powder of poppy seed, and anoint the small of the back therewith.\(^{349}\)

Both the ‘white poppy’ and the ‘black poppy’ referred to here belong to the Papaver somniferum, or opium poppy, family (\textit{var. album} is the white, and \textit{var. nigrum} the black). As indicated by its species name, \textit{somniferum}, the opium poppy is indeed good to ‘provoke a sleep’. This is mainly due to the alkaloid content, particularly morphine, though narcotine also has narcotic properties. Codeine is both a powerful analgesic, and a smooth muscle relaxant (hence its use as, for example, an effective cough suppressant). It is interesting that Banckes differentiated between the two, particularly in his posology, or prescribing etiquette, for children. And this differentiation based on colour is not unique to him. J.B.’s earlier \textit{An English Expositor} of 1621 has no entry for either ‘poppy’ or ‘laudanum’, but defines ‘opium’ as:

\begin{quote}
The juice of black Poppie, sold dry by Apothecaries. It is sometime used in Physicke to make one sleepe, or to asswage excessiue paine; but then it must bee mixed with other things
\end{quote}

\(^{349}\) Richard Banckes, \textit{HERE BEGINNETH A NEW MATTER WHICH SHOWETH & TREATETH OF THE VIRTUES AND PROPERTIES OF HERBS WHICH IS CALLED An Herbal}. London, 1525. Banckes’ was the earliest printed herbal in the English language, Gerard’s \textit{Herbal} appearing in 1597, and Culpeper’s in 1653.
discretion; for taken alone it will cast one into a deadly sleepe; beeing cold and dry in the fourth degree.\textsuperscript{350}

Similarly, both ‘black’ and ‘white’ poppies are specified in the Heppington manuscript receipt for ‘Surup of diacodium’, written in England of the late eighteenth and early ninetieth centuries.\textsuperscript{351}

Anne Glydd’s seventeenth-century ‘medcin for a cough’ on the other hand, employs ‘diacodium’ without specifying the type of poppy used, suggesting either an assumption of competency and familiarity on the part of the reader such that Glydd felt it unnecessary to set out the exact poppy to be used, or that she was not aware of, or did not personally recognize, a substantial difference between species:

\begin{quote}
Take an ounce of conserve of roses and a spoonful of or ½ ounce surup of diacodium mixed with the conserve and let the party take it goeing to bed approve diascordium likewise is very good to mix with conserve of roses and I have found good efect of it.\textsuperscript{352}
\end{quote}

Lady Grace Mildmay’s earlier use of poppy specifies the type of plant to use, but clearly conflates the actions of the opium poppy with that of the English garden variety in her cordial electuary designed to ‘comfort the brain’ of a ‘sucking child’ which contained ‘syrup of red field poppy and cowslips couched within a ‘conserve of black pear plums, of each a spoonful’.\textsuperscript{353} The inclusion of plums is of particular interest in this remedy as plums, particularly when prepared according to Mildmay’s instructions, act as a reasonably strong laxative, counteracting the opiate’s constipating effects. While the opiates

\textsuperscript{350} B., J., Doctor of Physicke. AN ENGLISH EXPOSITOR: TEACHING THE INTERpretation of the hardest words vsed in our Language. WITH SVNDRY EXPLICATIONS, Descriptions, and Discourses, LONDON Printed by IOHN LEGATT, (London: 1621).
\textsuperscript{351} WL.ms.7999, Vol.3, unfoliated, Heppington Receipts.
\textsuperscript{352} BL.ms.45196, fol.52r, Anne Glydd’s receipt book,1656.
\textsuperscript{353} ‘Pear plums’ probably refers to a variety of damsons, or \textit{Prunus domestica ssp}. 
found in *Papaver somniferens* slow intestinal movement, the red field poppy, or *Papaver rhoeas*, contains no opiates, and has a mildly soothing, rather than mortifying, action on the gut, therefore the inclusion of plums which would have served to help to keep the child’s bowels open in a laudanum receipt, is here superfluous. Including a plum conserve in the administration of laudanum to children would be sensible, and a reasonable botanical prescriptive, it makes less sense in a remedy based on the much milder field poppies, but it is through this retention of plums that we read aspects of the original, older, common recipe within the household practice. Mildmay also suggests that nurse and child be ministered ‘5 spoonfuls of betony water and 5 of cowslips and 1 syrup of poppy and 1 of the essence of the balm’. The addition of these further botanicals to the poppy preparation would have served to enhance the action of the weaker field poppy: Cowslip (*Primula veris*), betony (*Pedicularis spp.*) and balm (*Melissa officinalis*), all have mildly sedative properties capable of ‘comforting the brain’.\(^{354}\) In Mildmay’s use of poppy we see adaptation of an original, common, recipe with vestiges of the original still extant, where the addition of new material which compensated for any loss of potency attained by replacing the expensive exotic opium poppy with the common garden variety. Mildmay is here differentiating between poppy species in her practice, if not in her apprehension and writing.

\(^{354}\) NRO.ms. W/A misc.vol.32-33, 35. Lady Grace Mildmay, *Medical Papers*, vol.32, fols.15v – 16r, ‘Another approved course by Mr Waters upon a sucking child’ as cited in Pollock’s *With Faith in Physick*, pp 115. The traditional use of cowslip, betony, and balm as ‘nervines’ (botanicals which act as ‘restoratives’ specific to the nervous system) is found throughout Europe, and within both classical and medieval texts. Further, Thomas Bartram (*Encyclopaedia of Herbal Medicine*, 1998) notes the medieval use of balm (Melissa officinalis) for ‘giving heart’.
Examples of poppy-based botanicals may be found across the geographical and chronological, as well as professional and domestic, Early Modern and Colonial divides.\textsuperscript{355} For example, Mary Glover’s English \textit{receipt book} of 1688 contains three recipes for a ‘Surfit Water’ containing poppy in one form or another. In one she instructs the householder to ‘take of Goat’s Rue 2 handfulls ½ of water germander 2 handfulls of Red Poppy leaves a handfully & ½ of Angelico root. 3 o… for 6 quarts of brandy’, a second demands ‘corn poppy clean pick’d’ for her ‘Red Surfet Water’, while the third calls for ‘half a pint of red poppie water’ as the base on which to build a more complex mixture.\textsuperscript{356} The recipe for poppy water itself comes later in the manuscript, and consists of a number of hard spices and herbaceous plants, including poppy, steeped in a menstruum of \textit{aqua vita}, Damask rose water, and sugar candy.\textsuperscript{357} Likewise, Martha Washington’s \textit{Booke of Sweetmeats} contains a receipt for a ‘surfeit water of poppies’ based on field poppies (she specifies those ‘that grow in wheat’), with the petals ‘pickt very well from ye blacks & seeds’ bottled in ‘aquavity or brandy’ – to which is added nutmegs, raysons [sic], and later ‘sliced licorish & a few bruised any seeds’.\textsuperscript{358} Alongside the poppy ‘waters’ containing a variety of \textit{Papaver species}, colonial domestic practitioners are preparing and administering a range of medicaments, from Harriott Pinckney Horry’s 1770

\textsuperscript{355} The term ‘waters’ typically relates to a liquid based menstruum where alcohol acts as both solvent and as the preservative; hence brandy, ale, or wine all commonly appear in receipts.

\textsuperscript{356} BL.ms.57944, fols.12, 32, 59, Mary Glover, \textit{Her Receipt Book}, 1688.

\textsuperscript{357} IBID, fols.10r,108. Interestingly, Glover uses Black Cherry as an almost direct substitute for poppies in recipes relating to ‘female complaints’, including ‘An Hysterical Julip’, pdf.63, and ‘A water for the fitts of the Mother’, fol.110, which speaks to her appreciation of the smooth muscle relaxant properties of each.

\textsuperscript{358} Karen Hess, \textit{Martha Washington’s Booke of Cookery and Booke of Sweetmeats}, pp.S287, 416-17. Surfeit waters are carminative in action. This particular recipe’s addition of liquorice & aniseed would have supplemented the smooth muscle relaxant effects of the poppy.
Domestic authors recommended poppy-based medicines for griping, coughs, insomnia, and pain, in each instance with detailed instructions for dosage and administration. Despite the high degree of flexibility and adaptation in domestic prescribing of poppy, regularity and continuity of practice may also be seen. Secondary to its use as an analgesic, laudanum (and indeed poppy-based botanicals more generally), was commonly employed to pacify infants, either as anti-colic agents, or as soporifics. Indeed, Mildmay’s remedy advocating the administration of poppy specifically to suckling infants was reflective of commonplace practice in this respect. Constance Hall’s English receipt of 1672 “to cause Sleepe in a weake Person’ instructed the reader to ‘take white Popsy seeds And sow them in to litell bags either tifaney or lanel and put them in a litell aniseed water and at night a plye them to each tempell … warm it before you A ploy it to the place’. Meanwhile, F.Head Egerton, also writing in seventeenth-century England, recommended the use of laudanum both for his post-parturient wife, and for their infants’ sleep:

To Ease pain, & cause sleep, p[re]scribed to my wife, when she lay in Cowslip flowers an handfull, of anise-seeds & juniper berries a little bruised & licourish of each 20. graynes (or 30.) boyle these in Milke (in 6.ounces of milke) with small beere make it a posset, strayne it, take 3 ounces & an half of it, and colour it a little with a grayne or two of dried Saffron, adding thereunto half an ounce or 5. drachmes of the syrrup of white poppie.

and again,

359 SCHS.ms.43/2178, Eliza Lucas Pinckney’s Household Book, 1756, (on deposit by the Colonial Dames of America); SCHS. Collections, Harriott Pinckney Horry, Receipt Book (1770).
360 FSL., ms.V.a.20, fol.19r, Constance Hall’s receipt book, 1672.
For a Griping in a child, & to cause sleep Take one spoonfull of Garden Poppie syruup, add 3. spoonfulls of Spare-Mint [spearmint] water stilled in a Cold Still, mingle them well, & sweeten it well with Sugar. Give it a spoonfull ever[y] night, the last thing he eats.  

Similarly, Margareta Prentis’ receipt ‘For the Cholic’ written in Williamsburg of the 1780s assures us that ‘Fifteen or Twenty drops of Laudanum in a cup of wine and water … generally gives immediate Ease’, and Catherine Haines’ (also Colonial) receipt for ‘Deborah Morris’s Cholick Drops’ includes substantial amounts of ‘Liquid Lodanum’ with the advice the ‘If the Cholick Continues Violent it may be reapeated every hour til Easy –’. This use of opiates for griping, or colic, (intestinal pain caused by spasm of intestinal smooth muscle), is entirely rational given the action of codeine in relaxing smooth muscle, and morphine’s ability to dull any accompanying pain. Not only do we see the domestic culture engaging in an effective practice by using Papaver for ‘ease’, but we see a level of sophistication and differentiation here also which is important. In each instance, the author is specifying the use of the opiate medicine in a manner entirely commiserate with its physiological action and patient need.

The use of poppy as a smooth muscle relaxant, rather than simply as an anodyne, occurred on both sides of the Atlantic across the period. Echoing

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361 WL.ms.1071, 9 and ms.1071, 62, Cited in Katherine Knight’s ‘A Precious Medicine: Tradition and Magic in Some Seventeenth-Century Household Remedies’ Folklore, Vol. 113, No. 2 (Oct., 2002), p.242 who writes that the manuscript was probably ‘started some time after 1648’ p. 238. It is in looking back at the analgesic qualities of Papaver spp. however, that the recommendation of poppy for postpartum uterine pain and fever would have been beneficial. In this instance its use might suggest the presence of puerperal infection, a common cause of death in women during the early modern period. And while the opiates would not in any way help to clear the infection, they would have lessened the pain and suffering associated with it.

362 UP.ms.5034-3, fol.35, Margareta Prentis’ Cookery & Medical Recipes (Williamsburg: 1780s); APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, fol.6r, Catharine Haines’ notebook, 1776.
Eliza Pinckney’s opiate containing ‘dough drops’ from mid-eighteenth-century Carolina, Prentis’ receipt book contains a recipe ‘For a cough’ using opium poppy as a base remedy, which recommends rolling out ‘4 Grs Opium’ with ‘1Gr. Tartar Emetic’ into eight pills, one to be taken ‘every night going to bed’. She also uses laudanum as a single ingredient in a polypharmacy ‘For disordered Bowels’ along with nutmeg and ipecacuanna with the instruction to ‘make it into as many or as few pills as you please and take it at night going to Bed’, and to be ‘continued for a week or ten days’, with the laudanum omitted in the morning dosage. As a remedial agent this recipe is particularly clever in its diurnal differentiation: the addition of laudanum at night would not only serve to ensure sleep, but also counteract the more violent action of the ipecac in stimulating peristalsis, or griping, of the gut (in light of the opiate action in slowing smooth muscle contraction, causing constipation). Elsewhere Prentis writes comfortingly that the use of ‘a grain of opium or thirty five drops of laudanum … never fails to relieve’. Likewise, Harriott Pinckney Horry includes laudanum in her Carolina receipt for ‘Adam’s Solvent for Stone & Gravel’. While this remedy, as given, would have had little effect in dissolving mineral deposits, the ability of the opiates to relax smooth muscle may well have had an impact on ureter contraction so that, along with easing the pain of passing stones, their actual passage may have been facilitated – a relaxed tube can expand to accommodate the passing of stones more easily than a tight, restricted one.

In both cases, the relaxing of smooth muscle in the first instance would have

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363 UV. ms.5035.2, fol.15, Margaretta Prentis’ *Williamsburg Cookery and Medical Recipes*, 1780s. Prentis’ manuscript includes a third opium-based receipt ‘For the Cholic’ with ‘Fifteen or Twenty drops of Laudanum’ added to a cup of wine and water’, 5035.1, fol.20v.

364 IBID fol.35.

365 SCHS.ms.1086.03.02, Harriott Pinckney Horry’s household book, 1770.
brought relief from pain, a relief which was then further augmented by the analgesic actions of the opiates.

Indeed, this ability of opiates to ‘relieve’ the sufferer is noted in a number of sources. They are particularly popular when employed as stomachics, or carminatives, particularly in surfeit waters. Hartman’s vernacular recipe specifies that his cordial

be take after Phisick to comfort and settle the stomach. And to cause rest and sleep’, as well as in ‘another Excellent Cordial to cause Rest and Sleep in a Fever, or when one is oppressed with pain, as also in a Surfeit, or after Phisick.366

In her English household receipt book of 1682, Rose Kendall also uses poppy in a ‘Surfeit Water’, and Mary Dogget’s receipt of 1604 recommends a ‘simple watr of poppys yt grows in Corne’ for ‘ym yt can’t disgest their meat one Spoonfulle or 2’, both remedies predating Margareta Prentis’ Colonial use of laudanum ‘for disordered bowels’.367 This last is a very similar receipt to that of Harriott Pinckney Horry in her Household Book which likewise uses laudanum ‘For the Flux’. There is no doubt that when used in quantity, opiate based medicines as a whole would have stayed bowel evacuation, both preventing excessive loss of body fluids, and easing intestinal cramps.368

Just as domestic practitioners were primarily prescribing poppy-based medicines to ease pain and aide sleep, with individual practices aimed at relieving intestinal or respiratory distress, the majority of domestic preparations

367 FSL.ms.V.a.429 fol.93r, Rose Kendell et al, cookery and medical receipt book. One of the front pages is marked ‘Rose Kendell & Ann Cater there Book’, 1682, while two pages on is written ‘Anna-Maria Wentworth, Her Book, 1725’; BL., ms.A27466, fol.3v, Mary Doggett, Her Booke of Receipts, 1604.
368 SCHS.1086.03.02, Harriot Pinckney Horry, Household Book, 1770.
were straightforward macerates, even though there are several individual instances of syrups, lozenges, or cordials. In a typical macerate, the plant material was placed in a liquid and simply either steeped, boiled, or distilled, typically in alcohol. For example, the English manuscript of Elizabeth Hirst contains an ‘Excellent Poppy Water’ which is a relatively simple distillate, with the poppies steeped in a ‘strong alle’.369 This is virtually identical to a remedy found in Mary and Anne Granville Dewes’s receipt book, written in seventeenth-century England, while Mary Dogget’s beautifully scripted work includes three separate recipes for poppy water, in varying complexity, two of them using aqua vitae as the solvent, and the third calling for the householder to ‘Distill Poppys as you do Raisons, and let it drop on white Sugar candy and Some dates and Nuttmeggs … and so Boyle it up for your use’ suggesting a slightly more complex, combined alcohol and sugar product prepared in two separate stages.370 Typically, the American recipes tend to follow the simpler, more common, alcohol menstruum extract, echoing growing differentiation in menstruums considered in Chapter Four. Eliza Lucas Pickney’s cough remedy, for example, calls for the infusion of ‘these Ingredients in a quart of double rectified Spirit of Wine by the fire for ten or twelve days shaking ye Bottle twice a day’, and Harriet Horry’s laudanum receipt is a fairly straightforward tincture of opium poppy on its own, using water and a mixture of ‘Brandy and Madeira Wine’ as the base menstruum.371 For the majority of these authors, the adoption of the simplest effective remedial preparation possible speaks to both their

369 WL.ms.2840, Mrs. Elizabeth Hirst, (& others), Household Book, 1684-c.1725.
370 UPRB.ms.5034(1-4), Margaretta Prentis’s Cookery & Medical Recipes, Williamsburg: 1780s; FSL.ms.V.a.430, fol8, Mary Granville, and Anne Granville Dewes’s Receipt Book, 1740; BL.Add.ms.27466, fol.3, Mary Doggett, Her Booke of Receipts, 1604.
371 SCHS.ms.43/2178, Eliza Lucas Pinckney’s Household Book, 1756; SCHS.ms.1086.03.02, Harriott Horry Pinckney’s Receipt Book, 1770.
agency and its practical nature. That American authors seem to be even more
drawn to this ‘simplification’ of remedies and remedy production may be seen to
reflect resource considerations (both in terms of access to resources, and in
terms of their cost) as well as a growing self-reliance as the culture moves into
the eighteenth-century. The possible socio-political implications for this are
considered briefly in Chapter Six, and again in the conclusion.

An earlier, more complex, English example, however, may be found
Elizabeth Freke’s early-eighteenth-century manuscript. While her receipt book
does contain a receipt for a simple water, ‘I quartt of popy water, cold still’, it
also gives instructions to make ‘The Lady Powells’ Laudanum’, sent via her
sister, Judith Austen:

To make lodynum. The Lady Powells receitt sent me by my
deer sister Austen in my distress; of which she has taken of itt
neer two years her selfe. September 20. Sent i7i2. For the
collicke, &c.372

This second of Freke’s poppy based recipes is similar to one found in the
English Heppington manuscripts, also written in the late-eighteenth- century,
with both examples including the ‘blader pricked full of thin holles’ detail:

Take two ounces of the best opium and one ounce of fine
saffron. Cutt the opium very thinn and small, and pull the
saffron into small peices; then infuse them in a quarte of the
best sack in a deep earthen pott covered with a blader pricked
full of pin holles.373

It would seem that this particular, more demanding (at least in production terms)
version of laudanum was in circulation within some social circles in England
during the eighteenth-century.

372 BL.Add.ms.45718, fol.129, Elizabeth Freke, miscellany, September 1684 - February 1714.
This recipe is also discussed in chapter two.
373 WL.ms.7999, Vol.3, Heppington receipts.
While the authors clearly differentiate between ‘waters’ and laudanum by title, however, there is often little difference between the two in terms of ingredients, preparation, or delivery. Thus Freke’s demanding laudanum from the early-eighteenth-century England is similar in content to Harriot Horry’s simple Colonial ‘laudanum’ receipt of the mid-eighteenth-century. Both are based on simples, containing either poppy alone or with a single other ingredient (Freke also includes saffron). It is likely that using the term ‘laudanum’ is, for these authors, similar to the citing of elite sources for their receipts: the remedy itself may differ very little from pre-existing use, but its name confers authority. By using the *medical* term, the domestic poppy water becomes a recognized, and recognizable, medicinal agent. That the preparation may be said to exist as part of the domestic canon despite the appropriation of the medical lexicon is reflected in exactly that willingness on the part of householders to adapt it to their own needs and preferences. Authors within the domestic culture employed agents that they perceived to be effective; they then associated these products with known, popular medicaments as a means of communicating this effectiveness to others. Rather than borrowing a practice from the learned culture, the domestic culture is employing its own, distinct practice, but borrowing the terminology (and authority) of the dominant, learned culture.

Across these recipes however, and regardless of the complexity of preparation embraced by practitioners, there are common, and popular, preparations and uses of poppy, as seen, for example, in the number, and use, of poppy waters; equally there is a willingness on the part of many authors to
adapt these poppy mixtures particularly in the addition of alcohol or sugar. Next to waters, syrups were the most commonly produced form of poppy medicine, with examples ranging from Mildmay’s late-sixteenth-century ‘syrup of poppy’ through to Mrs Johnston’s 1700 ‘Syrup of red poppies’ and Mary Faussett’s later (eighteenth- and nineteenth-century) ‘Surup of dicordiam’ receipt. On the whole, syrups were used for the same ailments as waters, particularly in the treatment of pain, colic, and sleeplessness. Syrups were, moreover, thought to be particularly suitable for infants and children. It is possible that the high sugar content (and subsequent palatability) meant that they were more easily administered, and hence became more specifically prescribed. Equally, there are instances where the alcohol-based ‘water’ is mingled with sugar to produce a secondary syrup, as in the case of Elizabeth Freke’s ‘poppy water’ and Elizabeth Digby’s use of poppy water as a remedy for ‘Griping in a child’. 

Diversity in household adaptation of the broader domestic practice may be seen in the relatively wide gulf between the detailed and specific Freke-Heppington preparation instructions and Katherine Davies’ simple early-seventeenth-century instructions ‘To Make Liquid laudanum’. Davies instructs the householder to:

Take 2 ounces of opium an ounce of safforn a dram of cloves and a dram of made slice and pick out yᵉ droos of ye opium and pull ye safforn to thin flakes pound ye spices small put yᵉ into an earthen pan …

Given the nature of the ingredients and the desired outcome, the increased complexity of the Freke/Heppington recipe with its ‘blader pricked’ coverings

374 FSL.ms.W.a.311, unfoliated, Mrs Johnston’s receipt book; WL.ms.7999, Vol.3, Heppington receipts.
375 BL.Eg.ms.G2197, Elizabeth Digby, receipts of Elizabeth Digby, 1650.
376 BL.Eg.ms.2214, fol.19v, Katherine Davies’ receipt book, 1638.
and extended infusion seems unwarranted. Covering a liquid preparation as it is heated serves to increase the internal temperature of the mixture, which is desirable in breaking down particularly dense or fibrous material, or in helping retain steam-borne water soluble particles (such as volatile oils). The Freke-Heppington receipt, however, contains neither of these. The poppy material is not overly robust and therefore requiring the extreme heat, nor does either it or the saffron contain crucial components which would be theoretically salvaged by the use of a cover. It seems likely that this later version of the recipe was more the result of current fashionable exchange than of anecdotal efficacy. This hypothesis would seem to be supported in the lack of this detail in either Colonial manuscripts, or in the majority of English receipt books. Indeed, the vast majority of recipes are simple in terms of ingredients, preparation, and administration.

Worry over dosage, and indeed, use, of opiates, rarely made its way into the domestic sources. While concern was being voiced within wider Early Modern and Colonial society, household prescribing seems to take little notice. For example, William Douglas, writing in late-eighteenth-century in Pennsylvania, warns against the excessive administration of opiates in smallpox cases, noting that ‘I have found some bad consequences from the liberal use of Opiates in the small Pox, which I may hereafter communicate more at large’.\(^377\)

Yet at virtually the same time, Prentis is recommending her opiate-based pills ‘for a cough’ be taken ‘every night going to bed’ with no caveat whatsoever.\(^378\)


Despite the medical profession’s growing anxiety concerning the use of opiates, poppy based products, including those of the opium poppy, continued to be included in domestic sources across the period. Moreover, the willingness of householders to use these botanicals changed very little across the times and places covered by the thesis. The domestic employment of various poppy species in recipes remained highly variable, however, as did authors’ willingness to produce a wide range of preparations, and apply these to a range of ailments.

Of Flowers

Flowers, more than any other botanical considered by the thesis, are commonly associated with Early Modern England, a popularity which is widely reflected in the wealth of domestic receipts, both culinary and medicinal. Moreover, this Anglo-American cultural affinity for flowers, seen in their regular appearance in popular literature and social discourse as well as in medical remedies, translated from the imaginative into practical employment within the home. Indeed, this practical application saw florals used equally in the making of pastries and in complex household unguents. Moreover, this perception of flowers as both medicinal and culinary agents may be seen in English and Colonial domestic sources alike, infusing our awareness of a common British materia medica with a broader underlying cultural inheritance affecting kitchen as well as still room.
Flowers were used as edibles, including as edible medicines, in domestic sources. For example, Anne Goodenough’s eighteenth-century English manuscript contains a recipe ‘to Candy Violetts or any other flowers and keepe them that they will looke as fresh as when they are first gathared’ while Martha Washington’s contemporary Colonial book has one ‘To Preserve Rose Buds and Gilleflowers’. Jane Mosley’s seventeenth-century Derbyshire ‘flower salad’ illustrates the Anglo-American affinity for, and use of, flowers:

A sallet of rose buds and clove gilly floweres
Picke rose buds, and put them into a earthen pipkin, with white wine vinegar and sugar: so may you use cowslips, violets, or rose-mary flowers.

Indeed, Mosley had a particular affinity for flowers and flower salads, including recipes for ‘A sallet of mallowes’ and one ‘To do clove Gilliflowers up for salleting all the year’. Her recipe for ‘rose buds and clove gilly flowereres’, in particular, is interesting for its format as much as in its content and intended use. While many of her receipts are written in an open hand, filling the page of her manuscript from margin to margin, the physical layout of this recipe lends it a phrasing reminiscent of lyric floral poetry. Mosley is here writing a poem as much as she is a recipe: she values these flowers as foods, but equally her poetic presentation of the recipe suggests that she values them equally for their delicate flavour, their fragility, and their intrinsic beauty. Moreover, each flower listed in this recipe was regularly employed across Anglo-American domestic sources as a medicinal agent: rose as a stomachic, clove gillyflowers and violets for skin conditions, cowslips to promote sleep, and rosemary flowers as

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379 FSL.ms.W.a.332, fol.22, Anne Goodenough’ receipt book; HSP.(Phi)Am.530.3.a., Washington Family Papers, Martha Washington, Booke of cookery and booke of sweetmeats, 1749-1799.
381 IBID.
a stimulant. This conflation of the culinary and medicinal, which has been considered elsewhere, is particularly apparent in the use of floral botanicals. Further, mixed perception of culinary and medical use may be seen in preparations using single flowers, such as Hannah Huthwaite's eighteenth-century Colonial remedy ‘For the Cholick’, which calls for the householder to ‘Take the Common Mallow and Boil in Milk’, as well as in multi-flower combinations such Mary Hooke’s English receipt of 1680 for an edible ‘Pastt of Marygolds' including also 'your past of violet or cowslips, or any other flower, excelentt against melancholy’.382

A strong domestic continuity of practice may be seen in violet syrup recipes taken from receipts across the sources. For example, instances occur in the seventeenth-century English manuscripts of Jane Dawson, Mary Doggett, Margaret Baker, and Grace Blome Randolph, as well as the Granvilles’ eighteenth-century book.383 These are further echoed in the two recipes included in Susanna Pack’s late-seventeenth-century manuscript: ‘Syrop of Vilots’ and ‘Syrrup of Viollets or Gilliflowers’, Anne Glydd’s work of the same period, Ann Goodenough’s eighteenth-century receipt ‘To make Sirip of Violetts’, and a similar version in Katherine Davies’ undated work.384 Variations on a theme include Anne Brockman’s receipt for ‘An Violett water frood for the Eyes’ with instructions to ‘Take a handfull of violett leaves, a handfull of Daisy

382 FSL.ms.A.931, pdf.34.b, Mary Hookes’ receipt book, 1680; Win.doc.193, fol.67, Hannah Huthwaite’s recipe book, c.1720.
384 FSL.ms. V.a.215, fol.61., Susanna Packe, Her Book (of Receipts), 1674; BL.ms.A45196, fol.23, Anne Glydd’s receipt book, 1656-1700; FSL.ms.W.a.332, fol.40, Anne Goodenough’s receipt boo; BL.Eg.ms.2214, fol.22, Katherine Davies’ Medical and cookery Receipts, n.d.
leaves; Tamp them very small in a wooden dish with a wooden pestell’ before distilling. Violets were used singly, and in combination, primarily as syrups with an unspecified use, though also in waters ‘for the eyes’, and in combination with daisies in a water for skin complaints. Domestic authors employed simple violets, and other flowers, as botanical commodities with a wide cultural tenure which they then distill down to suit their individual household needs. Indeed, flower botanicals exemplify the social ‘archeology’ of a domestic practice that was common across the Atlantic, and recovery of this practice, particularly looking at the skills with which individuals treated sensitive plant material, and the wealth of ways in which they intelligently administered this material, becomes a retrieval of widespread social practices.

Equally, florals provided the base for more complex domestic receipts which reflect the broader domestic culture. Mary Glover’s English receipt book of 1688, for example, contains a number of polypharmacy remedies built on floral material. Her ‘Flower of Oyntment’ remedy, ‘Useful against the stingings or bitings of any venous beast’, contains a number of floral ingredients, while her ‘Plague Water’ recipe contains forty three different botanicals arranged according to ‘type’, including ‘field poppie flower Burrige flower BueGloss flowers Broome flowers Rosemary flowers Mary Gold flowers, [and] Cowslip flowers’. Similarly, Elizabeth Freke’s ‘Clarrett Watter’ is distilled into a rose water base with the further addition of spices including cinnamon, cloves, cardamom and ginger. In each of these recipes, and across both time and

385 BL.Add.ms.45197, fols.35, 64, Anne Brockman, medical receipt book.
386 BL.ms.57944, pp.21-29, 14, Mary Glover, Her Receipt Book, 1688.
387 BL. Add.ms.45718, fols.135, 139, Elizabeth Freke, miscellany, 1684.
geographical space, the florals represent a broader botanical materia medica: here flowers constitute a distillation of domestic botanical agency and authority.

Moreover, along with the ointments and waters, floral botanicals were utilized in syrups, julips, poultices, wines, and simple teas. Examples of these may be seen in Mary Glover’s recipe for ‘Surrop of Gilliflowers’, Ann Goodenough’s recipes for ‘Cowslip Wine’ (she includes three), KW’s simple ‘Lilly Valy’ water, through to Jane Mosley’s receipt ‘To make cammomil oyl’ and Harriot Pinckney Horrey’s similar Colonial use of a camomile poultice ‘for Sprains & Strains’.388 These recipes also give a flavour of the range of flowers employed, to which we may add others, such clove gillyflower. For example, the Colonial manuscripts of Hannah Huthwaite, Margarett Prentis, and Martha Washington all employ clove gillyflowers in remedies.389 In every instance the use of flowers illustrates cultural continuity of the Early Modern English affinity for flowers on both sides of the Atlantic, as well as demonstrating the broader, shared domestic materia medica, and a willingness of individual authors to appropriate and adapt the botanical culture. The flower most passionately associated with Early Modern use however, and most commonly used botanical by both Early Modern English and Colonial American householders, is the rose.

389 Win.Doc.193, Hannah Huthwaitè’s Recipe Book (c.1720); SHC.Coll.00011.1, Alexander and Hillhouse Papers, Dorothea Christina Schmidt, Cookery and Medical Receipt Book (1772); HSP.(Phi)Am.530.3.a., Washington Family Papers, Martha Washington, Booke of cookery and booke of sweetmeats, 1749-1799. Washington had a clear fondness for flower based botanicals, including five recipes for violet syrup and rose apiece (along with similar receipts for clove gilleflowers and cowslips)
Rose, *Rosa spp.* ‘That which we call a rose by any other name would smell as sweet’...  

Early Modern and Colonial use of roses spanned a wide gamut of ailments, preparations containing the rose ranged from the simple through to the highly complex, and examples of the remedies containing rose found in both English and Colonial American domestic sources speak to its cultural weight. The rose is closely associated with Early Modern English lyricism, medicine, cooking, and even political affinity, and it is examined within the thesis as a standard example of the broad Anglo-American domestic botanical culture. The rose epitomizes inherited Early Modern English thinking and practice, it was highly valued and regularly employed on both sides of the Atlantic, and recipes containing it reflect the diversity and adaptability of agency and application between Anglo-American household practices which is characteristic of the culture as a whole.

Ann Goodenough’s English receipt book of 1775 contains a recipe for a ‘Conserve of Red Roses’, another for ‘Powder of Roses’, two separate recipes on how ‘To Perfume Roses’, instructions ‘To make suger of Roses’, and two on how ‘To make Oyle of Roses’. Moreover, her receipt for ‘An Oyntment for any pains of the stomake or paines aboute the Heart of for any great cold or long Coughe or any swellings’ uses ‘Oyle of Roses’ as one of the base

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391 Medicinal aromatic roses such as *Rosa damascene* and *Rosa gallica* originated in the Levant, and were first introduced to the British Isles to the Romans. As such, they represent a broader trans-Atlantic botanical culture, as do the hard spices, than indicated by the simple Anglo-American context of the thesis.
ingredients. Indeed, across these domestic sources, roses are diversely used as foodstuffs, household agents, and medicines. They are employed in conserves, perfumes, ointments, electuaries, and plasters. Clearly the shared botanical material is viewed reflexively here, with individual practitioners applying it widely, according to its perceived characteristics. Roses are aromatic, thus useful in pomanders, powders, and perfumes; their action in soothing, thus suitable for use in a range of cooling and calming medical preparations.

English and American authors were equally likely to employ rose in a number of manners and for a manner of ailments: Lady Mary Dacres’ English ‘Electuary for a Cough or Cold’ written in 1695 demands ‘4 ounces of ye Oldest Conserve of Roses’ as a base, while her receipt for ‘An exelent thing to take away scars or any rednes’ calls for the producer to ‘Take 2 spoonfulls of Damask Rose watter put to it 2 peniworth of sugar, … wash ye part 5 or 6 times a day, & shake the glas every time you use it’. Also from England, Penelope Jephson Patrick’s 1674 recipe for a ‘Glyster for an immoderate flux’ required the reader to ‘Take a quart of new milck, halfe a handf ul of Red Roses, boyle it well then devide it into two parts and put in fore ounces of loafe suger, a quartern of Brandy, give half a pint in a glister if occasion be, give once every 3 houres’.

Meanwhile, Catherine Haines’ late-eighteenth-century American receipt ‘For a

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393 IBID, fol.52. The majority of rose based receipts specify the use of rose flowers, or buds, as in Goodenough’s receipts. There are exceptions to this, however, as in Margareta Prentis’ use of a ‘tea of rose leaves’ to treat ‘a Sore Mouth’ (UP.ms. MS.5034-34, fol.24, Margareta Prentis, Cookery & Medical Recipes, Williamsburg: 1780s). Prentis’ use is very similar to typical uses of other rosacea leaves, notably that of the raspberry bush, all of which are high in tannin content, and subsequently have a strong astringent action on mucous membranes.

394 BL.ms.56248, fol.81r, 86v, Lady Mary Dacres’ receipt book, 1695. This recipe uses rose as a simple anti-inflammatory vulnerary with an affinity for epithelial tissues.

395 FSL.ms.V.a.396, fol.95v, Penelope Jephson Patrick’s receipt book, 1674.
Sore Breast that Seem Incurable’ produced a ‘plaister’ made of honey, bees wax and fresh rose flowers. Authors recommend the use of rose for ailments of the ‘stomacke’ and heart, as well as to take away ‘scars or any rednes’. On the surface, the sheer breadth of use advocated by domestic authors in these remedies is reminiscent of the polychrest prescribing typical of some learned botanical practices and cultures. In using rose as a simple soothing anti-inflammatory agent which takes away ‘swellings’ or ‘any rednes’ (inflammation), rather than as a prescribed curative agent for specific diseases however, these authors demonstrate an ultimately pragmatic application of the domestic culture. The application of rose to sores, scars, or the sort of inflammation typical of intestinal or respiratory infections would have typically provided symptomatic relief. In applying the botanical agent as a soothing paste, ointment, or syrup to painful, red, swollen conditions domestic authors have not only taken the inherited practice and adapted it to specific needs, but they consistently prescribe in such a way as to suggest that they are utilizing rose’s anti-inflammatory action based on empirical observation of its effects on patients.

Alongside their flexible approach to the application and administration of rose-based botanicals, domestic authors’ receipts demonstrate a sophisticated agency underlying the domestic botanical culture. In particular, this ‘agency’ includes awareness of, and sensitivity to, the delicate nature of flower material which would have impacted on the preparations’ ultimate chemical makeup, and indeed, physiological action. Indeed, it is by demonstrating care in preparing these recipes that domestic authors exhibit their awareness of a correlation

396 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, fol.4r, Catharine Haines’ Notebook, 1776.
between their treatment of the material and its subsequent usefulness. For example, Mary Glover’s receipt book not only contains detailed instructions on ‘The Best way of preparing roses to Still for oyles or syrups or rose watter’ but has further recipes for the floral ‘Flower of Oyntment’ recipe, along with simple recipes for ‘Syrup of Damask Rose’ and ‘Conserve of Roses’, each with differing preparation instructions relevant to the delicacy of the roses, as well as to the effectiveness of the base menstruum used to prepare and preserve it.\(^{397}\) (Rose also features in her recipe for a ‘Surfitt Water’, and as one of a number of botanicals in her ‘Jury of herbs for the byting of a mad Dogg’).\(^{398}\) Similarly, Susanna Packe’s text provides instructions on the production of ‘Conserve of Roses’, ‘Sugar of Rose’, and an ‘Oyle of Roses, ‘proved’, the last of which largely mirrors those found in the Goodenough and Glover manuscripts.\(^{399}\) Rose oil (whether this be the volatile oil produced by distillation or a simple macerate of fresh petals in a vegetable oil), is further used in a number of domestic receipts. Katherine Davies’ ‘excellent Medisine’ recommends its use to ‘heale Old Rotten & incurable wounds very speedily – probat’, advising the householder to take

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\text{the oyle of Roses 2 ozs: ofe viniger halfe an oz. …mixe them together & anoint it when all the rotten & putrified flesh is eaten out, anoint toe Sore with butter & ye shall see a Marvilous effert about. Dr. HMcKley.}\(^{400}\)
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Ann Goodenough includes a recipe for ‘A Oyntment for any pains of the Stomake or paines aboute the Heart of for any great cold or long Cough or any swellings – The Countess of Rochesters Receite’ which uses ‘the best Sallett Oyle or Oyle of Roses’ as a base. A range of rose based botanicals, including

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\(^{397}\) BL.ms.57944, fols.19, 85, Mary Glover, *Her Receipt Book*, 1688.

\(^{398}\) IBID, fols.155, 32, 157.

\(^{399}\) FSL.ms.V.a.215, Susanna Packe, *Her Book* (of Receipts), 1674.

\(^{400}\) BL.Eg.ms.2214, fol.74r, Katherine Davies’ *medical and cookery receipts*, 1680-c.1701.
oils and ointments are found in Colonial sources. Martha Washington’s work, for example, contains recipes for oil of rose, rose water, several syrups, rose vinegar, and candied rose, conserved rose, and cakes made from roses.\(^{401}\) In each instance, the demands of both the raw material, the nature of the holding menstruum, and awareness of the desired end product determine a range of preparation instructions, with each preparation illustrating different skills, and each speaking to experience on the part of the producer.

Indeed, the production of rose water alone illustrates a high degree of domestic agency. Rose water, or roses as a component of waters, was an enduring botanical preparation associated with Early Modern England. Lady Ann Blencowe begins her receipt for a ‘Sweet Water’ with the instructions to ‘Take a gallon of fair running water, one handful of red rose leves’, and Rose Kendall employs rose water as the base to her polypharmacy compound ‘Angell Water’.\(^{402}\) A rather quirky version of rose water may be seen in Mary Doggett’s receipt book, ‘To Dye Rose Water Rose Color’:

\[
\begin{align*}
\text{Take a glass of rose water, and put rose Leaves yt quantity of a handful in it, and sett ye glass into ye Still & so distill it till you see the Leaves white then take ym out and put in more fresh Leaves, till your color like you, but be carefull of Dying your water too Deep.}\quad{}^{403}
\end{align*}
\]

Like Washington’s Colonial manuscript, Doggett’s writing includes roses frequently, in a number of forms. A typical example is her ‘Electory to comfort


\(^{402}\) MHL., Walderton, West Sussex, Lady Anne Blencowe, *The Receipt Book of Ann Blencowe*, 1694; FSL.ms.V.a.429, fol.79r, Rose Kendell et al., *cookery and medical receipt book*, 1682

\(^{403}\) BL.Add.ms.27466, fol.11r, Mary Doggett, *Her Booke of Receipts*, 1604. This recipe may be read in context of Doggett’s use of Rose water to dye other waters and syrups ‘green’, discussed in chapter four.
ye stomack’ based on a distillate of ‘old Red roses’. While Rose Kendall’s ‘Electuary for a Cough in the Lungs’ is built around a ‘Conserve of Redd Roses’ base, and Elizabeth Fowler uses rose water as the liquid portion of her receipt ‘To mak Lossongengers’. The Eyton manuscript contains a recipe ‘To make Consarves of Roses’ as well as one for Rose Syrup. Indeed, like waters, Rose syrup is found across the domestic sources, from Mary Hookes’s English receipt book of the late seventeenth-century which contains a ‘Syrupp of damask roses’ recipe, to Mrs Johnston’s 1700 receipt for ‘Syrup of pale roses’. This range of products speaks to the ability of authors to apply a varied set of skills in producing a range of end products from a single, simple raw source. Moreover, it speaks to an underlying wealth of domestic knowledge and experience in treating that source: the rose is a plant with a rich historical tradition as a household medicine, one which was valued in a multitude of guises, and applied to a multitude of ailments, each perceived to be distinct, and of value to the prevailing culture.

The perceived value of rose as an old world staple common to both Early Modern English and Colonial American domestic medicines is apparent in the range and of recipes found across sources. Equally clear is its perceived use as a medicinal, alongside its cultural value as a decorative and aromatic garden plant. This is important because it both highlights the knowledge of

404 IBID, fol.34v.
405 FSL.ms.V.a.429, fol.82r, Rose Kendall et al, *cookery and medical receipt book*, 1682; FSL.ms.V.a.468, fol.84v, Elizabeth Fowler *Her Book*, (cookery book also containing medical receipts, sermons, a hymn and a poem), 1684.
practical implementation which householders wielded in their use of rose, particularly in regards to their dealings with the delicate floral material. Just as importantly, it speaks to the continuity of that practice. Indeed, the widespread use of rose across domestic households illustrates not only the importation of English plants to the Americas, but also the cultural and social associations as well as the practices and agency tied to it. Domestic authors’ ability to produce rose distillates and floral waters, as well as further adapting these in the production of ointments, vinegars, and lozenges, and their application of these products to a breadth of ailments, all speak of a well-established, sophisticated domestic body of knowledge and practice concerning this plant, and plant material, in particular. Ultimately, it speaks to both the breadth of the culture’s knowledge base, and to the great detail and specificity of its implementation.

Of Spices

Aromaticall. Sweete of sauour: smelling like spice.408

Orleans: He’s of the colour of the nutmeg.
Dauphin: And of the heat of the ginger.409

As was the case of flowers generally, and the rose in particular, spices were culturally popular objects with a well-established role in the domestic canon, whose use was regularly adapted by individual domestic authors to meet their household needs. The common social perception of these botanicals as cultural objects with easily recognized traits may be seen in Shakespeare’s description of a horse that is as hot as ginger, as ruddy as nutmeg. Indeed, the idea of a shared social precept may be further seen in the lack of a distinct

408 J. B., An English Expositor, (LONDON, 1621).
definition for spices; the *English Expositor* of 1621 gives a definition for ‘aromaticall’, but not for ‘spice, though as ‘aromaticall’ is defined as ‘smelling like spice’, we might infer that a spice is something which ‘smells aromatic’. Indeed, a trawl through the lexicons of Early Modern English for the term ‘spice’ produces references in seventeen books, of which only four define ‘spice’ itself, and supports the idea of an assumed familiarity. Of these references, definitions range from a simple ‘provisions’ through an association with dried fruits, to ‘several sorts of grocery-ware, as cinnamon, cloves, mace, nutmeg, &c.’. The other thirteen works all employ ‘spice’ either as a defining noun, as in ‘Ginger (Zinziber), is a spice well knowne’ (John Cowell’s *Interpreter* of 1607), or more simply, ‘Cardamomum, a spice’ (Jean de Renou’s *A Physical Dictionary*, 1657), or as part of a descriptive phrase as in ‘Aromatize, to perfume, or Spice’ (Coles’ *An English Dictionary* of 1676). The absence of a definition in the majority of these works suggests that the term was in such common currency that most authors felt no need to explain it; the variation in meaning in those texts which *do* define it, however, suggests that that ‘common’

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definition was widely varied. For the purposes of this work, ‘spice’ is defined using a modern definition from the *Oxford English Dictionary*:

one or other of various strongly flavoured or aromatic substances of vegetable origin, obtained from tropical plants, commonly used as condiments or employed for other purposes on account of their fragrance and preservative qualities.\(^{412}\)

Physically, these plants are hard, aromatic, often resinous ingredients with a high proportion of volatile oils which confer ‘fragrance, preservative, and medicinal qualities’.\(^{413}\) Spices were typically imported from countries east of the occident, and as such represent a ‘trans-Atlantic’ botanical culture beyond the Anglo-American remit of the thesis. They were however, commonly, and continually, used in domestic recipes across the period and geographical spheres examined here, and played an important, ongoing role in this particular arena.\(^{414}\)

The trans-Atlantic nature of spice cultures specifically, as a subset of botanical cultures more generally, is illustrated in the nature writings of Nicolas Monardes of Seville’s 1560s account of spices (translated by John Prampton in 1577). Monardes wrote that:

The philosopher doeth saie, that all Countries doeth not give Plantes and Fruites alike: for one Region yeldeth suche Fruites, Trees, and Plantes, as an other doeth not, we doe see that in

\(^{412}\) OED, (Oxford: Oxford University Press, 1984.1a). The modern definition is used here as a means of defining the parameters embraced by the thesis in its examination of ‘spices’.

\(^{413}\) Along with recognizing their aromatic qualities, early modern and colonial usage commonly employed spices as stomachics, particularly in laxative remedies. The *English Expositor* notes this action secondarily in its definition of Senna:

Sena. A little plant grow ing in Italy, and other hot countryes, but the best is brought from Alexandria. It is hot and dry, and the leaues thereof are often boyled in Physicke, to purge the body of melan cholicke grosse humours, and to cleanse the blood: but there must bee Anni seede, Cinamon or Gin ger added to it, for that therwise it will proouke windinesse, and gripings in the belly. (J.B. *An English Expositor*, 1622)

\(^{414}\) Even this categorization has its limits: many of the ‘hard spices’, particularly seeds from herbaceous plants, were, and are, grown in temperate European countries, such as the seeds from dill and caraway.
Creta oely growth the Diptamo, and the Incence onely in the Region of Saba, and the Almaciga onely in Ilande of Chio, and the Sinamom, Cloves, and Peper, and other spices onely in the Ilandes of the Maluca, and many other thynges you have in divers partes of the worlde, whiche was not knowen until our tyme, and the people of old tyme did lacke them.415

As representatives of the ‘old world’ herbal canon, hard spices serve both as models of botanicals in common medical usage, and as examples of commodity, with their value relating not only to questions of medical use, but equally to the question of global business.416 Early Modern European exploration and expansion was tied to the importation of commodities, including that of aromatic spices, as attempts to find cheaper, naval, alternatives to the overland silk route provided the impetus for many of the financial backers to support broadly trans-Atlantic expeditions, with increasing appreciation in the economies of spice importation.417 In the 1604 Rates of Marchandizes, for

415 Nicholas Monardes, Historia medicinal de las cosas que se traen de nuestras Indias Occidentales, 1565; English Translation: Joyfull Newcs out of the Newe Found Worlde, written in Spanish by Nicolas Monardes, physician of Seville and Englished by John Frampton, Merchant, Anno 1577. The translator, Frampton, was a Bristol merchant who translated not only Nicholas Monardes, but also Marco Polo and several books on the exploration of the Far East. Creta = Crete; Diptamo = dittany (herbaceous herb rather than a hard spice); Region of Saba = ‘An ancient kingdom in southwestern Arabia, known for its trade in gold and spices; the biblical Sheba ’ (Merriam-Webster, 1984); Almaciga onely in Ilande of Chio = ‘a tall Philippine timber tree (Agathis alba) yielding a dammar resin’ (Merriam-Webster); Maluca (Portuguese translates to ‘crazy’) = possibly the Maluku Islands in the Philippines?, though this doesn’t compute with the associated spices which were primarily from Sri Lanka and India (Cinnamon), Indonesia, India & Zanzibar, (Clove), and India, (Pepper).


417 IBID. Dalby writes that it was ‘precisely this – the exciting discoveries of previously unknown spices and aromatics in the age of the great explorations [which] formed the them of Monardes’ work’, moreover, the ‘all these had been so costly in western Europe, and so essential as flavourings and medicines, that the search for direct access to them had been one of the chief impulses for explorers’, p.15. Cf. Michael Krondl, The Taste of Conquest: The Rise and Fall of the Three Great Cities of Spice (New York: Ballantine Books. 2008). Krondl’s Taste of Conquest includes an interesting muse on the early modern European ‘need for spice’ and subsequent historiography, arguing that the focus of the preserving qualities or spices as the primary rationale for their value to Europeans is erroneous, pp.5-11, with a brief consideration of political and economic motivations pp.22-23. Krondl’s desire to greatly extend the range of spice usage and cultural import is echoed by Jack Turner who that ‘insofar as I have a thesis, it is that spices played a more important part in people’s lives, and a more conspicuous and varied one, than we might be inclined to assume’ Jack Turner, Spice: The History of a Temptation (New York: Vintage, 2005), p.xviii.
example, we see that importation rates for ‘spices and Drugges of all sortes’ are simply listed ‘as in England’, but by 1774, cinnamon alone is referred to six times, with entries ranging from the general ‘Additional Duty on Spices’:

\[
\text{FOR ALL \{ CINNAMON, CLOVES, MACE, AND NUTMEG \}} \quad \text{For every hundred pounds value thereof, according to the several values ...} \quad 0\text{l.} 0\text{s.} 0\text{d.}
\]

to the specific:

\begin{align*}
\text{Grocery:} & \quad \text{l.} & \text{s.} & \text{d.} \\
\text{Cinnamon, the pound.} & \quad 0 & 6 & 8 \\
\text{Clove, the pound.} & \quad 0 & 10 & 0 \\
\text{Ginger (East-Indies), the pound.} & \quad 0 & 3 & 0 \\
\text{Ginger (West-Indies), the pound.} & \quad 0 & 1 & 4.418
\end{align*}

The increase in reference, alongside the increased specificity of rates suggests that spices are well established as economic commodities within prevailing trans-Atlantic currencies. That they were more widely perceived as valuable commodities worthy of import by popular culture is well illustrated by the opening lines of Marlowe’s *The Jew of Malta*:

\begin{quote}
This is the ware wherein consists my wealth:
And thus me thinkes should men of judgement frame
Their meanes of traffique from the vulgar trade,
And as their wealth increaseth, so inclose
Infinite riches in a little roome.
But now how stands the wind?
Into what corner peeres my Halcions bill?
Ha, to the East? yes: See how stands the Vanes?
East and by-South: why then I hope my ships
I sent for Egypt and the bordering Iles
Are gotten up by Nilus winding bankes:
Mine Argosie from Alexandria,
\end{quote}

\footnote{418 England and Wales. Sovereign (1603-1625: James I), *The rates of merchandizes as they are set downe in the Booke of rates for the custome and subsidie of poundage, and for the custome and subsidie of cloathes, the same being appointed by his Maiestie, and confirmed by the Lorde deputye and Councell, and ordered to be published in print, for the direction of such as it may concerne in this kingdome of Ireland*, (Dublin, 1608), p.3; Edward Burrow, *A new and compleat book of rates; comprehending the rates of merchandize as settled by the Acts of 12 CAR. II. Cap.4. II GEO. I. cap. 7. and subsequent Acts of Parliament; and, shewing The DUTIES AND DRAWBACKS Payable upon all Goods imported, exported, or carried coastwise; ...* (England: 1774); pp.45,64, 67, 184, 286, 294, references cited here pp.64, 286.}
Loaden with Spice and Silkes, now under saile,
Are smoothly gliding downe by Candie shoare
To Malta, through our Mediterranean sea.  

While their inclusion in the *Rates of Merchandizes* speaks to the economic history of spices and spice importation, Marlow’s play shows spices from the East (‘and by-South’), as desirable commodities within a much wider, popular culture.

As culturally weighted items, spices in Early Modern England and Colonial America were perceived equally as signifiers with mythical qualities and as hard commodities and medicinal agents. Further to Shakespeare’s appropriation of botanical imagery in his use of spices as indicators of character, the Early Modern lexicographer, J.B., associated spices with the mythical and fantastic, noting that the ‘Phenix. The rarest Bird in the world ... buildeth him a nest of Cinnamon and the twigs of Frankincence, which he filleth with spices’. Equally, Early Modern writers were clearly attempting to place spices within the context of the natural world, as seen in John Cowell’s *Book Containing the Signification of Words*:

Cloues (caryophylli) are a spice knowne by sight to euery man. They be flowers of a tree called (caryophyllus) gathered and hardened by the Sunne. Of their nature you may reade in Gerards Herball. lib. 3. cap. 144. This is comprised among such spices ...

Ginger (Zinziber) is a spice well knowne, being the roote of a plant that groweth in hot countries, as Spaine, Barbary, &c. The true forme whereof you haue expressed in Gerards herball. li. 1. ca. 38. This is a spice whose roote is to be used

Graines (grana paradisi, aliâs Cardamomum) is a spice medicinable and wholesome, whereof you may see diuers kindes in Gerards herball, l. 3. ca. 148. These are comprised

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419 Christopher Marlowe, *The Jew of Malta*, Act One, Scene One.
among merchandise ...

Nutmegs (nux myristica vel nux muscata) is a spice well knowne to all. It groweth of a tree like a peach tree, and is inclosed in two huskes, whereof theinner huske is that spice which we call mace. Of this who will, may reade more in Gerards herball, lib. 3. ca. 145. It is mentioned among spices that are to be used ... anno 1. Iaco. ca. 19. 420

In each of these descriptions, Cowell is placing the botanical both within the physical world, by describing the plant, as in ‘being the roote of a plant that groweth in hot countries’, or ‘it growth of a tree like a peach tree’, as well as within a broader learned context of medical thinking and writing by referring back to Gerard. 421 In each of these definitions the plants are defined as a ‘spice’, and associated with heat, the sun, and hot countries. This popular perception of the plants would have undoubtedly fed into the domestic culture, impacting on household perception, not only of the plant in question, but of medicines produced from it.

Certainly many remedies in domestic employ contained a range of exotic hard spices. These spices were typically used in combination and applied to a variety of ailments, again accessing the shared, common materia medica, and illustrating commonality of practice. Cinnamon, clove, ginger, and nutmeg all appear frequently in various combinations, along with other spices (galangal, turmeric, mace, pepper, amongst others). Spices were often employed as adjunct botanicals, improving the delivery of the medicine as a whole, as well as

421 Cowell is often incorrect in his descriptions, for example, there are indigenous gingers from both Asia and the America, but none from ‘hot countries, as Spaine, Barbary, &c.’. His attempt to place the botanicals within its physical setting is significant, however.
proving primary agents in their own right. Typical examples of this may be seen in the late-seventeenth and early-eighteenth-century English recipes of Ann Goodenough, Amy and Mary Eyton, and Mary Chantrell. Goodenough’s receipt for ‘The Gout Water’ includes ‘Nutmegs Ginger Mace Cinamon … white Peper … Gallingall … Ginger … Cubebs … Cardimum … [and] Olibanum’ along with a plethora of herbaceous botanicals, fruits, honey, sugar, and alcohol. Similarly, Amy & Mary Eyton English ‘Receipt for the Rickets’ combines soft herbs with spices, including hartshorn, licorice, fennel, carroway, coriander, and cardamom, while Mary Chantrell’s receipt book calls for ‘mace … annyseeds … Carroway Seeds … Colliander Seeds & a Spring of wormwood’ in ‘A Drinke for ye windy goute’. This greater British prescribing and production revolving around spices may also be seen in American recipes. For example, Hannah Huthwaite’s late-eighteenth-century Colonial recipe for ‘Horse Balls’ calls for:

Anniseeds Gallingall Ledoary Liquorish Elicampain Turmerick Great Cardamums of each four ounces. Syrurp Coltsfoot Syrurp Maiden hair Syrurp Whorehound Syrurp Lemons of each 2 oz Chymicall oyle of anniseeds 1½ oz, made up into Balls with half a pint of white wine, 2 oz Spanish juice if too thin thicken it with Liquirice powder – 1 oz ½ or 3 oz ffor a Dose every Morning. These domestic authors have regular recourse to a similar range of botanical materials, including typical hard spices such as aniseed, gallingal, and cardamom, irrespective of their chronological or geographical placing, again illustrating the shared practice. Furthermore, both the range of spices employed in the recipes, and the breadth of ailments individually addressed by different

422 The ‘adjunct’ use of spices is beautifully illustrated by Jane Buckhurst’s elderberry wine receipt in her English manuscript of 1653, which ends with the advice to ‘put surrop of gilliflowers wich will be much better 2 and a fue cloves in it’: FSL.ms.V.a.7, pdf.6b, Jane Buckhurst’s medical receipt book, 1653.
household authors, from rickets and gout to hoarseness of voice, again speaks to the common domestic culture traversing both period and place.

Alongside the relatively complex formulae typical of domestic spice use may be found of spices employed as simple botanicals, though this is particularly true of late-eighteenth-century Colonial practice where a divergence in old world plant use and application occurred. For example, Margaretta Prentis’ Virginian receipt book of the 1780s combines ginger as the only botanical ingredient alongside ‘Brimstone … and burnt allum’ in a receipt ‘For a Fetre’. Catherine Haines’ Philadelphia notebook of 1776 combines three hard spices in the treatment of ‘a Cold in the Bowels’, instructing the householder to ‘take an ounce of Carrow Seed 2 dram of cloves & 2 dram of Sinament bruised’. Each of these recipes varies from the inherited English practice of combining multiple hard spices, while retaining the essential botanical ingredients themselves. Both English and American sources are drawing from the same shared canon in employing exotic spices, and recipes across the domestic sources show authors’ willingness and ability to adapt this shared materia medica, but later Colonial sources express this flexibility and mutability in new ways, preparing simpler remedies, often using ingredients to hand rather than those typically employed in the old world practice. This eighteenth-century Colonial adaptation both serves to illustrate the flexibility of the common domestic culture, and hints at the beginnings of a new, American, practice which is further considered in Chapter Six.

425 UP.ms.5034(1-4), unfoliated, Margaretta Prentis’ Cookery & Medical Recipes (Williamsburg: 1780s), p.27; APS.ms.coll.52-eadd, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, fol.1v, Catharine Haine’s Notebook, 1776.
Cinnamon *Cinnamomum tamala, et species.*

The use of spices as botanical agents across the Anglo-American domestic practice, whether in a culinary or a medicinal context, is nowhere more clearly illustrated than in the case of cinnamon. Employed in cakes, preserves, syrups, medicinal waters, and clysters, cinnamon is a typical example of the cross culinary/medicinal hard plant material imported from ‘the orient’ for Early Modern English and Colonial American use. Yet it is also no more, or no less, prevalent or prized than its compatriot spices: clove, ginger, coriander, and cardamom. Indeed, in looking more closely at cinnamon as a cultural commodity (rather than as a medicine, as we see below), we can see that it is largely representative of the genre of ‘spice botanical’.

John Cowell’s English printed text, the *Interpreter* of 1607, describes Cinnamon as

a tree, whereof the barke is knowne to be a pleasant, comfortable, and medicinall spice, which you haue described in Gerards Herball. Lib. 3 cap. 142. This is reckoned among garbleable spices, an. 1. Iac. Cap. 19.426

Cinnamon’s specific value as an aromatic medicine, reflecting the use of the oil in particular, is further evident in domestic sources such as Katherine Davies’ early-seventeenth-century English recipe for an ‘Oyle of Synamon’.427 Equally, an association of cinnamon its ability to warm and comfort is further seen in the definition for ‘diacinnamon’ in *An English Expositor*, describing ‘A physicall mixture of cinnamom and diuere spices in powder together, which helpeth

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427 BL.Eg.ms.2214, fol.126r, Katherine Davies’ Receipt Book, 1638. Davies’ and Hannah Huthwaites’ cinnamon and aniseed oils (respectively) are further considered in the conclusion.
digestion and is good against colde moist diseases of the stomacke’. As a popular cultural entity, cinnamon reflects Anglo-American appropriation of a quasi-theoretical symbolic nature, whereby cinnamon’s aromatic flavour is tied to its heating qualities, making it a ‘hot and dry’ aromatic agent, capable of burning of ‘colde moist diseases of the stomacke’.

Chief amongst its uses was cinnamon’s employment in medicinal waters, both as a simple, and as a key ingredient in aqueous polypharmaceuticals. Indeed, in his *Family Physitian* of 1682, George Hartman includes a recipe for ‘A Cordial Water, or Spirit of Cinamon’ which demands of the householder to ‘Take chosen Cinamon bruised, one pound, *Aqua Vitae*, three pints; the best Rose-waeter, two pints; let them digest a day or two close stopped; then distil it in an Alembick’. Following on from his lengthy instructions, Hartman describes the value and use of this remedy:

> The spirituous Water of Cinamon, is good speedily to comfort and fortifie all the noble parts, and principally the Heart: for which reason it is given with great success in swooning and faming Fits. It comforts and strengthens the Stomach, excites natural heat thereof, helpeth Digestion, stays Loosness, expels Wind, and eases Collicks which are caused thereby. It is much recommended to strengthen Women in Labour, to facilitate the Birth, and case their pains. It is also very good to provoke the Terms, and to exhal the vapors that rise in the Matrix. It is given alone of the first runnings mixt together, from half a spoonful to a spoonful when there is any necessity; but when you take it often, it is better to keep to the lesser Dose.

Lady Grace Mildmay’s earlier domestic receipt for an ‘excellent cordial’ similarly combined hard and soft botanicals. Each of these recipes contained

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431 NRO.W/A coll.,misc., vols. 33, fols.25-7, Lady Mildmay’s medical papers. The domestic version contained sage, balm (Melissa officinalis), rosemary, marjoram, mint, pennyroyal, calamint, elderflowers, red rose leaves, sticados, camedereos, camapiteos, cloves, nutmeg.
cinnamon (amongst other spices and soft herbs) and demonstrated two key characteristics of domestic practice: both drew from a common materia medica, and both assumed a degree of agency in readers’ ownership of, and familiarity in using, distilling equipment. Moreover, each recipe implies a sophistication of domestic knowledge and skill as hard and soft botanicals required differentiated treatment in terms of timing and exposure to both heat and solvents. The omission of detailed instructions regarding the precise preparation of individual botanicals in both Hartman and Mildmay illustrates assumptions on the part of the authors regarding the competency of those women reading the recipes, again speaking to the commonness of the underlying communal domestic practice.

These recipes, particularly Mildmay’s receipt, are further replicated in some form or another across domestic sources, including Jane Dawson’s mid-seventeenth-century English ‘Sinimun Water’, Elizabeth Hirst’s ‘Cinnament Water’ of 1684, Mary Glover’s two recipes for ‘Cinnamon watter’ in her 1688 manuscript, which further indicates the existence of common practices and a shared materia medica. While specific instructions are included in Ann Goodenough’s receipt ‘To make Cinamont Water’, and Elizabeth Freke’s receipt of 1697 to make:

Cinaman Watter by Infusion - / Take of Cinaman Bruised Fowre ounces, Spirritt of wyne 10 pints Infuse them to gether a fornight in a Bottle Close Stopt Shaking the glass … then dissolve a pound of suger Candy in a Quarte of Rose watter and mix both these Liquors together then putt to

setwall, galangal, white pepper, black pepper, long pepper, juniper berries, citron pills, bayberries, ameos, spikenard, lignum aloes, basil, cubebs, cardamom, cinnamon, calamus aromatic, dill, peony, mastic, olibanum, aloes hepatick, fig, raisins, dates, Jordan almonds, honey, and sugar.

FSL.ms.V.b.14, fol.35v, Jane Dawson’s cookery book, c.1650-1699; WL.ms.2840, fol.14r, Elizabeth Hirst’s Receipts; BL.ms.57944, fols.19r,28r, Mary Glover, Her Book, 1688.
them fowre grains of Musk & half a Scruple of Amber grease Tyed up hand itt in yr Bottle to the neck & it is very good against hart qualms & fittings.433

In her Receipt book of 1650, Elizabeth Digby discusses and differentiates between first and second distillates, noting particularly prescriptive implications around strength of product, while Martha Washington’s cinnamon water recipe (mid-eighteenth-century American colonies) mirrors this advice: ‘shift ye glass every houre after ye first time, for ye first will be ye strongest, & - ye last will be very weak’.434 Looking at the ways in which spices were perceived, portrayed, and employed, it is clear that Early Modern and Colonial awareness and knowledge of them, as well as familiarity in handling them, was widespread, and not necessarily specialist, although these spices were commonly, and consistently, used in a specialized manner in the domestic fashioning of medicines. Moreover, these botanicals commonly originated in, and later traversed, a wide range of countries including India, the Spice Islands, Africa, the Levant, and Southern Europe, as well as the Anglo-American Atlantic. As such, spices generally, and cinnamon specifically, represent the breadth and reach of the domestic practice, which embraced any and all medicaments available which it perceived to be of use domestically. Further, this domestic practice may be read in terms of its reliance on, and relationship to, broader social practices, both economic and medical. The place of these botanicals in the domestic culture firmly ties households and household authors to the

434 HSP.ms.(Phi)Am.530.3.a., f.ol.289, Washington Family Papers, Martha Washington, Booke of cookery and booke of sweetmeat,1749-1799. cinnamon is found in virtually all of Washington’s waters, often in conjunction with galangal, liquorish, anised, cloves, nutmeg, and ginger; including the first of her ‘Aquimirabelis’ recipes, and her recipes for ‘Aquecelestis’, ‘rosasolis’, virtually all of the cordial waters, with various attributions, ‘the Plague Water’ remedy, and both ‘Vsquebath’ recipes.
complex social world in which they lived and practiced in a way that indigenous plants do not. This was a cosmopolitan, far-seeing practice despite its roots in localized, communal practices and traditions.

Of Fruit: Elder, *Sambucus species*

Species of elder, or *Sambucus*, were native to both England and North America (unlike the rose, naturalized in England, or imported hard spices). Equally, it was used medicinally by indigenous peoples on either side of the Atlantic prior to European settlement. Its use as a medicinal in Early Modern English and Colonial American domestic sources, however, whether in receipts or in private correspondence and journals, is largely drawn from the existing European tradition, though we can begin to trace a pre-existing indigenous American practice in the developing Colonial use. Found crowding hedgerows, invading gardens, and tangling wild bush, the Elder is a small to medium sized invasive shrub distributed across all temperate continents, with medicinal species native to Europe, North America, and Asia. Elder shrubs typically have fine, serrated pinnate leaflets, and carry racemes of lacy white to cream coloured flowers in early summer which blow into clusters of small, dark purple to black berries in late summer. All parts of the plant have been used medicinally as illustrated in these seventeenth-century English recipes:

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435 The roses typically employed as medicines in the Anglo-American canon, although cultivated in, and often associated with, England, were *Rosa gallica* and *Rosa damascene*, both originally imports from more southerly continental Europe.

436 Includes *Sambucus racemosa*, *Sambucus nigra*, *Sambucus Canadensis*, *Sambucus Mexicana*, and *Sambucus chinensis*, for example.
Bark – ‘green rind of Elder’ in Anne Glydd’s ‘Exselent ointment for a Burne’ and again in her receipt ‘To make and exsilent Ointment for the saint Anthony’s Fire’.437

Berry –‘To make syrup of Elder which is Good against the scurby or dropsi and helpeth thos that are troubled with a pain in ther stomachs’.438

Flower – Mary Dacres’ ‘An exelent thing for a humor in ye legs .. Take a pint of milk & put to it a handful of Elderflowers boyle them in it & bathe ye part with it warme morning & night very well’.439

Leave – ‘An other preservative Medecine against the Plague … Take an handful of Elder leaves as much of redd bramble Leaves as much of hearbe Grace and as much of Sage leaves. Washe them and swinge them together in a faire clothe and straine them with a quart of white wine’.440

While elder buds, leaves, or bark were all used domestically, the use of berries (which exhibit strong antiviral properties) was most common across Early Modern English and Colonial American sources. Mary Hookes’ English recipe for the ‘Spiritt off Elder buryes’ called for the reader to ‘Take ye Elderberyes mash, ans bruse them, in a stoon mortter; & let them stand in an earthen pan, till they furmenstt, when itt has done working, still itt, in a limbeck, or a cold still, very well stoped’.441 A similar recipe for ‘Elder Spiritt’ in Jane Dawson’s English receipt book instructed the householder to ‘Take of yer Elder berryes when they are full ripe … ‘, while Lettie Pudsey’s Colonial manuscript contains two separate, elder berry based, remedies.442 The first of these, ‘to make surrup of Elderberry’, required one to

437 BL.ms.45196, fols.67r, 77v, Anne Glydd’s receipt book, 1656.
438 IBID, fol.54v.
439 BL.ms.56248, fol.93r, Lady Mary Dacres’ receipt book, 1695.
440 FSL.ms.V.a.388, fol.67v, Mary Carlyon, medical receipt book.
441 WL.ms. 3009, Elizabeth Jacobs’ Receipt Book, 1590-c.1680s, p.75; FSL.ms..L.A.931, fol.72v, Mary Hookes’s cookery book, c.1675-1725.
442 FSL.ms.V.b.14, fol.70r, Jane Dawson’s cookery book, c.1650-1699.
gather your berrys when thay bee full ri’e, pick them, & bruse them then strache them, & to what quantity you please to make, take 7 pound of find suger, to a quart of that Juce. Mixe your suger & Juce, together in a fine skillet, and so sett it upon the fier but not to hot a fier, for you must bbe sure, that it neither boyle nor simper, but onely to dissolve the suger & to make it through hot, softly stirring it, to bring up the sc um & skin it very clean, [coh] it & bottle it.443

Pudsey’s second recipe, ‘To make Mead with Elderberries’, called for very ripe Elderberries, pick them from ye stalkes, put them in an earther pot, and past them close, & bake them in an over, while they are warm straine them out...’ 444

Pudsey’s manuscript also includes a third elder recipe, this one ‘To make Elder Wine’.445 Each of Pudsey’s recipes are echoed in other domestic sources: household examples of elderberry syrup or rob may be found in Mary Glover’s ‘Syrrop of Elder’, and Rose Kendall’s 1682 receipt ‘To make syrup of Elder Berries’, while elderberry based ‘spirits’, particularly wines, are found in virtually all of the sources.446

The English physician, John French’s, vernacular text, The Art of Distilling, also included a similar recipe for an elderberry macerate, or rob.447

This advocated a slow maceration of elderberry juice in vinegar (in ‘some warm place near the fireside’) followed by distillation in a ‘hot still’.448 Unlike the mild

443 FSL.ms.V.A.450[1], fol.38r, Lettice Pudsey’s receipt book, c.1675.
444 IBID, fol.60v.
445 IBID, fol.56v.
446 BL.ms.57944, fol.164, Mary Glover, Her Receipt Book, 1688; FSL.ms.V.a.429, fol.53r, Rose Kendall et al, cookery and medical receipt book. 1682.
447 Elderberry ‘rob’ is a liquid based medicine, typically made as a sugar-based syrup, but occasionally seen in alcohol-based recipes. Current recipes may use glycerine to produce a herbal ‘glycerite’ in lieu of sugar.
448 John French, The Art of Distillation. Or, A Treatise of the Choicest Spagyrical Preparations Performed by Way of Distillation, Being Partly Taken Out of the Most Select Chemical Authors of the Diverse Languages and Partly Out of the Author’s Manual Experience together with, The Description of the Chiepest Furnaces and Vessels Used by Ancient and Modern Chemists also A Discourse on Diverse Spagyrical Experiments and Curiosities, and of the Anatomy of Gold and Silver, with The Chiepest Preparations and Curiosities Thereof, and Virtues of Them All. All
heat seen in Lettice Pudsey’s late-seventeenth-century English recipe, where
‘you must bbe sure, that it neither boyle nor simper, but onely to dissolve the
suger & to make it through hot’, the temperature involved in French’s second,
distillation, portion of the recipe will have destroyed some of the berry
consstituents.\textsuperscript{449} While the two recipes were contemporaneous, the domestic
version was more sensitive to the nature, and distilling demands, of the delicate
nature of the raw material. The exposure of the elderberry botanical product to
extreme heat may be seen to be mirrored in a range of domestic receipts,
however. Representative of English sources is Dawson’s manuscript, written
over the course of the second half of the seventeenth-century, and containing
three receipts for elder wine, each of which advocates ‘boyling’ their elder berry
botanicals (typically at least twice), while Martha Washington instructs the
American householder to set their preparation ‘on ye fire … & let it boyle a
quarter of an houre’ before adding honey and sugar and setting (a third time) to
the fire and ‘boyle & skim ym till it will bear an egg’ a century later.\textsuperscript{450} Dawson’s
slightly later English, and Washington’s substantially later Colonial, versions of
the elderberry rob appear to be derived from a similar practice to that of
French’s vernacular work, rather than the sensitive domestic recipe written in

\textit{Which Are Contained In Six Books Composed By John French, Dr. of Physick} (London: 1651),
Book 1, p. 21.
\textsuperscript{449} FSL.ms.V.a.,450[1] , fol.38r, Lettice Pudsey, Op.cit., \textit{Sambucus nigra} has been relatively
widely studied recently; studies supporting its use with upper respiratory disorders include:
Peter M. Abuja, Michael Murkovic, and Werner Pfannhauser, ‘Antioxidant and Prooxidant
Activities of Elderberry (\textit{Sambucus nigra}) Extract in Low-Density Lipoprotein Oxidation’, \textit{Journal
of Agricultural Food Chemistry}, 1998, 46 (10), pp 4091–4096. Vivian Barak, Tal Halperin, and
Inna Kalickman, ‘The effect of Sambucol, a black elderberry-based, natural product, on the
production of human cytokines: I. Inflammatory cytokines, ImmunoLOGY Laboratory for Tumor
Diagnosis, Department of Oncology, Hadassah University Hospital, Jerusalem, Israel, Israeli
Cytokine Standardization Laboratory. RA, Buhrmester, JE Ebingerla, and DS. Seigler’
‘Sambunigrin and cyanogenic variability in populations of \textit{Sambucus canadensis L.}
\textsuperscript{450} FSL.ms.V.b.14, fols.35,46,54, Jane Dawson’s \textit{cookery book}, c.1650-1699;
HSP.(Phi)Am.530.3.a., Washington Family Papers, Martha Washington, \textit{Booke of cookery and
booke of sweetmeats}, 1749-1799, receipt 254.
Pudsey's manuscript. In tracing domestic recipes to vernacular sources which themselves often reflected even earlier domestic practices, the makings of this rob highlights the complexity of transmission routes in play across the breadth of this particular botanical practice.

Similarly, complexities of elderberry end-products, both in terms of their manufacturing and also in terms of their material make-up, reinforce this picture of complexity. For example, within the field of culinary history, Early Modern English and Colonial American elderberry wine has been noted, and considered, as a historical counterpart to modern wines; that is to say, as a pleasurable alcoholic beverage with a primarily social, rather than medicinal, history.\textsuperscript{451} While there is some reference to the historical perception of wines as medicinal agents, they have typically not been treated primarily as such by scholars. Yet looking at Early Modern and Colonial household use in the domestic manuscripts, the lines are consistently less well defined, and we see that wines were perceived to be both drinks and medicines more equally. Martha Washington, for example, writes of her elderberry wine that it is ‘very good for ye scu’.\textsuperscript{452} Likewise, Katherine Davies’ undated English receipt book contains a recipe titled ‘Spirit of Elder for ye Chollck’ which is effectively a medicinal wine, calling for the householder to

‘Take a bushell of Elder berries full ripe pick of y\textsuperscript{e} stalks, w\textsuperscript{th} ye hand break up berries to a mash put em in an earthen pot or

\textsuperscript{452} HSP.ms.(Phi)Am.530.3.a., \textit{Op.cit.} Instructions for the production of Martha Washington’s elderberry wine are typical of domestic sources, advising the householder to ‘Take 3 gallons & a halfe of water & set it on ye fire, & when it is warme, put to it a peck of elderberries very rip[e], bruise them well, & strayne them, & measure the liquor & set it on ye fire again, & let it boyle a quarter of an houre, & scum it very well … ’ add further ingredients and again ‘boyle & scim ym till it will bear an egg’ before adding the yeast and bottling.
wooden --- it ye will hold double the quantity, do it in y° morn,  
Let it stand all day, at night put it in a good pint of east [yeast?]  
& cover it close wth a sheet and blanket let it work all night.⁴⁵³

The inclusion of yeast suggests that this recipe is clearly intended to produce a  
‘spirituous’ result, and yet, like the robs, syrups, and waters, Davies’ elder spirit  
is specifically designed to be taken as a medicine, in this case ‘for ye  
Cholick’.⁴⁵⁴ In each case, the range and complexities of these medicaments  
underlines both intelligent use of elderberry, and a sophistication of domestic  
agency in preparing, and applying, botanical preparations.

While berries are the most commonly employed botanical material  
derived from elder, bark, flower, and leaf were also employed within traditional  
Early Modern English and Colonial American households. The flowers were  
used both as medicines and possible foodstuffs. For example, in the late-  
sixteenth-century, Elizabeth Jacobs’ English recipe includes ‘Elder budds’ as a  
primary ingredient in her ‘Receipt for The Quill, and to Cure A Consumption,  
Called All Flower Water’ (a complex example of polypharmacy), and Jane  
Dawson includes a specific recipe ‘To make Elder Ointment’, also using elder  
buds.⁴⁵⁵ Mary Glover’s seventeenth-century English recipe uses them in a  
remedy ‘For the pyles’, while candied and preserved elderflowers may be found  
in recipes from both sides of the Atlantic, including Martha Washington’s ‘Elder  
bud salad’, ‘oil of Elder flower’, and elderflower Vinegar.⁴⁵⁶ There is also

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⁴⁵³ BL.Eg.ms.G2214, fol.84, Katherine Davies’ medical and cookery receipts, n.d.  
⁴⁵⁴ Unfortunately, elderberries work as a smooth muscle irritant and mild laxative (much in the  
same manner as prunes), so this remedy’s effectiveness in soothing the griping associated with  
colic is rather dubious.  
⁴⁵⁵ FSL.ms.V.b.14, fol.64v, Jane Dawson’s cookery book, c.1650-1699.  
⁴⁵⁶ WL.ms. 3009, Elizabeth Jacobs’ Receipt Book, 1590-c.1680s; BL.ms.57944, fol.21, Mary  
Glover, Her Receipt Book, 1688. Martha Washington, Booke of Cookery & Booke of  
and 160.
historical precedence, particularly in Colonial domestic sources, for the medicinal use of the leaves, bark, and branches of elder (despite the relatively high concentrations of cyanogenic glycosides in these parts of the plant).  

For example, Catherine Haines, writing in eighteenth-century Philadelphia, used the bark of elder as one of five ingredients in her recipe ‘To make an Ointment’, while Harriot Pinckney used ‘the inside bark of Elder’ in a poultice ‘For a Scald Head’ in her Carolina recipe from the 1770s, and Rachel Stout Allen recommended the inclusion of elder roots ‘for a gentle purge’, also in Carolina, and from the same period.

The broadening use of elder in Colonial households may at least in part be the result of exposure to Native American botanical knowledge and use: for example, the Linnaean travel writer, Peter Kalm, wrote in 1771 of seeing the Iroquois ‘boil the inner bark of the *Sambucus Canadensis*, or Canadian elder, and put it on that part of the cheek in which the pain was most violent. This, I am told, often diminishes the pain’. Kaln’s observation of indigenous use here speaks well to a broadening of use in the new world. If the berry recipes generally demonstrate great continuity of application and production, the use of other elder products illustrates the ability of botanical cultures to expand and

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457 Cyanogenic glycosides are glycosides which produce cyanide as a by-product of metabolism; examples of cyanogenic glycosides found in *Sambucus* *spp.* include sambunigrin, prunasin, and holocalin.

458 APS.ms.coll.52, series III: Reuben Haines. *Catharine Haines, Notebook*, 1776 (ms.coll.52, series III: Haines, Reuben [I or ll]). SCHS.1086.03.02, Harriott Pinckney Horry’s Receipt Book, 1770. NCSA.ms.Coll.1467. John Allen Papers, Rachel Stout Allen, *Medical Memorandum* c.1780s. The topical use suggested by Haines and Pinckney was still in use in mid-eighteenth-century Tennessee, with John Thompson recommending a poultice made of the inner bark or flowers of elder for skin eruptions; UT.ms.1271, John Thompson’s Common Place Book, 1803-1822.

459 Peter Kalm, *Peter Kalm’s Travels in North America; containing its natural history, and a circumstantial account of its plantations and agriculture in general* (London: William Eyres, 1770), Volume Two, p.35.
adapt. Colonial use of elder, in particular, illustrates a broadening of practice based on the inherited canon of herbs, with inclusion of new world plants.

Despite the willingness of Colonialists to adopt new world medical uses in the case of elder, it is primarily a continuity of practical skill and knowledge that we can trace here, as well as a parity of ingredients and application in trans-Atlantic use of old world spices and floral remedies. By examining a range of old world botanicals, Chapter Five has established that a shared, common Anglo-American canon of plants was employed on both sides of the Atlantic. Further, the Chapter has demonstrated that this inherited body of botanicals allowed for the high degree of flexible adaptation typical of domestic botanical practices in both Anglo, and American, homes.
Chapter 6. Diverging Cultures: New World Botanicals

Five North American plants played a meaningful part within the trans-Atlantic, Early Modern and Colonial Anglo-American domestic botanical culture: lignum vitae, sassafras, sarsaparilla, tobacco, and cinchona. These plants were used as medicines on either side of the Atlantic, often in surprisingly homogenous ways, in both Early Modern English, and developing Colonial American, households. This use illustrates key aspects of the domestic botanical culture, particularly highlighting the shared *materia medica* and commonality of practices and applications, as well as further illustrating the high degree of fluidity reflecting individual household, and specific coterie, adaptation. The Chapter aims to highlight that knowledge and varying use of a series of botanicals to further stress the underlying shared traditions and practices which enabled domestic authors and practitioners to both adopt new world plants, and then adapt them to a variety of situations. It further considers the atheoretical manner in which the domestic culture employed these plants, in contrast to agents employed within learned contexts. The Chapter shows that these new world plants had been fully adopted into the English domestic canon by the late-sixteenth-century, and were in continual use across the chronological and geographical span considered by the thesis. Moreover, the Chapter establishes that these plants represented the entire corpus of North American botanicals to be adopted by the shared Anglo-American *materia medica*, in other words, they were the only American plants to be used consistently in households on both sides of the Atlantic. Finally, the Chapter
charts the appearance of new plants in Colonial manuscripts of the mid-eighteenth-century, considering the implications of this for the broader Anglo-American culture.

A similarly broad range of both domestic and vernacular sources to that consulted in Chapter Five is mirrored here in order to establish what indigenous American botanicals were used in Anglo-American households. Vernacular sources, particularly ‘home physician’ texts, travel writing, and settler texts, as well as literature derived from popular culture, are all consulted in this Chapter in order to establish a broad cultural context from which to view the domestic botanical practice involving these indigenous North American materials. Of sources produced within the household, a range of receipts from both sides of the Atlantic, and spanning as broad a period as possible, have been consulted: this both serves, again, to highlight the primary continuity of domestic Anglo-American practice, while also serving to illustrate emerging differentiation of practice. Lady Grace Mildmay and Elizabeth Freke’s manuscripts are consulted in particular here as Mildmay’s writing represents some of the earliest English use of American botanicals in domestic manuscripts, while Freke’s inclusion of new world botanicals in a range of remedies well illustrates a seventeenth-century practice which is further supported by other authors. These manuscripts are read as repositories of a common botanical knowledge, rather than as exemplars of women’s cultural and social lives and practice. All of the domestic English recipes considered in Chapter Six originate in manuscript

460 Hartman’s *Family Physitian* of 1682 is the text primarily consulted here, though any of the other popular medical texts of the period designed for domestic use could have been used in this capacity equally well, as each contains broadly similar remedies employing virtually identical new world plants and plant combinations.
receipt books, while American receipt sources, which do not survive in as large a number, are supplemented by journals and personal correspondence. This variation in source material reflects differences in cultural norms considered in greater depth in Chapter Two, with English households typically represented by receipt book manuscript sources, while ingress into the culture’s American expression is facilitated by the inclusion of a greater amount of ancillary evidence sources, including journals, letters, and inventories. An allied aim of the Chapter, as with the Chapter Five, is the recovery of Early Modern practices in a trans-Atlantic cultural context, illustrating both the distinctive nature of a domestic culture, and the inherent integrity of its complex practice, as well as introducing further ways in which eighteenth-century American botanical usage begins to diverge from this culture.

Alongside the examination of new world botanical case studies in the context of key elements of domestic botanical culture, the Chapter considers the transmission of new world botanicals and their usage as part of the complex dialogue surrounding grand and petite traditions of Early Modern and Colonial botanical practice and knowledge. The adoption of new world botanicals into European use was one of learned, elite sources informing petite traditions in the first instance, but equally, one from which we can trace emerging new petite traditions formed very much from a bricolage of information, with an evolving differentiation of practice and understanding on both sides of the Atlantic. The American domestic sources, in particular, are interesting for what they tell us of both the shared, and changing, traditions. These sources tend to reflect a common use of botanicals across the English settlement where the inherited
practice was still clearly in use right into the eighteenth-century. The inclusion of new world botanicals begins to broaden out the American pharmacopoeia mid-eighteenth-century however, with interesting implications for transmission and reception which are introduced here, and further explored in the conclusion.

In Edward Winslow’s Puritan settler account, *Chronicles of the Pilgrim Fathers*, Plymouth harbour is described as ‘a bay greater than Cape Cod, compassed with a goodly land’, where the pilgrims found ‘oaks, pines, walnuts, beech, sassafras, vines, and other trees which we know not’. Further inland they found signs of Native American habitation and corn cultivation. Here there is more oak, ‘but not very thick, pines, walnuts, beech, ash, birch, hazel, holly, asp, sassafras in abundance, and vines every where, cherry trees, plum trees, and many others which we know not’. Just as importantly, are the many kinds of herbs we found here in winter, as strawberry leaves innumerable, sorrel, yarrow, carvel, brooklime, liverwort, water-cresses, great store of leeks and onions, and an excellent strong kind of flax and hemp.

The wealth of flora described in these passages clearly illustrates not only Winslow’s attempt to convey the almost excessive profusion of resource proffered up by the new world, but also it’s association with nature, and specifically, with the bounty of nature. Sassafras was one of the five American botanicals already in use within the English domestic canon of medical herbs, and Winslow’s identification of this plant alongside ‘herbs’ more generally spoke directly to the Anglo-American domestic audience, suggesting not only the

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461 Edward Winslow, as cited in Young (ed.) *Chronicles of the Pilgrim Fathers*, p.163.
fecundity of new world botanicals generally, but of medicinal botanicals specifically.\textsuperscript{462}

As seen in Chapter Four, new world botanicals made their way into the old world \textit{materia medica} quickly, becoming staples both in Early Modern English and Colonial American sources. We might fruitfully refer back to the concept of an Atlantic botanical culture to explore the shared Early Modern English and early Colonial American inclusion of new world botanicals, although this model becomes increasingly inaccurate as we look at eighteenth-century Colonial use of native plants. Generally speaking, later American sources use far more new world plants, with some manuscripts, such as Margaretta Prentis 1780s Williamsburg receipt book or Catherine Haine’s Philadelphia notebook of 1776, including indigenous American botanicals in upwards of 50% of the receipts.\textsuperscript{463} These sources also use a wider variety of new world plants, including Poke root, sumac (often referred to as Shoemack’), Maple, prickly pear, and ‘Indian Turnip’, all new world botanicals which are virtually unheard of in the English sources.\textsuperscript{464} This change in the Colonial domestic canon may be read as reflecting wider social schisms in the trans-Atlantic Anglo-American world, which are considered briefly in this Chapter, and in greater depth in the conclusion.

\footnotesize\textsuperscript{462} IBID.\textsuperscript{463} UP.ms 5034(1-4), unfoliated, Margaretta Prentis’ Cookery & Medical Recipes, 1780s; APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, Catharine Haines’ Notebook, 1776. \textsuperscript{464} UP.ms.5034, vol.1, unfoliated, Margaretta Prentis’s Cookery & Medical Recipes, pp.28,29; APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines’ Notebook, 1776. Prentis calls for the use of poke berries (in peach brandy) ‘for the gout or rheumatism’, while Catherine Haines’ ‘Syrup for a cough’ contains ‘one pint of Shoemack’, her simple receipt ‘To Make an Ointment’ contains prickly pear, and her ‘Tetter Ointment’ uses ‘Two Large green Indian Turnips or as many small ones in proportion’.)
Chapter Six focuses primarily on indigenous American botanicals listed in domestic scribal sources from both sides of the Atlantic, and which were clearly used as everyday working botanicals rather than novelty ingredients for occasional use. Indeed, there are only five case study botanicals which were in common trans-Atlantic use from the sixteenth- through the eighteenth-centuries; lignum vitae, or guaiacum, sassafras, sarsaparilla, tobacco, and cinchona. Each of these plants, however, is regularly found in both domestic and vernacular recipes, of both English and American origin, both singly, and in combination with each other on both sides of the Atlantic, and across the time span considered by the thesis. Mary Glover’s English recipe for ‘flower of Oyntment’ of 1688, for example, contains guaiacum, sarsaparilla, and sassafrass with sage, rose, celandine, and elder.\textsuperscript{465} We find a similar recipe in George Hartman’s 1682 English vernacular \emph{Family Physician}, which calls for ‘shavings of Lignum Vitae (which you may have at the Turners) Shavings of Sassafras, Sarsaparilla, of each an ounce’ mixed with a number of old world botanicals (and nitre!) to produce an anodyne mixture labelled ‘Dr. Mynsight his Excellent Remedy for the Tooth-Ach’.\textsuperscript{466} A second recipe in Hartman, ‘My Lord Brunkard’s Diet-Drink for the Scurvey and Dropsie’, instructs the reader to ‘Take of Lignum vitae and Sarsaparilla, of each eight ounces, Sassafras one ounce’. A third calls for ‘Sarsaparilla, Bark of Lignum Vitae, of each three ounces; China-Root, Polipode of the Oak, Sassafrass and sweet Fennel-seed’ along with other herbs and a complex delivery routine in Hartman’s ‘Mr. Barnet’s Excellent Diet-Drink, wherewith he cured three of his Children of the Kings-Evil;

\textsuperscript{465} BL.Add.ms.57944, fol.20r, Mary Glover’s culinary and recipe books, 1688.
\textsuperscript{466} George Hartman, \emph{Family Physitian}, 1682, p.125.
he had it from an able Physician’.

This collection of recipes in Hartman illustrates the complex transmission of information, with similar examples to those found in contemporaneous domestic recipes, and another ‘from an able Physician’. As vernacular medical texts largely mirrored domestic receipt books in terms of their layout, content, and aim (as discussed in Chapter Three), we see that this instance of new world botanical prescribing fully conforms to this complexity of transmission route, with ‘little’ domestic practices running parallel to the ‘grand’ tradition employed by learned physicians.

Sassafras, sarsaparilla, and guaiacum commonly appear in various combinations with each other across both domestic, and vernacular, sources. For example, Anne Glydd’s English receipt book of 1656 contains several recipes with sarsaparilla and sassafras, but no mention of cinchona, guaiacum, or tobacco. The three new world botanicals which Glydd does employ are typically used in combination with other new world plants, though varied combinations. Thus, ‘Dr Ratlif’s method for the Scurvey’ demands that the householder ‘Take Sasaparilla and China roots of each two ounces’.

Similarly, ‘An Exelent thing to sweeten ye Blood’ contains ‘3 ounces of Sasaparila, China root, [and] sasafras’, while her second new world mixture ‘to sweeten the blood’ omits the sassafras, and her receipt for ‘Dr Browns Diet Drinck’ contains China root and sassafras, but no sarsaparilla.

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467 IBID, pp.125, 188. Hartman’s acknowledgement of sources is discussed in chapter three.
468 BL.Add.MS.45196, Anne Glydd’s Receipt Book, 1656-1700.
469 BL.ms.56248, fol.74r, Lady Mary Dacres’ receipt book, 1695. Kay M Moss suggests that ‘china root’ is a common name for sarsaparilla in colonial texts in her book, Southern Folk Medicine, but as the term occurs in receipts along with sarsaparilla, I suspect that it is much more likely to refer to ginseng, as both the Chinese Ginseng, Panax ginseng, and the North American, Panax quinquefolius, were used interchangeably in early modern and colonial medicines. Colonial use of sassafras and sarsaparilla are considered later in the chapter.
470 BL.ms.56248, fol.87r, 92v, 99r, Lady Mary Dacres’s receipt book, IBID.
Penelope Jephson Patrick’s English manuscript of 1672 contains a similar sassafras and sarsaparilla combination aimed at treating ‘An approved remedy for the Stone & Gravel ... Take Sassafras wood sliced thin 6 oz. Sarsaparilla sliced 6 oz ... Of this water take 8. spoonfuls mixed with as much white wine, & two spoonfuls of the Syrup of Marshmallows’.\(^{471}\) This combination prescribing is also seen in vernacular texts, as in the case of Hartman’s ‘comfortable restorative Broth for the Stomach’ which instructs the householder to

Take Sassafrase three ounces, of China sliced one ounce; infuse it all Night in Springwater; 15 the next morning put thereto a Cock well-dressed, and three handfuls of Raisins of the Sun stoned, or of Prunes, or of both if you like it, and a little bundle of Rosemary, Thime, and a Crust of Manchet-bread, and at the latter end a little whole Mace; let it boyl close covered until half is consumed, then strain it.\(^{472}\)

As will be seen in the detailed case studies for guaiacum, sassafras, and sarsaparilla, these botanicals were commonly perceived as a triad of plants, with each occasionally prescribed singly, but with all typically treated as sympathetic compounds, as though their varied combinations produced new, single botanical entities. The transmission and reception of new world botanicals into domestic sources was complex and varied. Whether considered singly, or in combination, the main herbs studied in this Chapter are indicative of the willingness, and capacity, for domestic practices to change and reflect current thinking while retaining the best of their inherited practices.

**Guaiacum, *Guaiacum officinale***

Of those new world botanicals studied in depth here, sassafras, sarsaparilla, and guaiacum were commonly used in combination with each

\(^{471}\) FSL.ms.V.a.396, fol.100r, Penelope Jephson Patrick’s receipt book, 1672.

other. Of these, guaiacum was perhaps the single botanical with the strongest
distinct individual character. Also called Lignum vitae, Guaiac, or Guaiac wood,
*Guaiacum officinale* is an ornamental tree of the West Indies, southern North
America, and northern South America. Both the resin and bark were in use
medicinally during the Early Modern period, though it is the bark which is
typically specified in Early Modern English and Colonial American domestic
sources.\(^\text{473}\) That it does occur in both domestic and vernacular works is
evidenced by Elizabeth Freke’s reference to ‘Lignum-Ditty, or Guacum tree, or
Peck-Wood’ in her ‘interpretation’ of Gerard’s herbal, along with the two entries
included in J.B.’s *English Expositor*, the simple ‘Lignum vita. See *Guaiacum*’,
and a further ‘Guaiacum. A wood called by some *Lignum vita*. It is much used in
Physick against the French disease’.\(^\text{474}\)

Clearly guaiacum was introduced, and adopted, by Early Modern *materia
medica* quite early on, not only as an ‘exotic’ medicament from the new world,
but as a workable material object which formed the basis of treatments aimed
specifically at syphilis, or ‘the French disease’. Lady Grace Mildmay, writing in
late-sixteenth- and very early-seventeenth-century Norfolk, includes a long,
complex set of instructions on how to prepare ‘The oil and water of guaiacum’,
using ‘first 3 grains or 6 grains or 10 grains, according to the strength of the
party’ (presupposing both that the producer is able to distinguish differences in
botanical strength generally, and familiarity with the guaiac product specifically)

\(^{473}\) The ‘bark’ used here was typically material taken from either the inner ‘heartwood’ of the
tree, or the outer layer of the root, and rarely refers to the external cortex we associate with the
term.  
Expositor: Teaching the interpretation of the hardest words used in our Language. With Svndry
Explications, Descriptions, and Discourses, London, Printed by Iohn Legatt, 1621.
of ‘well ectified precipitate’, and dissolve it ‘either mingled with treacle, mithridate, or cardus water’. Her administering and dosage instructions are complex and numerous, with various differentiations based on both patient and ailment. She recommended its use as a pyretic and in the treatment of ulcers, ‘knobs and swellings’, and sore throats. The first of these is an inferred use, for she doesn’t actually specify its first, or primary, action, rather relating guaiacum’s ability to provoke a sweat and the patient’s expected response to it: ‘then dry away the sweat, put on a clean shirt and then go abroad about your business if the weather be warm, if cold keep the house’. This suggests that the plant’s sudurific action is widely accepted and known culturally. Indeed, the assumption of shared knowledge here which is the product of a communally based tradition and practice means that Mildmay can give instructions on what to do about the sweaty clothing, without having to first identify that sweating is an expected outcome when medically administering guaiacum. This level of both practicality and assumed knowledge is suggestive of Mildmay’s personal experience of working with this specific botanical, and reflects back on the key aspect of flexible individualization common to the shared ‘little’ tradition of domestic botanical culture.

A very similar recipe to Mildmay’s late-sixteenth-century English recipe may be found in Catherine Haines’ late-eighteenth-century Philadelphia manuscript. Haines writes:

To make the Tincture of Guayac. … Infuse in a Bottle containing about 3 pints of Rum, 2 Ounces of Gum Guayac pounded; expose this bottle, well corked, to the Sun for seven or eight days, Turn it round & shake The Liquor from time to time, to dissolve the Gum more easily: observe

not to fill the bottle entirely, lest the fermentation should burst it. strain this Liquor Through some fine Cotton or soft paper: put it in some common bottles, closely corked; when it convenient make your stock, for the longer is kept the better. The dose is a table spoonful be taken every morning fasting. 

Apart from the difference in menstruum (or base liquid used to extract and preserve the botanical ingredients) previously discussed in Chapter Four, these receipts are remarkably similar. Both are, to all intents and purposes (menstruum aside) ‘simples’, that is to say, based almost entirely on the medicinal action of a single botanical agent: in this case, Guaiacum. Both highlight the need to ‘precipitate’ or ‘shake’ the product well in order to fully dissolve the dried botanical material in the alcoholic extract, and each gives instructions as to dosage. This is particularly noteworthy as neither author universally provides this amount of detail in all of her receipts, suggesting that guaiac wood presented particular challenges for domestic production and use, though not, as witnessed by its continued use, insurmountable ones. The continuity, not only of guaiacum, but also of an unusually detailed set of instructions pertaining to its preparation illustrates the on-going nature of domestic practice in this instance despite the geographical and chronological distance between authors.

A high degree of consistency in both the use and the administration of Lignum occurred across periods and domestic/ vernacular authors reflecting an experiential appreciation of the plant’s action. For example, guaiacum was often specified in both receipts and vernacular texts as a ‘blood sweetener’, as seen in Mary Doggett’s English receipt ‘To Sweeten The Blood’ dated 1604, 

476 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines’ Notebook, 1776.
which uses ‘Lignum vita Chips … Sassaphras Chips… [and] Sarsaparilla’.\textsuperscript{477} In
humoral medicine a reference to the blood’s sweetness would have held
theoretical information about the healthy balance of a patient’s bodily fluids; for
domestic practitioners, and in common social parlance more generally, the term
probably referred far less specifically to questions of humoral balance, and
more to the idea that blood was more ambiguously seen as either a conduit, or
an indicator, (or both) of ‘healthiness’ generally. Thus a receipt to ‘sweeten the
blood’ was simply one which was capable of improving, or restoring, health to
the individual. In the case of guaiacum, its general ability to ‘sweeten the blood’
was associated with treatment of syphilis, or the ‘French disease’, specifically,
rather than with a theoretical balancing of body along humoral lines.

When taken in quantity, as noted in Mildmay’s account of the botanical,
Guaiacum provoked copious sweating associated with the cathartic breaking
point, and hopeful patient improvement, which was commonly seen in infectious
diseases. In the case of the ‘French disease’, or syphilis, the lack of obvious
infectious symptoms, including fever, in the primary and secondary phases was
disturbing, and an ability to provoke a physical reaction with the use of Guaiac
wood would have been perceived as remedial in itself. Indeed, its action as a
pyretic could have been interpreted by Early Modern and Colonial authors in a
number of manners. For humoralists the temperature would have indicated a
change in humoral balance and energy within the patient; but for those
prescribing outside of this theoretical model, there may well have been an
anecdotal reasoning: the use of guaiacum was seen to be effective; an

\textsuperscript{477} BL.ms.A27466, fol.154r, Mary Doggett, \textit{Her Booke of Receipts}, 1604.
associative ‘like for like’ rationale: fevers often presage a dramatic improvement in a patient’s condition, and guaiacum provokes a fever; or even a simplified domestic version of prevailing elite theory correlating to the theory of distillation. Here the distilling off of dross seen in the preparation of botanical waters is equated to the distilling off of dross seen in extreme perspiration. In this case, the remaining liquid left over at the end of the process, whether aqua mirabilis or blood, was seen to be perfected, or ‘sweetened’. Lignum’s consistent appearance in Anglo-American domestic sources combined with a lack of theoretical rationale accompanying these guaiac-based recipes suggests that questions surrounding ‘why and how’ guaiacum worked were largely irrelevant to the culture as a whole; what was important to these authors was the domestic experience that it did work.

Guaiacum was not solely used for the treatment of syphilis, however. Elizabeth Freke wrote: ‘Off. Guaiacum …In Cureing off the French pox there is nor Medicyne better, then the decoction of Guaicum’ she went on to add

Itt is all for exelentt In a Dropsey, and for An Agume, and the falling sickness. And for dissases of the Blader & Reyns; and for Paines In the Joyntts. And for all diseases proceeding from Cold Tumours and Wynd. ~ proved ~.

Moreover, Freke’s use of Lignum vitae in treating diseases of the urinary system as well as for the treatment of rheumatism, or ‘paines in the joyntts’, is mirrored in the majority of domestic manuscripts, although Freke’s text is atypical in its humoral interpretation of the plant. A typical example of this non-theoretical application of guaiacum may be found in one of Margaretta Prentis’

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478 BL. Archives, ms. A45718, fol.150,167, Elizabeth Freke, miscellany, September 1684 - February 1714.
two eighteenth-century anti-rheumatic receipts from Williamsburg with a simple ‘Rheumatism: ... Gum Guai-cum’ equation. Without a learned theoretical framework or rationale for use of the botanical, Prentis’s purely pragmatic guaiac wood recipe which details how to prepare and apply the botanical is typical of the domestic botanical practice.

Moreover, guaiacum’s use as an anodyne and anti-inflammatory across the period may be seen in a wide range of domestic recipes, and largely mirrors current pharmacognosical thinking and research on the plant’s known actions. Guaiac wood was widely recommended for the treatment of physical pain, particularly that pain associated with rheumatic conditions, but also bruising and trauma more generally. In England, 1626, Mary Baumfylde wrote that

For ye Rheumatism/ half an ounce of Gum guaicum steept in half a pint of best brandy Take a Teaspoonfull in a Glass of spring Water in a morning fasting & at 4 aclock in ye afternoon it an Excellent Remedy.

Margaretta Prentis utilized 2 oz Gum Guaicum in an internal remedy ‘For the Reumatism’ in Colonial Williamsburg in the 1780s, and Eliza Pickney, writing in mid-eighteenth-century Carolina, instructs her reader to

Take one Ounce of Gum Guiacum, powder it very fine, and take as much as will lie on an English Silling in a glass of Water night and morning. Repeat the same quantity every Spring and Fall, tho’ you may be free from pain, and it will prevent its returning.

A slightly unusual recipe may be seen in Mary Faussett’s rheumatic receipt combining Guaiacum with antimony and elder in the Hepperton manuscript from 1680s England titled ‘a very Good thing, to cure Rhumatick pain’. This

479 UP.ms.5035.2, unfoliated, Margaretta Prentis’ Cookery & Medical Recipes, 1780s, p.40.
480 FSL. V.a.456, Mary Baumfylde, medical cookery receipts, 1626, pdf.77.
481 UP.ms.5034.2, unfoliated, Margaretta Prentis’s Cookery and Medical Recipes, 1780s, p.40; SCHS.ms.43/2178, Eliza Lucas Pinckney’s Household Book, 1756.
instructs the householder to ‘Take Gum Guaiacum one Scruple … Cinnabar or Antomony, in powder, half a Conserve of Hipps, half a Scruple Surup of Elder, a suficiant quantity, to make it into a Boluss’. That Early Modern English and Colonial American women were using this botanical in such a wide range of conditions shows a clear empirical understanding of its anodyne effect derived from practical experience in using the plant across the whole of the domestic culture, as well as by individual practitioners.

An atypical remedy employing guaiacum in the treatment of rheumatic conditions may be seen in Catherine Haines’ eighteenth-century American receipt for ‘a Cure for the Reumatism’:

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\begin{align*}
&\frac{1}{4} \text{ of Lignum vity chips.} \\
&\frac{1}{2} \text{ of Stoned Reasons} \\
&a \text{ Large handful of Burdocke Root/ Sliced all put in a Gallon of wok & stewed till it becomes to half a gall if thougth best to do it In a Iron pott & drink } \frac{1}{2} \text{ pint of it about milk warm about 11 a Clock & 4 In the afternoon.}
\end{align*}
\]

The combination here is unique amongst the domestic sources consulted. Guaiacum typically occurred with other new world herbs, particularly sassafras and sarsaparilla, though the inclusion of old world spices was common also, This recipe of Haine’s further includes both antimony and elder, making it an atypical example of domestic prescribing. Indeed, in over one hundred manuscripts consulted, this is the only example of this particular old world, new world, botanical and ‘chymical’ combination. While the inclusion of antimony strongly implies both that Haines was adopting ‘learned’ medical practices (the use of chemical compounds along with the traditional plants is seen in virtually

482 WL.ms.7999, Vol.3, unfoliated, Hepperton Receipts, p.49.
483 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, Notebook, 1776. ‘Stoned reasons’ probably refers to pitted plums here, though typically ‘reason’ would refer to raisons, or dried grapes.
all medical texts from the mid-seventeenth-century, but only in a minority of
domestic sources), and has access to an apothecary for her supplies, the
singularity of raw materials combined in this recipe indicates a personal
differentiation and appropriation typical of domestic prescribing, again
illustrating the willingness, and ability, of individual practitioners to adapt the
shared domestic practice.

More common are those receipts in both English and American sources
calling for the use of guaiacum in a wide range of practical remedies, including
scurvy and cholic. For example, Penelope Jephson Patrick recommended its
use with sarsaparilla in ‘A drink for the Scurvy to be taken Spring & fall … Take
of the Shavings of Guiacum, of the roots of Sarsaparilla cutt Small, of each two
ounces’, while Hannah Huthwaite’s early-eighteenth-century Colonial script
contains several remedies to treat ‘cholick’, three of them containing Guaicum,
Katherine Davies’ undated English receipt book, meanwhile, contains several remedies
containing gauaicum, including ‘Lady Giffords Rx for ye Cholick Gravell, Stone
in ye Kidneys, Surfit, or any ill Digestion of ye Stomack’, and ‘Daffys Elixir’. 485
The range of conditions treated here echoes that willingness of domestic
practitioners to harness the anodyne action of guaiacum in the treatment of
several different conditions again effectively illustrating both the flexibility of the
broader domestic practice, and the empirical basis of personal experience
underlying that flexibility.

484 FSL., ms.V.a.396, Penelope Jephson Patrick, receipt book, 1672, pdf.100.b; Win.doc.193, unfoliated, Hannah Huthwaite’ Recipe Book, c.1720, p.64,65,67.
485 BL.Eg.ms.2214, fol.173v, 174r, Katherine Davies’ Medical & Cookery Recipes, 1638.
The use of Guaiacum as a urinary system stimulant, as seen in Davies’ manuscript, acting both as a diuretic (hence it’s use in curing ‘dropsie’) and as a nephrolipbic, was common across the breadth of Early Modern and Colonial society, indeed, even vernacular texts commonly prescribed Guaiac in this manner. For example, Hartman’s seventeenth-century tome, The Family Physician (1682) includes two remedies for ‘dropsy’ using guaiacum; a ‘Mochoacan Ale to purge the Dropsie’ which call for ‘four ounces of Mochoacan, three ounces of Hermodactyls, three ounces of Lignum vitae, three Races of Ginger, two Nutmegs’ which he assures us

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is \text{ so wholsom and effectual, that if it be drunk a fortnight at Spring and Michaelmas, it will not only take away the Causes of the great Dropsie, and all kind of Agues, the Stone, and Accidents of the Brain, and infirmities of the Spleen, but also restore the Complection to an excellent Habit and Colour, defending the Body from a number of Inconveniences.}\]

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A similar, second, dropsy remedy found in Hartman titled a ‘very good Diet Drink against the Dropsie’, combined Guaiacum with Sassafras and several other botanicals in ‘two Gallons of Ale, and six quarts of white wine’. This recipe is mirrored in Anne Glydd’s contemporaneous English receipt for an ‘an Exsient Diet Drink for the Evil of any sharp humour … Take of the shavings of Guaicum 2 drams: Sarsaparilles 2 ounces’. Along similar lines, Mary Chantrell’s ‘Most Excellent Recept for Dropsy’ calls for ‘Sarsaperilla … Lignum vita: or: guiacum … Sarsafras’ to which Juniper berries are later, added, and Anne Glydd’s

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486 Dropsie = oedema, or accumulation of fluids, typically in the lower limbs (though it can occur anywhere if the venous or lymphatic systems are impaired). Nephrolipbic = something acting on kidney stones, hopefully to dissolve them.
488 Hartman, Family Physician, 1682, p.39. It is interesting to note that many of Hartman’s recipes containing sassafras, sarsaparilla, and Lignum vitae (whether solely or in varied combinations) also contain purgatives, whether emetics such as castorum (castor oil) or laxatives (such as senna), echoing to some extent the purgative nature of Fausset’s rheumatic remedy containing antimony and elder, and again reinforcing the likelihood of transmission between the vernacular and the domestic in that instance. BL.ms.45196, fol.42r, Anne Glydd’ receipt book,1656.
manuscript contains a receipt for ‘An Exselent meddiciin for to Take away a waterish humour and swelling in the Legs’:

Take a Gallon of spring water putt Therin half a pound of Guaiacum it is also called Lignum vita also put in a good ounc of sweet fennel seeds Bruised and two ounces of licoras sliced put thes in a pipsum or somewhat that you can well close and let it stand and stew gentlely until it be wasted to a pottel then strain it and keep it close stoped in a bottle and it if be a woman let her drink a quarter of a pint every morning fasting and as much Every afternoon at four a clock until it be done and if you find any good make the same proportion a gain and take it until the swelling be quit gone a man may take almost half a pint at a time. 489

Lignum vitae’s ability to promote perspiration makes its use in these domestic recipes to treat dropsy, or oedema, eminently sensible, again illustrating a pragmatic approach to prescribing grounded in both personal, and communal, experience. In employing Guaic to ‘provoke’ the loss of excess fluid, each of these remedies equated the herbs’ observable actions on the body with associated ‘healing’ crises. In the treatment of ‘dropsy’, the plant’s diuretic action would have been literally associated with an observable reduction in the size of the patient’s swollen legs, while the production of sweat would have been seen to have commonly presaged recovery from feverish conditions. In both cases this ability to stimulate the outpouring of liquid excretion was translated into a healing property directly associated with the botanical agent itself.

What is notable in all of these Anglo-American remedies, regardless of geographical or chronological origin, is the great range of use to which guaiacum was put. Clearly it was appreciated as a sudorific agent capable of

489 WL.ms.1548, fol.73, Mary Chantrell’s Receipt Book; BL.ms.45196, fol.41v, Anne Glydd’s receipt book, 1656.
provoking profuse sweating. This single action on the part of the plant may therefore have been perceived by Early Modern English and Colonial American practitioners as an effective remedial ‘tonic’, capable of mimicking and provoking the body’s natural healing crisis (sweating was associated with the fevers attending illness, and an agent which brought about similar symptoms may have been seen to be stimulating the body’s own defences). Likewise, it is possible that guaiacum was employed in some instances as a humoral agent capable of moving excessive heat and liquid out of the body, thus restoring balance. It is perhaps most likely, however, given that this plant was derived from an atheoretical Native practice, that the original application was based on empirical practice: it was known to help people recover from certain ailments. The domestic recipes suggest Anglo-American domestic practitioners tended to employ the botanical in this manner: it was used in a variety of situations because it was perceived to work. As with its cohorts, sassafras and sarsaparilla, guaiacum was typically seen by domestic practitioners as a polychrest botanical with its many applications tied to its physiological actions rather than as a humoral agent tied to theoretical models. Guiac was readily adopted into the domestic canon, and widely employed across the culture, because domestic authors could see its effects on the body, and thus perceived a therapeutic benefit to its use.

**Sassafras, Sassafras albidium**

In the spring of the year,  
When the blood is too thick,  
There is nothing so rare  
As the sassafras stick.
It cleans up the liver,
It strengthens the heart,
And to the whole system
New life doth impart.
Sassafras, oh, sassafras!
Thou art the stuff for me!
And in the spring I love to sing
Sweet sassafras! O thee.\footnote{James B. Elmoke, \textit{Love Amongst the Mistletoe}, self-published:Indiana, c.1830. Library of R. W. WHITTINGHILL. A number of poems dedicated to the virtues of Sassafras may be found in Elmoke's compilation, including 'In the spring of the year', 'Dudes and Sassafras', and 'Indiana'.}

James Elmoke’s early nineteenth-century ode to sassafras typifies Anglo-American cultural approbation of the plant as a popular cultural artefact and medicinal agent. Sassafras is a native tree of the entire North American eastern seaboard, and was first ‘discovered’ and named by the Spanish botanist and herbalist, Nicolás Monardes (1493 – 1588).\footnote{Maude Grieves, \textit{A Modern Herbal}, (Tiger Books, 1996), p 327.} By 1621, J.B.’s \textit{English Expositor} included the following entry:

\begin{quote}
Sassafras. A tree of great vertue, which groweth in the Florida of the West Indies: the rinde hereof hath a sweete smell like Cinnamon. It comforteth the lyuer, and stomack, and openeth obstructions of the inward parts, being hotte and dry in the second degree. The best of the Tree is the roote, next the boughes, then the body, but the principall goodnesse of all resteth in the ryndes.\footnote{J.B., \textit{An English Expositor}, 1621.}
\end{quote}

By the late-seventeenth-century, the English explorer, John Lawson wrote in his \textit{New Voyage to Carolina} that

The Vertues of Saffafras are well known in \textit{Europe}. This Wood sometimes grows to be above two Foot over, and is very durable and lasting, used for Bowls, Timbers, Posts for Houses, and other Things that require standing in the Ground. 'Tis very light. It bears a white Flower, which is very cleansing to the Blood, being eaten in the Spring, with other Sallating. The Berry, when ripe, is black; 'tis very oily, Carminative, and extremely prevalent in Clysters for the Colick. The Bark of the Root is a Specifick to those afflicted with the Gripes. The same in Powder, and a
Lotion made thereof, is much used by the Savages, to mundify old Ulcers, and for several other Uses; being highly esteem'd among them.\textsuperscript{493}

This early popularity of sassafras as an \textit{American} botanical may be further seen in the twelve references in Winslow’s \textit{Chronicles of the Pilgrim Fathers}, including description of first landing at Cape Cod:

\ldots in the bay, which is a good harbour and pleasant bay …. Compassed about to the very sea with oaks, pines, juniper, sassafras, and other sweet wood’ Young notes that by 1824 ‘there are a few sassafras bushes’ still standing around the harbour, ‘but no juniper’. The juniper was probably the red cedar. Josselyn, in his New England’s Rarities, published in 1627, says, page 49, ‘Cardan says juniper is cedar in hot countries, and juniper in cold countries; it is here very dwarfish and shrubby, growing for the most part by the sea-side’. And Wood, in his New England’s Prospect, printed in 1639, says, p.19, ‘the cedar tree is a tree of no great growth, not bearing above a foot and a half at the most, neither is it very high. This wood is of color red and white, like yew, smelling as sweet as juniper’.\textsuperscript{494}

In his nineteenth-century commentary on Winslow’s work, Alexander Young also notes how frequently sassafras is mentioned in the chronicles, writing in one instance that

this is the third time the sassafras has been mentioned. On the first discovery of America, great medicinal virtues were ascribed to the bark and roots of this tree, and ship-looads of it were exported to Europe. Monardes, a Spanish physician of Seville who published in 154, his second part of his ‘Historia medicinal …’ … [mentions] its great efficacy in dropsies, agues, liver-complaints, &c. … The roots were sold in England at three shillings a pound in Gosnold’s time, (1602), who partly loaded his vessel with it from one of the Elizabeth islands. Brereton, the journalist of that voyage, speaks of ‘sassafras trees, great plenty, all the island over, a tree of high price and profit’; and Archer, another of the voyagers, says that ‘the powder of sassafras in twelve hours cured one of our company that had

taken a great surfeit by eating the bellies of dog-fish, a very
delicious meat’..

The breadth of employment associated with sassafras suggested in these vernacular writings is mirrored in domestic sources on both sides of the Atlantic: Sarah Longe’s English receipt for ‘An approved medicine called purging aile, to be taken every spring and falle’ includes a number of botanicals, including Bayberries, Aniseed, ‘Ruburb’, and ‘Sasafras’ wood, while Rachel Stout Allen’s ‘Receit for a Cancer’ written in the Colonial Carolinas also includes sassafras.

Sassafras was known to, popular with, and employed by authors of both Colonial and English domestic sources. Along with the Colonial receipts included in the Colonial manuscripts of Eliza Pinckney, Harriet Pinkney Horry, Rachel Stout Allen, and Dorothea Christina Schmidt, sassafras is also used in the seventeenth-century English receipt books of Anne Glydd, Lady Mary Dacre, and Penelope Jephson Patrick. Each of these recommends a similar spread of use suggesting a shared, communal appreciation for the plants’ medical action. For example, the late-seventeenth-century English householder, Elizabeth Freke, writes knowledgably about the plant:

Off Sassafras … Sasafras both wood Root and Barks is Much Used. for the Hipp Goute. and for obstructions, & for the French

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495 Edward Winslow, Chronicles of the Pilgrim Fathers, Alexander Young, ed. IBID, p.130, notes: ‘See Purchas, iv.1646, 1649, 1653; Mass.Hist. Collections xxiii.257; Michaux’s Sylva Americana, ii.144; Bigelow’s Medical Botany, ii.142, and Plants of Boston and its Vicinity, p. 170. For the use of Monardes, and of ‘Frampton’s Ioyfull Newes out of the New-found Worlde’, which is nothing but a translation of it, printed at London in 1596, I am indebted to the rich library of Harvard College’. Young is referring to Nicolas Monardes’ work, Dos libros, el uno que trata de todas las cosas que se traen de nuestras Indias Occidentales, que sirven al uso de la medicina, y el otro que trata de la piedra bezaar, y de la yerva escuerconera. Sevilla: 1565), first translated into English in 1577 by John Frampton and published as Ioyfull newes out of the newe founde worlde, wherein is declared the rare and singular vertues of diverse and sundrie hearbes, trees, oyles, plantes, and stones, with their applications, as well for phisicke as chirurgerie (London).
Pox. Its expels wynd from the Wombe, Takes off –dities; provokes the Couses Wonderfully. & makes Lean people Fatt, & Cures Barreness. & good against Contagious Diseases. And Cold Diseasess in the Stomack. helps Concocttion and stops vomiting. Itt Cures the head Ach. Expells Gravell, & taks off the head off –ryne. 497

Echoing Lawson’s travel writings and Winslow’s settler text in its descriptive tone, while placing this within a specifically medical context and format, Freke’s description of sassafras shows a willingness and ability on the part of domestic authors to adapt information from a variety of sources into an existing, familiar format. Nor is this combining of source information unique to Freke. The seventeenth-century Boyle family manuscript contains a similar description based on descriptive medical information:

Sassafras opens Obstructions or Stopplings, Strengthens the Breast exceedingly if it be weakened through Cold, breaks the Stones, Stays Vomiting, provokes Urine and is profitable in the Morbus Gallicus. 498

In each of these manuscripts we see a transmission and reception of knowledge through differing cultures and routes. The natural history and settler writing showcasing knowledge of a native North American tree as example of both American flora and indigenous medicine has been appropriated, synthesized, and adapted into the private sphere of the domestic botanical culture. Indeed, the complexity of transmission for Early Modern and Colonial medical knowledge is highlighted by the adapted use of these American plants. As in the case of guaiacum, the knowledge of sassafras as a medical agent was initially derived from an oral Native American practice, this initial oral communal

497 BL. Add.ms.45718, fol.149, Elizabeth Freke, miscellany, September 1684 - February 1714. Freke further writes in this recipe of sassafras ‘Aand in Shortt is good for all Diseases shall proceed from cold & thin Humours. a dragma of itt taken att a time, or boyled & worked in yr Best. ~ ~’ clearly placing the plant within a Galenical framework atypical of domestic authors, yet demonstrating the willingness of Freke to adapt adopted material to a working context familiar to her; as we see domestic practitioners doing repeatedly in a variety of ways.

498 WC.ms.1340, fol.2v, Boyle family receipt book, 1675-1710.
knowledge was then appropriated by elite Europeans, categorized and written about by learned men, and accessed by the domestic Anglo-American culture via these printed sources. From the indigenous use noted by Winslow through to Freke and the Boyle family's medical placing of the plant, the route of sassafras as a botanical entity within this instance of Anglo-American practice is parenthesized by communal, domestic cultures on either side of the Atlantic.

At the centre of this complex transmission of botanical information, however, lie those vernacular works accessed by domestic readers on both sides of the Atlantic. These works serve both as templates of domestic use, and as exemplars of the existing practice. Indeed, sassafras may be found in a substantial number of receipt books, both English and Colonial American, in a variety of remedies aimed at treating a range of ailments. The Allen manuscript of South Carolina calls for sassafras as one of five herbs in ‘A Receit for a Cancer’, and William Lenoir, writing in North Carolina at the very end of the eighteenth-century, recommends it as one of eight herbs which are added to ‘rusty iron’ and decocted into ‘strong Vinager’ as a ‘Cure for Dropsey or Kickhicsay’, while the eighteenth-century Swedish naturalist, Peter Kalm, noted that it was commonly used by southern Colonialists as a vermifuge, as well as useful in the treatment of dropsy. This breadth of use is further echoed in the

499 As noted in chapters two and three, there are numerous examples of domestic recipes predating vernacular examples.

500 NCSA.ms.Coll.1467, Allen Family Papers, Rachel Stout Allen, Medical Memorandum, (c.1780s); SHC.ms.Coll.00426; 3.1.7.1, 3.1.7.3, Lenoir Family Papers, William Lenoir. Medical Memorandum, 1798-1839; Kalm, Peter. Peter Kalm's Travels in North America; containing its natural history, and a circumstantial account of its plantations and agriculture in general (London: William Eyres, 1770); Kalm’s recommendation of sassafras in the treatment of dropsy was noted in the colonial Encyclopaedia; or, A dictionary of arts, sciences, and miscellaneous literature ... Vol.IX (Philadelphia: Printed by Thomas Dobson, 1798) p.602: ‘Professor Kalm informs us, that a decoction of the root of sassafras in water, drank every morning is used with success in the dropsy’.

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vernacular medical texts. For example, Hartman’s *Family Physition* contains a number of recipes containing sassafras, in various combinations with other old and new world herbs, often as a stomachic, though its use was not limited solely to this purpose. As already seen, sassafras was commonly employed as both a restorative and as a ‘cleansing’ botanical, often in combination with sarsaparilla and ‘china root’. It was also utilized in this manner on its own, as recommended by Hartman in his ‘Excellent purgina Ale or Diet-Drink for Spring or Fall’ which argues that ‘This is excellent against Dropsical Humors to cleanse the Blood, and purge Flegm, and Coller, expellth Winds in the Stomack, and very much strengheneth’\(^501\). Sassafras was used in a wide range of seemingly unrelated ailments; Hartman is here recommending it simultaneously as a blood cleaner, expectorant (capable of purging phlegm), anti-spasmodic and carminative. As is the case with domestic use of guaiacum, Hartman’s remedy is here perhaps less suggestive of a polychrest, ‘cure all’, formula than it is an awareness of the plant’s actions which affect the body in various ways. In this light, the vernacular text may be again read as reflecting a pragmatic domestic culture built upon observed application and experience.

Domestic authors similarly did use sassafras in a wide range of remedies. For example, Lady Grace Mildmay’s late-sixteenth-century English manuscript lists sassafras as a sudorific (or diaphoretic) agent in the treatment of the ‘falling sickness’, while the seventeenth-century English author, Elizabeth Freke, includes sassafras as one of the primary ingredients of her diuretic ‘Electtuary of Juniper’ receipt:

128. An Electtuary of Junper, Berryes (att. Sharrass) take of Ripe Junypter Berryes one pound, Faire Spring Watter Two pounde, Bruise them very well And Infuse them (_____ ) water then press itt outt after six or seven hours Infusson, and Add to Itt one pound of fine whitt Sugar, & Boyle itt to a Sirrup, then Ad Forte ounces of the Electtuary of Sassafrass Callamas Aramaticus In Powder a Dragme and A halfe; ( _____ ) a Dragme And Saffron Two Scruples; Mix them well together In the powders And putt it up Close for your use ( __________ ) Whose virtuss Are …. Itt provokes uriine, powerfully and brings Away Sand. And Gravell, and itt is the Better iff you add (______ ) the powder of Winter Cherries three ounces, & an ounce of the powder of wood= Lice, & for take every Morning and Night on dram In the Wine of Juniper Berryes.  

Both Mildmay and Freke’s recipes are using sassafras as an ‘eliminative’ botanical, that is to say, each includes it as part of a recipe intended to help the patient pass toxins out of the body, either by sweating, or by passing urine. Margaret Boyle’s employment of sassafras in her ‘New Tea good against ye Gout’ also employs this ‘cleansing’ and ‘flushing’ botanical. As a broad remedial approach, ‘elimination’ could be, and was, applied to a wide range of ailments, largely as a means of mimicking the body’s own response to illness.

In particular, the perceived ability of sassafras to promote diuresis seen across domestic recipes becomes increasingly interesting in consideration of the plants’ supportive actions. Of these, its relaxant effect on smooth muscle tissue, as well as a noted anodyne effect, would further the remedial action and value of the plant. For example, Freke’s use of sassafras to treat kidney stones reflects the ability of the plant to both relax the kidney tubules enough to aid in the passing of stones and simultaneously helping to relieve the pain, while its action in increasing urine flow would have aided in ‘flushing out’ the stones.

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503 WC.ms.1340, fol.6v, Boyle Family receipt book, 1675-1710.
Indeed, in its combined actions, sassafras is the ideal Early Modern anti-lithic botanical. Further, the soothing, relaxing qualities of sassafras would explain its wider application in cases of cholic (intestinal cramping) and unproductive coughs along with more specific botanicals aimed at treating the specific ailment, as seen in Hartman’s ‘Excellent purging Ale’\textsuperscript{504}. Moreover, this ancillary role, whereby the new world sassafras was used as an adjunct to established old world herbs, may be seen in anti-lithic remedies where it is itself a specific, as is the case in Jephson Patrick’s English recipe for ‘An approved remedy for the Stone & Gravel’ of 1672 which uses sassafras (and sarsaparilla) along with ‘Syrup of Marshmallows’, marshmallow having a long-standing reputation for easing the passing of stones.\textsuperscript{505} Not only was sassafras being adopted into existing ways of presenting, and thinking about, botanicals by domestic authors, but also equally, Early Modern and Colonial practitioners were adapting it to the existing canon of plants and uses.

Sassafras, (along with sarsaparilla, which is often linked with it in usage), was commonly employed in this supportive, adjunct role in Early Modern domestic prescribing. It is this anodyne quality which may explain the plants use in such a wide variety of ailments on both sides of the Atlantic. As with lignum vita, the anodyne action of sassafras was commonly applied to a range of ailments. For example, Marguerite Prentis’ Colonial American book of Cookery & Medical Recipes of the 1780s contains a recipe for ‘sassafrass root, Grape Vine root, & wine leafs boiled’ to be used in treating a sore breast, while she calls for a simple aqueous extract made from ‘the inside Bark of Maple and

\textsuperscript{504} Hartman, Family Physicians, Op cit., pp.184-185.
\textsuperscript{505} FSL.ms.V.a.396, fol.100r, Penelope Jephson Patrick’s receipt book, 1672.
Sassafrass’ in the treatment of sore eyes. This application of the plant in the treatment of a quite broad range of ailments where pain relieving qualities would be of benefit, most notably for a ‘sore breast’, and in the treatment of cancer, is typical of the pragmatism found in domestic prescribing. Clearly there is a strong practical element to the plant’s use in each of these instances: the plant seems to be employed not so much as a ‘curative agent’ for specific diseases, but rather as an agent with very specific properties which might be applied in a number of instances. This very adaptability of sassafras is not only an indication of the plant’s varied actions, but equally, an indication of the flexibility, experience, and ingenuity of the practice employing it.

Sarsaparilla, *Smilax regelii*

As was seen with both guaiacum and sassafras, sarsaparilla was both adopted into, and used throughout, the Anglo-American canon in highly varied ways. Equally, it is a tree of the northern Americas, whose medical use was known and employed by indigenous peoples. In Edward Phillips’ *New World of English Words*, printed in 1658, sarsaparilla is simply described as the root of a certain tree called *Smilax Peruviana.* There was clearly some earlier confusion in English apprehension of the plant and its origins, however, as illustrated by the definition for sarsaparilla to be found in J.B.’s *An English Expositor* of 1621: ‘Sarcarillia. A plant of India, the roote whereof is often

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506 UP.ms.5034-3, unfoliated, Margareta Prentis, *Cookery & Medical Recipes*, 1780s, pp.23, 24.
A quite endearing reference to American botanicals is to be found in William Wood’s description of what may be expected from the new world, when he refers to ‘saxifarilla’; which is possibly a combined sassafras-sarsaparilla hybrid which he is further confusing with saxifrage:

the ground affords very good kitchen gardens for turnips, parsnips, carrots, radishes, and pumplings, muskmelon, isquouterquashes, cucumbers, onions, and whatsoever grows well in England grows as well there, many things being better and larger. There is likewise growing all manner of herbs for meat and medicine, and that not only in planted gardens but in the woods, without either the art of the help of man, as sweet marjoram, purslane, sorrel, penerial, yarrow, myrtle, saxifarilla, bays, etc.

A confusion occasionally mirrored in domestic sources where sarsaparilla and sassafras are conflated, as seen in Catharine Haines’ 1776 Philadelphia recipe ‘To Cure the S’ Vitas Dance’ which calls for ‘Sassaparilla Root’. Sarsaparilla, Smilax spp., may refer to a number of central and North American plants of the smilax genus, though that most commonly referred to in horticultural books from the period comes from the West Indies.

As a botanical with as many applications as guaiacum or sassafras, the use of sarsaparilla allowed domestic practitioners to demonstrate both their own personal agency and their mastery of domestic prescribing. Lady Grace Mildmay recommended sarsaparilla for the treatment of the pox, combined with

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509 ‘Saxifrage’ refers to members of the saxifrage family. Saxifraga oppositifolia grows across the northern hemisphere, including northern North America and southern England.
510 ‘Isquouterquashes’ almost certainly is an early English attempt to translate indigenous name for what became ‘squash’. William Wood, Alden T. Baughan, New England’s Prospect, London, 1634, p.36. This passage has also been considered in chapter three.
510 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, Notebook (Philadelphia 1776).
both senna (a laxative) and a range of carminatives.\textsuperscript{511} Mildmay also related the remedy prescribed for a patient with palsy by a certain Mr Napper, ‘... take of sarsaparilla, china [root], lignum vitae, of each 1 ounce ...’ as a means of relieving the side effects of said disease in late-sixteenth-century England, notably his skin which ‘was then much broken out with itch, boils and scabs’. Not only does sarsaparilla act as an anodyne agent (similar, if slightly weaker, to the action of sassafras), but it is antipruritic (soothes itchiness), and stimulates the skin’s own healing mechanisms. As a result, Mildmay’s recommendation of sarsaparilla in both recipes shows a pragmatic, empirical approach to its use typical not only of Mildmay, but of domestic practitioners more widely.

Like sassafras, sarsaparilla found its way into Early Modern English domestic use relatively quickly and easily, as shown by Mildmay’s sixteenth-century familiarity with the plant. And indeed, as already noted, several recipes combine sarsaparilla and sassafras, both in vernacular and domestic, English and American, sources, from Penelope Jephson Patrick’s English recipe of 1672 ‘for the Stone and Gravel’ to Catharine Haines’ eighteen century receipt from Philadelphia ‘To Make a Diet Drink’.\textsuperscript{512} By the time that Grace Mildmay wrote her medical papers in the late-sixteenth- and early-seventeenth-centuries, the sassafras-guaiac wood-sarsaparilla combination was already forming the backbone of household remedies, as seen in her remedy for ‘The cure of the

\textsuperscript{511} Carminatives are substances which have a relaxing effect on the gastrointestinal tract. They are often prescribed along with irritant laxatives such as senna as a means of lessening the dramatically painful and spastic effects of the latter.

\textsuperscript{512} FSL.ms.V.a.396, fol.100r, Penelope Jephson Patrick’s receipt book, 1671-1675; APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, \textit{Notebook}, 1776.
pox, the surest, shortest, and easiest that ever was found'. In 1638 Elizabeth Digby included it in her English recipe for ‘A good dyett drinke for a dropsy, or swelling’, instructing her reader to distill ‘Sarsaparilla one ounce, Cartix guaici ... radix Saxafrage ... Lignum Rhodium ... Roubarbe ... Agaricke... Sweete ffennell seedes ... Annise Seedes ...[and] Licorish ‘, mixing the new botanical with old world plants in a prototype ‘health drink’. The common Early Modern and Colonial conflation between food and medicine typical of domestic manuscripts, and discussed in Chapter Two, may also be clearly seen here. While this blurring of lines between the remedial and the culinary existed across medical practices, including both ‘grand’ and ‘little’ traditions, it is entirely typical of the domestic culture to absorb new botanical material into this nutritive, rather than a theoretical, medical framework.

Mixing of herbs where sarsaparilla is employed is almost universal across sources, and sarsaparilla is most commonly combined with either sassafras, or guaiacum, or both. For example, George Hartman lists a number of recipes containing sassafras, but relatively few of them employ sarsaparilla and sassafras separately. Of these, there is a clear perception of sarsaparilla as a ‘stomachic’, employed to ease the more violent effects of the laxatives. For example, in his receipt for ‘A Purging Ale by Dr. Butler, Physitian to King James’, Hartman adds sarsaparilla and ‘liquoras’ to ‘Sena and Polipody of the Oak’ (along with other herbs) with the advice that ‘If you would have it more purging, increase, or double the proportion of Sena’.

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513 NRO.ms.v.33,fols.125-126, Grace Mildmay, Medical Papers.  
514 BL.Eg.ms.2197, fol.12v, Elizabeth Digby, ‘receipts :is approved by persons of qualitie and judgment, collected by Elizabeth Digby, 1650’.  
be seen in Hartman’s remedy to ‘comfort the spleen and stomach’, calling for the householder to

Take Sarsaparilla one ounce; the rind of the Root of Tamarisk, three drams; of the Root of Zedoary, two scruples; Purslane-seeds, one dram; reduce all into a fine Powder, and with Syrup of Citrons, and Syrup of the Juice of Borage, a sufficient quantity; make an Electuary.\footnote{IBID.}

Sarsaparilla’s perceived remedial action by domestic sources is not limited to the gastro-intestinal system, however. While Mary Glover does employ it in her ambiguous English recipe for ‘a Dyet Drinke’ of 1688 (echoing Elizabeth Digby’s ‘dyett drinke’ of 1638), Margaretta Prentis recommends it in a compound botanical ‘for a Dropsy’ in 1780s Williamsburg, Virginia.\footnote{BL.ms.57944, unfoliated, Mary Glover, \textit{Her Receipt Book}, 1688, p.13.} In the latter of these recipes, Prentis calls for the combination of ‘Pine Tops, Centaury, Sarsaparilla, Sasafras, Golden Rod, Horse Rhadish Root, [and] Garlick’\footnote{UP.ms.5034.4, unfoliated, Margaretta Prentis’s Cookery and Medical Recipes, 1780s, pp.24-25.}. As seen in early English sources, both domestic and vernacular, Prentis is using the relatively common Sarsaparilla and Sassafras combination, but here in a rather unique manner. Unlike the English versions, she is incorporating considerably more plants specific to the ‘American’ pharmacopeia such as pine and goldenrod while still retaining clear English\textit{ materia medica} botanicals such as centaury and garlic.

More than guaiac and sassafras, sarsaparilla was employed as an adjunct herb. While lignum vita held a specific association with syphilis, and sassafras was common employed in treating kidney stones and oedema, sarsaparilla was used in remedies for both ailments in conjunction with either lignum or sassafras. This may be seen in Mary Doggett’s 1604 English receipt
'To Sweeten The Blood', with its ‘Lignum vita Chips … Sassaphras Chips… [and] Sarsaparilla’, as well as in Mary Glover’s late-seventeenth-century English recipe for ‘flower of Oyntment’ which contained sarsaparilla, guaiacum, and sassafras. Very occasionally sarsaparilla seems to have been employed by domestic authors as a stand-in for either guaiac wood or sassafras, mirroring the confusion seen in its name and provenance. For example, Elizabeth Freke writes ‘Of Sarsaparilla … Itt is perticulerly good for the French Pox, & pains In the Limbs & for the Cureing off Cronical diseases. Itt is allsoe used for the Kings Evill and the likes. Itt giving ease to such softs off Distempers ~ ~’, employing sarsaparilla in much the same vein as a number of other authors use guaiacum. This conflation of sarsaparilla with sassafras and guaiacum suggests that it was less familiar as an autonomous agent than the other new world herbs. In this instance, the lack of a singular use, or regular application of a particular action on the part of the plant, results in a less developed sense of the plant’s character, suggesting that this new world plant held a tenuous place in the Anglo-American canon, and one almost entirely defined by its perceived medical proximity to other plants.

**Tobacco, *Nicotiana spp.***

The earliest European use of tobacco suggests that it was clearly seen, at least initially, to be a medicinal agent rather than a recreational, or luxury, item, though the picture was complicated by the botanical’s association with

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519 BL.Add.ms.27466, fol.154r, Mary Doggett, *Her Booke of Receipts*, 1604; BL.Add.ms.57944, unfoliated, Mary Glover’s culinary and recipe books, 1688, p.20.
520 BL.Add. ms. 45719, fol. 122r, Elizabeth Freke.
new world peoples, flora, and commerce.\textsuperscript{521} The description of tobacco in J.B.’s \textit{English Expositor} of 1621 is brief and largely unilluminating: ‘Nicotiane. The hearbe Tobacco, so called of a French mans name who first brought the knowledge of this herbe into France’. John Lawson’s 1700 record of Native American tobacco use, on the other hand, suggests both knowledge of its indigenous provenance and use, and an awareness of its addictive nature, noting of the ‘Indians of North Carolina’ that

\begin{quote}
Their Teeth are yellow with Smoaking Tobacco, which both Men and Women are much addicted to. They tell us, that they had Tobacco amongst them, before the Europeans made any Discovery of that Continent.\textsuperscript{522}
\end{quote}

That it was closely associated with the ‘new world’ is equally illustrated by the flora and fauna to be found in mid-eighteenth-century Virginia as described by the English travel writer, Andrew Burnaby. This latter includes a number of plants, including two of those most important to Colonials – tobacco and corn:

\begin{quote}
Virginia, in its natural state, produces great quantities of fruits and medicinal plants, with trees and flowers of infinitely various kinds. Tobacco and Indian corn are the original produce of the country; likewise the pigeon-berry, and rattle-snake-root so esteemed in all ulcerous and pleuritical complaints: grapes, strawberries, hickory nuts, mulberries, chesnuts, and several other fruits, grow wild and spontaneously. \textsuperscript{523}
\end{quote}


\textsuperscript{522} John Lawson, \textit{A New Voyage to Carolina; Containing the Exact Description and Natural History of That Country: Together with the Present State Therof, And A Journal of a Thousand Miles, Travel’d Thro’ Several Nations of Indians. Giving a Particular Account of Their Customs, Manners, &c.} (London:1674-1711), p.172-173.

\textsuperscript{523} Rev. Andrew Burnaby, \textit{Travels Through the Middle Settlements in North America, In the Years 1759 and 1760, with Observations upon the State of the Colonies}, Edition the Third, Revised, Corrected, and Greatly Enlarged, by the Author, London (Printed for T.Payne, at the Mews-Gate, 1798) p.9-10.
The earliest, and most common, use of tobacco within Early Modern English and Colonial American domestic sources is as the basis of ointments or salves. Indeed, the use of tobacco as a vulnerary, or healing ointment, seems specific. Margaretta Prentis’ American recipe for English ‘Comfrey Salve’ is followed by one for American ‘Tobacco Salve’ (which calls for two pounds of fresh tobacco leaves and half a pound of ‘juice of Tobacco’). Catherine Haines’ Philadelphia manuscript of 1779 includes an untitled receipt which similarly combines ‘the juce of Green Tobacco [and] one pound of the Leaves’ containing no instructions for administration or use. Ebenezer Parkman’s mid-eighteenth-century Massachusetts diary also illustrates the botanical’s popularity: ‘[September] 28 [1757] Mrs Tainter yesterday brot & applyd a Tobacco Ointment to my Wifes Legg – but it is no better’. Likewise, Mary Hookes’ 1680 English ‘Salve for a Green Wound’ is remarkably similar to Elizabeth Freke’s tobacco salve, used ‘for all wounds, and Margaret Baker’s manuscript contains an ‘oyntment of tobacco’.

An altogether typical example of a tobacco salve recipe may be seen in Mary Glover’s ‘ointment of Tobacco’ receipt of 1688:

Take of Tobacco Leaves Bruised two pound Steep them a whole night in half a … of Claret’ … and ‘a pound of juce of Tobacco four ounces of Rosin Boyle itt…’ add of ‘new beese wax half an ounce make itt in to an ointment according to art’. – ‘It will ask a hole summers day to wright the virtues of this ointment and my poor … is to weak to give it the hundred part

524 University of Virginia Rare Books and Manuscripts Archive, ms.5034.2, Margaretta Prentis Williamsburg Cookery and Medical Recipes, 1780s, p.284-25.  
525 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, Notebook, 1776.  
of its true use: it Cures tumours... wounds... scabs itch Stinging with Nettels ... Venomous Beasts wounds made with confused Arrose, itt helps scaldings' and so on ...

In each of these recipes, the domestic authors are employing the new world botanical within an existing context, often seeming to make direct substitutions, using tobacco instead of the old world comfrey, for example. This reflects a cultural predisposition to use ‘exotic’ material over common domestic ingredients, which may also be seen in the use of spices. Equally, it reflects a subtlety in differentiation borne out by personal experience working directly with the plants. Moreover, topical ointments containing tobacco as a primary ingredient were popular, and common. The availability of the herb, greatly facilitated by its early cultivation in the colonies, ensured that supply met this demand, allowing the domestic culture to fully embrace the new material.

Although no other preparation is as common as the ointment, tobacco was used in other ways also. Mary Hookes’ receipt book contains instructions for the preparation of ‘Tobacoe Watter’, while Katherine Davies’ *medical and cooker receipts* includes tobacco in a receipt to cure the ‘Fitts of ye mother’. Davies’ manuscript also contains composition instructions for ‘The Composition of Tobacco For ye swimming and giddiness in ye head my Lord Chamdos brought it from Aleppo it cured him there’ which combines a number of old (rose, betany) and new (‘sarsophras’, ‘tobaco’) world dry botanicals clearly intended to be smoked:

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528 FSL.ms.931, unfoliated, Mary Hookes’ Receipt Book, 1680, p.3 (medical receipts); BL.ms.57944, fol.141, Mary Glover, *Her Receipt Book*, 1688.
529 It was common across the early modern world for both domestic and learned authors to advocate the use of spices such as pepper or ginger as aromatic rubefacients, for example, instead of equally efficacious local plants such as horseradish.
530 FSL.ms.a.931, fol.75v, Mary Hookes’ Receipt Book, c.1675-1725.
Lignum Aloes
Barke of sarsophras
Storeax
White amber
Rose mary blossums
Betany blossums
Of each 2 ounces
Mix all these together and put it into a rose box as hard as may be.531

This is suggestive of two later receipts in KW’s English Receipt Book of 1710 which outline the best ingredients needed to produce a ‘Smoke for a pipe’, while Margaret Baker’s rather unusual instructions on how to best ‘perfume tobacco whiche is pleasant to take it commfortes the head and perfumes the breath and roome where in it is taken’ broaches the use of tobacco as fumigant.532 The role of tobacco in ‘cleaning the air’ may be extended in some instances to its use as a smoked commodity, for example, the smoking of tobacco at Eton College was made compulsory during the Great Plague of 1665-66 on health reasons, and boys avoiding their daily dose were punished accordingly.533 This use of the plant as an inhaled medicament echoes back to the indigenous American’s practice outlined in John Lawson’s description of Native teeth ruined by excessive smoking. It is not, however, typically recommended in receipt books, nor did it play a substantial role in the Anglo-American domestic culture.534

531 BL.Eg.ms.2214, fol.77r, Katherine Davies’ medical and cooker receipts.
532 WL.ms.1320, fols.24,62, K.W., A Receipt Book, 1700 (with ‘A Book of Phisick Made June 1770 written inside the front cover);BL.Sl.ms.2485, fol.37r, Margaret Baker, Receipt Book.
533 Maxwell Lyte, in his History of Eton College, 4th ed, (Macmillan & Co, 1911) quotes a reference from Hearne’s Collections, vol.vii p.208; Tom Rogers told Hearne ‘that he was never whipped so much in his life as he was one morning for not smoaking’.
The role of tobacco as a social botanical commodity is illustrated by the eighteenth-century invoices included in two separate letters from New York found in the Cadwallader Colden estate papers. In the first, sent from ‘Philad’ June 23rd 1714’, Colder writes to a ‘Mr John Tounsend Mercht in Barbados’, asking for a bill of lading for a range of goods, including:

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td>middling bread</td>
<td>20/</td>
<td></td>
</tr>
<tr>
<td>White D*</td>
<td>25/</td>
<td>I forgot to tell you that the</td>
</tr>
<tr>
<td>Broun D*</td>
<td>17</td>
<td>Herrings wer much damnified</td>
</tr>
<tr>
<td>Tobacco</td>
<td>10/12</td>
<td>by ye rats their getting into</td>
</tr>
<tr>
<td>Pork</td>
<td>45</td>
<td>the Cask</td>
</tr>
<tr>
<td>Rum</td>
<td>2/9</td>
<td></td>
</tr>
<tr>
<td>Sugar</td>
<td>50/</td>
<td>~ Capt Parker.</td>
</tr>
</tbody>
</table>

And indeed, tobacco is a particularly interesting plant for investigators, as it easily and readily transverses categories, running from luxury commodity to botanical medicine. The second letter, of ‘Philad’ Nov’ 30 1714’, refers more specifically to tobacco, and particularly to the commercial value of tobacco:

I could not send the Tobacco you desir'd for your Orders wer it should belong of which sort their was none except what D’ Graham had bought before Mr Arbuthnotte bought some out of what he coll'd ye one half in short nasty Tobacco.

His assessment of the tobacco as ‘short and nasty’ suggests a discerning merchant’s eye, but specific reference to the tobacco’s intended end use in Colder’s writing leaves an ambiguity about whether the tobacco is primarily to be used as a recreational indulgence or as a medical botanical. The earlier, common recipes using tobacco in ointments suggests that, for the purposes of Anglo-American household use from the sixteenth- through to the eighteenth-centuries at least, tobacco was considered to be primarily medicinal, and of particular use as an external agent.

535 Cadwallader Colden’s Letters and Papers, 1688-1776, as reprinted for the Collections of the New York Historical Society for the year 1917, New York: 1918, p.15.
The wider popular perception of tobacco, both in terms of the sphere of use, including both public and private venues, and in terms of multiplicity of application by Early Modern and Colonial Anglo-Americans, was not entirely positive, however. For example, King James I’s ‘Counter-blaste to Tobacco’ of 1604 described smoking as ‘loathsome to the eye, hateful to the nose, harmful to the brain … dangerous to the lungs’, while Ben Johnson associated the smoking of tobacco with the ‘polecat and madam, or gallant and clown’. Yet smoking remained popular, with upwards of 7,000 tobacco warehouses, packing plants, and outlets in London alone selling tobacco in the early seventeenth-century. Indeed, the condemnation of tobacco seems to be entirely aimed at its use as an indulgence, and towards those enamoured of smoking the herb. Its household use in wound ointments garnered no disdain at all, indeed, it is entirely possible that elite male authors such as James I and Johnson were entirely unaware of this ‘little’ use which may be seen in domestic sources across the whole of the period.

The variety of ways in which people viewed this botanical across Anglo-American society reflects a broader inherited cultural norm of conflation between plant properties and uses, or at least in a lack of differentiation. If rose water was as likely to be employed as a cooking ingredient as it was a medicine, so tobacco was often both luxury item and remedial agent. The difference between the two botanicals lies in their larger social placing: rose was used in a range of products and these were adapted to a multitude of uses,

all within a domestic context. Tobacco, on the other hand, was employed variously across the whole of Early Modern and Colonial society, ultimately including a recreational use, but its most common domestic use was as a medical agent. Indeed, tobacco was specifically seen to be an ‘external’ medical agent in Anglo-American homes across the period, one to be used topically, or in fumigation. Unlike guaiac wood, sassafras, and sarsaparilla, each of which served a multitude of uses demonstrating the willingness of individual practitioners to perceive these agents in broad, adaptable terms, the domestic use of tobacco was fairly homogeneous and constant, illustrating a shared domestic practice distinct from broader social usage.

**Jesuit’s Bark, Cinchona spp.**

Cinchona was, along with the opium poppy, the second botanical identified by Roy Porter as medically active, and in use by Early Modern medicine.\(^{539}\) Also known as ‘Peruvian Bark’, *cinchona spp.* is a ‘genus of evergreen trees or shrubs with fragrant white or pink panicled flowers, growing in the tropical valleys of the Andes’. Several of the species contain the anti-malarial constituent, quinine, in their bark; hence the traditional (indigenous and adoptive European) as well as current, use or cinchona in treating tertiary fevers. As with all of the new world botanicals examined here, the introduction of Cinchona into the European canon, both learned and domestic, occurred via elite transmission routes. Equally, this knowledge originated in oral, indigenous

cultures, and, once adopted by domestic Anglo-American practitioners, was further transmitted via oral, scribal, and printed means, evidence of which is found in letters and receipts representative of the whole of the period considered by the thesis, and originating on both sides of the Atlantic.  

The twentieth-century historian, Maude Grieve, noted that cinchona was ‘first advertised for sale in England by James Thompson in 1658’, while Roy Porter spoke of Peruvian bark’s use from ‘the latter part of the seventeenth-century’ onwards. Also in 1658, ‘the English weekly Mercurius Politicus contained an announcement proclaiming that: ‘The excellent powder known by the name of ’Jesuit’s powder’ may be obtained from several London chemists’. Cinchona appeared officially in the London Pharmacopoeia of 1677, though a wealth of evidence suggesting even earlier ‘old world’ use of this ‘new world’ botanical exists. Cinchona is mentioned in Sir Walter Raleigh’s writings of 1596, and again in Robert Harcourt’s work of 1613, suggesting that it was not only known by these authors, but that its use was being actively promoted. By the early-eighteenth-century the plant was known, not only as an imported medicinal, but as a botanical and horticultural garden entity, as

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540 There is a substantial amount of scholarship tracing the history and mythology of cinchona’s introduction into European materia medica: Cf. Fiammetta Rocco, Quinine: Malaria and the Quest for a Cure That Changed the World, (Harper Perennial: 2004); Jane Holiday, Beneath the Quinine Tree (Indigo Dreams, 2012).

541 Roy Porter, Disease, medicine, and society in England (2002: pp.8); Maude Grieve, A Modern Herbal. The first London Pharmacopoeia was published in 1618, with reprints in 1621, 1632, 1639 and 1677. The first revised edition didn’t appear until 1721.


illustrated by its inclusion in James Pettifer’s *Hortus Peruvianus* 1715.\(^{544}\)

Moreover, cinchona was not only to be found in learned works such as the Pharmacopoeia, or the elite writings of Raleigh, Harcourt, or Pettifort, but was in regular Anglo-American domestic use from 1680s.

That Early Modern and Colonial householders were using cinchona, and using it both effectively, and specifically, is supported by receipts across domestic sources. Elizabeth Godfrey’s English receipt book of 1686 provides instructions on ‘How to give y Jesuets Powder’, as does Elizabeth Freke’s recipe for same (also written in England around the same time).\(^{545}\) The latter notes that ‘Off Jesuit’s Bark, or Peruvian Bark’:

> the powder off this Bark given in a due quantity is the most certain and safe remedy for an Ague proved by several phisitions, takeing one ounce of this powder and devide itt equally in twelve parts off which take one paper off when the fitt of yt Ague is quite off and saff to hours after then take another of the papers; and for Cotinue itt every three or 4 hours takeing a paper in a glass of wyne for Continue itt every Fowr hours till itt is done or Ever you may Infuse The ounce in a quartt of wyne and take seven or eightt spoonfuls of the Clarett every fowr hours; or you may Make itt Into pills with Sirup of Gilliflowers; and take halfe a dragme of itt thatt way. Thus doe till the time your fitt is to come againe, wch iff itt stop and Leave you about eight or Ten days affer itt will be apt to Come againe then take this off fowr Doses off the powder againe. as you did Before.\(^{546}\)

Moreover, examples of cinchona use in English sources traverse the entirety of the chronological span considered by the thesis: for example KW’s eighteenth-century English manuscript contains several receipts calling for ‘Peru bark’ and

\(^{544}\) James Pettifer, *Hortus Peruvianus medicinalis, or, the South-Sea Herbal*, (London, c.1715), pp.3


\(^{546}\) BL.Add.ms.45718, Elizabeth Freke, *miscellany*, September 1684 - February 1714.
‘Peru bals’. The consistent appearance of cinchona across domestic English sources indicates its perceived worth within Early Modern English households. The early inclusion of instructions appended to its use indicates its novelty to seventeenth-century authors, with precise preparation instructions deemed necessary as this particular botanical was new to the domestic canon. In both instances the new world plant may be seen to be of value to the old world domestic practitioner; far from being simply a novelty item, cinchona was a jobbing medical botanical within the domestic canon from its introduction into the *materia medica*, through to the nineteenth century.

Cinchona was identified as a specific remedy in the treatment of malaria, which was also known as the ‘ague’, and often described in terms of its most notable symptoms: intermittent, or tertiary, fever. A receipt in Jane Dawson’s English manuscript of the late-seventeenth-century uses Jesuit’s Bark in ‘A Receipt for an Ague’. Mary Bent’s recipe ‘for an Ague’ uses only ‘Jesuits Bark finely powdered’, while Hannah Huthwaite’s early-eighteenth-century Colonial script contains a receipt ‘For The Ague’ instructs the reader to

Take Jesuits’ Bark 16 oz Venice Treacle Dram & half. The juice of half a Lemmon Divide these into three parts, and let the person take a Dose in a Glass of Wine for three Nights together going to Bed.

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547 WL.ms.1320/82, K.W., *A Receipt Book*, 1770, ‘A Book of phisick. Made June 1710’ written inside front cove); Remedies calling for Peru balsom are also found in an earlier, anonymous Wellcome manuscript written in the late seventeenth-century. Peruvian balsom, or ‘bals’ comes from Myroxylon balsamum which is an entirely different plant, and far less frequently used by domestic authors than Jesuit’s bark. The combination seen here in DW’s text suggests some conflation of the two plants and their use: WL.ms.L.2, Household and Medical Recipes, c.1650-c.1750.
549 WL.ms.1127, fol., Mary Bent’s Receipt Book, 1664-1729; Win.ms.doc.193, unfoliated, Hannah Huthwaite’s Recipe Book, c.1720, p.70.
Likewise, in her Colonial letter of September 7th, 1776 Abigail Adams outlines her treatment of her son, Charles, specifying the use of ‘bark’:

Charlfly is Banished yet, I keep him at his Aunt Cranch's out of the way of those who have not had the Distemper, his Arm has many Scabs upon it which are yet very soar. He is very weak and sweats a nights prodigiously. I am now giving him the Bark. He recoverd … very fast considering how ill he was. I pity your anxiety and feel sorry that I wrote you when he was so Bad, but I knew not how it might turn with Him, had it been otherways than well, it might have proved a greater Shock than to have known that he was ill.\textsuperscript{550}

The bark here almost certainly refers to cinchona, or Peruvian bark, a specific Early Modern botanical for the treatment of malaria, which was commonly prescribed for feverish conditions more generally.\textsuperscript{551} Indeed, K.W.’s eighteenth-century English work includes two remedies containing cinchona aimed at the ‘Ague’; the first dictating that ‘If after ordinary Remedyes, The Ague continues & a vomit & a purge first taken, but not before, give ye Jesuis powder, as follows’, while the second receipt ‘For an Ague’ simply stipulates ‘Take an ounce of the Bark’.\textsuperscript{552} Abigail herself had recourse to self-prescribing the ‘Bark’ for a cold twenty years later, writing to John 2 March 1796, noting that she has suffered the ‘Growls &c. I hope to shake it of, for I am better of my cold, and the Bark I have had recourse to’.\textsuperscript{553} The Adam’s family recourse to cinchona was entirely typical of the larger domestic practice surrounding cinchona, though individual practitioners were equally at ease in applying cinchona’s actions to other ailments, also.

\textsuperscript{550} MHS.ms.011304, Adams Family Papers, Letter from Abigail Adams to John Adams, 8 - 10 September 1775.
\textsuperscript{551} It is possible that Adams was referring to an antipyretic botanical such as willow bark though there is little evidence that willow was used in this manner, whereas cinchona is consistently employed in treating fevers across the domestic culture.
\textsuperscript{552} WL.ms.1320, fol.96,105, K.W., A Receipt Book, 1700 (with ‘A Book of Phisick Made June 1770 written inside the front cover).
\textsuperscript{553} MHS.ms.011304, Adams Family Papers, Op.cit.
Both Catherine Haines’ use of ‘Jesuits Bark’ in her 1776 Philadelphia remedy ‘For the Third days ague’ as well as the Pemberton receipt for ‘Peruvian Ale’ from late-eighteenth-century Massachusetts illustrate a variety of application in Colonial use, for example, as does Haines’ second receipt containing Jesuit’s Bark, that ‘To make Fluxham tincture’:

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bruised Jesuits Bark</td>
<td>two ounces</td>
</tr>
<tr>
<td>Gentian Root</td>
<td>half ounce</td>
</tr>
<tr>
<td>Orange Peal</td>
<td>half ounce</td>
</tr>
</tbody>
</table>

mixed. 554

The ingredients in this recipe are, apart from the inclusion of gentian, identical to those found in the Pemberton remedy for ‘Dr W. Chenning’s Peruvian Ale’:

‘Dr W.F.Charming’s (?) Peruvian Ale’.  
Take of  
Crushed Peruvian Bark 2 oz  
Bitter orange peel 1 oz  
Boiling water 1 gallon

_____  
Digest in a covered vessel two hours. Then strain.  
_____  
Then add=  
Brown sugar 1 lb  
Yeast half a cup full.  
_____  
Keep in a moderately warm place two or three days to ferment. Then pour off (clear & ) bottle. After two days it is ready for use. (If bottled too soon it will burst the bottles. If too late it will be flat.) Tie down the corks. 555

Neither of the last two of these receipts designate either use or dosage, suggesting that, at least for these late eighteenth-century authors, the botanical was so well known, used, and trusted, that further instructions or information was not needed. Indeed, in comparison with Freke’s original detailed

554 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines, Notebook, 1776.  
instructions in England of the 1680s, these Colonial recipes show the extent to which cinchona had become part of the established domestic canon: the early perception of value translated into inherited practice. The placing of this particular plant, with its well-documented effects, in the domestic culture suggests not only that the practice was adaptive and responsive, but equally, that it was quick to recognize remedial botanical agents in common learned use which held practical value within the household. Unlike the North American plants considered here which Colonial householders would have had direct access to, Cinchona was an import from the Southern Americas, and as such an ‘exotic’ ingredient for Anglo-American households generally.

**The Beginnings of New Practices**

In examining the five common botanicals, Chapter Six has further established both the common practice and individual adaptation of the domestic botanical culture. While old world botanicals continued to provide the majority of medicines for domestic use across the Atlantic sphere, with an equal dependency on them in both Early Modern English and Colonial American households, the same is not true of the new world plants. There is correlative practice associated with the five botanicals considered in depth here, yet these five plants alone represent the totality of shared new world botanical practice. Indeed, this brief list summarizes virtually the whole of American botanicals in Anglo-American use up until the early-eighteenth-century, at which point we begin to see a slight divergence between the English and American practices, particularly in terms of Colonial adoption of indigenous plants.
The recipes of Catherine Haines and Margaretta Prentis’ are of note, particularly in suggesting an increased Ameri-centricity of botanical use appearing in post-Colonial receipt books. Haines, for example, uses a variety of Colonial non-botanical ingredients in her preparations, including ‘Barbados tar’, and rum as a menstruum. Haines also has a clear affinity for ‘green Indian turnip’ which she uses in recipes for ‘a Scald head’, a ‘Tetter ointment’, and a ‘Cure for a Cough’. She also calls for the new world botanical, ‘prickly pear’, alongside old world belladonna, plantain and elder in her receipt ‘to make an Oyntment’. Neither Indian turnip, also known as ‘bog onion’, *Arisaema triphyllum* L., nor prickly pear, *Opuntia spp.*, typically appear in English sources suggesting that by the 1770s Colonialists are expanding their herbal repertoire, and embracing plants from outside of the inherited Anglo-American *materia medica*. Prentis likewise employed a wider range of American plants than her earlier English and Colonial foremothers, and she used them more frequently. For example, the last ten pages of her medical receipts contain a number of anecdotal stories of a medical nature generally, as well as considering specific botanical remedial agents. Of these, half contain indigenous American botanical ingredients, including the commonly shared sassafras and sarsaparilla, as well as adding pine, goldenrod, and apple vinegar. Indeed, a number of the plants found in Prentis’ manuscript appear to be unique to an emerging American domestic practice, in a similar vein to Haine’s use of Indian turnip and prickly pear. For example, Prentis’ use of goldenrod in her ‘Dropsy’

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556 APS.ms.coll.52-ead, series III: Wyck Association Collection, Reuben Haines, Box 87: Folder 2, unfoliated, Catharine Haines’ Notebook, 1776. ‘Barbadoes tarr’ is specified, for example, in a recipe ‘for a bad cough’.  
557 IBID.  
558 IBID.  
559 UP.ms.5034.4, Margaretta Prentis’ Cookery and Medical Recipes,1780s. (There is a recipe dated 1788 on the end page).
remedy is unprecedented, as is the recommendation of ‘ripe Poke Berries’ in
the treatment of ‘Gout or Rheumertism’. Both authors are here differentiating
the *materia medica* in a way which is atypical of the shared domestic culture.
While individual authors have typically employed that common canon in a great
variety of ways, the list of plants itself, prior to this point in the practice, has
remained consistant.

Furthermore, Prentis’ ‘Americanization’ of the common inherited Anglo
practice may also often be seen in her choice of old world herbs. For example,
her recipe for ‘the famous Thieves Vinegar which proved a preventative to the
Plague in London in 1665’ contains a list of herbs similar to those found in the
older ‘water’ recipes, minus the hard exotic spices: ‘Take of Wormwood, Thyme,
Rosemary, Lavender, Sage Rue, & Mint each a handful’. Prentis is taking an
established recipe, omitting expensive imports, and using only those botanicals
which she can either grow herself, or purchase from local, Colonial, sources.
Although Prentis does elsewhere advocate the use of imported raw material in
other recipes, as in her recipe ‘for disordered bowels’ combining nutmeg with
laudanum, this adaptation of a ‘common’ recipe, the ‘famous Thieves Vinegar’,
is notable in its adaptation to meet Colonial household needs. Not only do we
see a move away from the time-consuming Early Modern practice of distillation
to the altogether cheaper, easier, faster, and perhaps more effective (at least in
terms of preservation) use of vinegar as a substrate menstruum, but the

560 UP.ms.5034.3, unfoliated, Margareta Prentis Cookery and Medical Recipes, 1780s, p.28
‘Poke Berries’ refers to *Phytolacca Americana*, a strong lymphatic and sympathomimetic agent
(it stimulates the sympathetic response, inducing a physiological ‘fight or flight’ reaction). It is a
‘Schedule Three’ herb and current European legislation allows if use by practitioners’ only.
561 UP.ms.5034.2, unfoliated, Margareta Prentis’ Cookery and Medical Recipes,1780s, pp.23, 24.
recipe’s focus on plants which can be grown domestically would have reduced cost, and diminished Prentis’ dependency on old world suppliers. Indeed, the preference for Colonially derived goods in terms of medical botanicals mimics larger concurrent colonial social and political boycotting of taxed, imported goods in the colonies.

Nor were Haines and Prentis unusual in their colonial adaption; rather there seems to be a clear trend towards a preference for the use of both atypical old world plants and indigenous plants across the American sources towards the end of the eighteenth-century. For example, ‘shoemack’, Jamaican dogwood, snakeroot, jimsonweed (James’ town weed), pinkroot, and pokeweed, are some of the many indigenous plants cited widely by eighteenth-century Colonial sources. The sudden broadening out of the Colonial canon of herbs seen in these sources suggests broad cultural, as well as domestic, adaptation, reflecting a ‘greater needs must’ approach to the canon which was dictated by external social and political changes. Yet while there clearly was a growing eighteenth-century Colonial interest in the use of indigenous plants medically, the overwhelming evidence in the majority of domestic, and vernacular, sources, points to an almost entirely shared Anglo-American

562 UP..ms.5034.4, unfoliated, Margaretta Prentis’s Cookery and Medical Receipts, p.15.
domestic *materia medica* prior to this point, in both shared lists containing a presumptive framework of old world plants with the inclusion of a very few, extremely pharmacologically active, new world plants, and in common preparation and application of botanicals. While ‘adaptation in continuity’ was a clear hallmark of the shared domestic culture across the entirety of its span, the American changes to the basic, shared list of medical plants indicated a fundamental and substantial shift in practice, and one which in effect produced two linked, but differing, botanical cultures moving into the nineteenth-century. By incorporating a wealth of new plants, and utilizing existing plants and recipes in new ways, the Americans effectively displace the continuous, communal nature of the shared practice. In effect, this was more a politico-cultural statement about larger inherited ways of doing things than it was an extreme expression of domestic adaptability.

In looking at five key new world botanicals, sassafras, sarsaparilla, lignum vitae, cinchona, and tobacco, Chapter Six has further solidified the basic nature and the extent of the common Anglo-American domestic botanical culture. Each of these plants existed as a distinct entity throughout the whole of the practice, appearing in scribal evidence of the canon from the outset of its establishment, and remaining in use as the Empire expanded, taking the domestic botanical culture with it. Elite routes of knowledge and transmission, along with vernacular dissemination, first enabled the use of these plants across the domestic practice, yet by tracing the underlying familial and communal nature of domestic medical practices that Chapter Six has discovered individual instances of differentiation in plant use. Further, the appearance of new
indigenous plants into the *materia medica* of Colonial texts in the eighteenth-century is suggestive of a fundamental differentiation in the practice which heralded the end of the entirely inherited, communal culture. Broader socio-political upheavals in trans-Atlantic Anglo-American culture are clearly reflected in the domestic botanical sources, with a growing sense of indigenous plant use and self-reliance in Colonial texts. This is of particular note as it demarcates the end of the domestic botanical culture as a single entity, with Colonial practices beginning to look increasingly to new world plants and practices in response to domestic medical demands.
Conclusion

In examining Anglo-American use of botanical medicines, the thesis has established the basic skeleton of an Early Modern English, and Colonial American, domestic culture, outlining its determining characteristics, its typical use, and methods of its transmission. This overview of the Anglo-American perception, production, and employment of plant medicines has addressed five primary areas: it established a common domestic practice which employed herbal medicines and it examined the role of oral, scribal, and print cultures in transmitting the knowledge of botanicals across domestic use. It further considered the typically atheoretical application of household approaches to the prescribing of botanicals; it focused on the shared body of herbal agents themselves; and it outlined the flexible approach of individual households in employing those medicines. By reading widely across domestic and vernacular sources the thesis has not only established the parameters of this domestic botanical culture as distinct from popular and learned medical cultures, but it has also identified emerging schisms in that shared domestic botanical culture which reflected larger cultural and political changes in trans-Atlantic Anglo-American society.

The thesis consists of two parts: the first three Chapters were largely concerned with establishing the criteria, boundaries, and defining characteristics of a shared domestic botanical culture, and the last three ‘fleshed out’ that culture, examining its communal aspects and individualized expression across trans-Atlantic Anglo-American domestic sources. In the first instance, the thesis
established a communal Anglo-American domestic botanical practice with certain traits: this domestic culture had a composite origin which reflected its adaptive nature. It largely lacked any underlying theory or dogma, allowing for a high degree of flexibility for individual practitioners and households. It was typically practiced and disseminated by women, with a greater proportion of male Colonial authors reflecting differences in Anglo and American domestic demographics. Finally, it was built around a common, shared *materia medica* which consisted of an inherited body of old world herbs, with few new botanicals entering the canon, but with those few being universally adopted by the common practice. Typically, the culture as a whole was responsive to both community need and individual household circumstances.

Much of the work looking at transmission of the domestic botanical culture is relatively nebulous and ephemeral as a result of attempting to reclaim oral traditions by reading historical script and printed sources. It has been important to attempt to trace this process as far as possible, as common sense dictates that oral transmission facilitated this, and many other, domestic practices. ‘Common sense’ in this instance is borne of experience and observation: communication and learning within the home occurred on a daily basis, with the bulk of this communication and learning occurring orally. There is no doubt that people were working with botanical medicines within their homes, and as speech is the typical method of communication within the home, it follows that we suppose this to be the foundation of household information transmission. Moreover, we see vestiges of this oral culture in scribal evidence. In some of the American sources we see direct reference to the oral
transference of medical information in the ‘telling of stories’, with individuals writing letters and journals relating their neighbours’ and acquaintances’ experiences, both with ailments, and with the use of botanicals in the treatment of those ailments. Earlier, more formal, receipt books lack the narrative of remedies seen in American sources, but often adopt a ‘shorthand’ approach to the type and the manner of information presented. These receipts commonly omitted the purpose of a particular remedy, or failed to spell out in precise detail the manner in which it was to be prepared, and so on. This brevity speaks to an assumption of pre-extant competency and familiarity not communicated (or needed to be communicated) by the script: it presumed an existing level of communication which has not been written down. This oral nature of the domestic culture is one of its hallmark characteristics: it illustrates the commonness of the practice, its domesticity and familiarity, and also to its adaptable nature. From this awareness of the oral nature of the practice’s origins we can solidify our assumptions about the prevalence of the whole culture: not only does the wealth of receipt books, letters, journals, and inventory artefacts speak to the practice as a common, going concern, but the likely oralness of its nature speaks to gaps in the evidence. Just as we know that all households were cooking and consuming food despite there being no direct evidence in the form of culinary recipes from each of them, we may assume that the making and administering of medicines, often perceived as a nutritive exercise as much as a remedial one, also occurred across households.

The bulk of extant scribal domestic transmission evidence serves to highlight the flexible, personal nature of the culture. The plants and their
containing recipes found in receipt books, journals and letters in no way reflect a static tradition. Rather they showcase the multitude of ways in which the authors of differing sources have altered and adjusted which plants from the common materia medica are used in recipes, along with ratios and preparation methods, all speaking to individual competency in wielding a familiar, communal body of knowledge. The origins of the culture in oral practice are one of its fundamental characteristics, as is its expression in scribal sources. Unlike the set information found in print sources, the ability for individual expression afforded by scribal communication is key to the practice’s flexible nature. This scribal transmission in effect took an adaptive, communal, oral culture and allowed for individual expression of both authority and agency in using plants as medicines. While the individual herbs taken from the shared canon may have differed between authors and remedies, and the amount and degree of instructional information likewise varied, there is a recognizable pattern to much of the scribal expression of the common culture. Moreover, this structure was so pervasive and familiar to householders that it was adopted by vernacular authors, particularly in the ‘home physitians’. Similarly, individual recipes may be seen to travel a circuitous route into print from domestic sources, and back out. Clearly the domestic culture was not only tied to larger social practices and norms, but it both had an important impact on these, and, perhaps to a growing degree over time for the majority of households, was influenced by them. The strength of this domestic body of scribal evidence lies not only in its ability to reconstruct the culture in providing a direct platform for authors, but in its illustration of a ‘best practice’ approach adopted across the culture. The highly flexible, responsive, and shared nature of the culture meant that individual
approbation of these medicines is quickly shared, with individual practitioners then further adapting the inherited practice to suit their own needs and resources. ‘Best practice’ here is itself flexible and reactive.

In tracing complex dissemination routes and content, the thesis has established that the transmission, reception, and mutable makeup of the domestic culture exemplify what might be termed a ‘bricolage’ practice, derived from multiple sources and made up of a multitude of individual practices which combine to form a cohesive whole. This _bricolage_ nature is apparent in the composite make-up, not only of the transmission routes, but in the varied individualized practices employing plants typical of the domestic culture. Further, the thesis has defined the domestic culture in relation to public, learned medical practice of the period, outlining the first as a ‘little’ tradition running concurrently, and in dialogue with, the ‘great’ professional practice. Instances of exchange between the two have been considered, with the thesis providing examples where knowledge disseminated in learned printed text was predated by similar use in older, scribal domestic sources, thus adding to that body of scholarship which has already identified appropriation of the learned culture into the domestic sphere.

One of the most important differentiating aspects of the domestic culture in terms of identifying it as a ‘little’ body of knowledge and practice distinct from learned medicine is the question of an underpinning theoretical rationale. With a very few exceptions, domestic authors did not tie botanicals to intellectual frameworks, unlike the learned writing and medical practice which typically
prefaced remedial agents in theoretical terms (particularly humoral or astrological). The domestic culture may be largely defined in terms of a practical application of botanical medicines to given sets of symptoms with a simple remedial intention. Moreover, this practical, atheoretical approach seems to have, at least in some instances, influenced public, and learned, discourses. Far from being a pale copy of professional medical practice of the period, the domestic knowledge and use of botanical medicines in Early Modern England and Colonial America was in many ways unique, valid, influential, and pervasive.

A high degree of common domestic familiarity, competency, and confidence in using plant material medically may be read in sources from a range of Anglo-American homes. This speaks to both householders’ skill in treating medical conditions, and even more importantly for this work, their knowledge of, and experience with, both producing, and administering complex botanical medicines. The underlying willingness to treat various medical complaints relates to the botanical culture in that it speaks to the proficiency in both designing and wielding botanical medicines on the part of the culture’s authors. It is both this familiarity with plants, their preparation, administration, and continued observation of their action on the body, and a willingness and ability to address ailments within the home that provided a basis and rationale for the botanical culture as a whole. Both ‘authority’, householders’ confidence and surety in applying knowledge of botanicals to ailments, and ‘agency’, the wealth of practical skills underlying both the production and the administration of those medicines, are, likewise, fundamental aspects of the domestic culture.
This culture was the expression of a common domestic need, and also of a substantial body of knowledge and practice.

The case studies looked at in depth by the thesis collectively illustrate reminder of the flexible constancy of the culture as a whole. They highlight the shared domestic canon of herbs, showing continuity and consistency in domestic access to, and application of, the inherited body of plant material used medicinally within Anglo-American homes, while equally illustrating the highly adaptive nature of individual’s work with these plants. Individually, the case studies highlight differing aspects of the established culture. Domestic treatments of rose, for example, may be seen to highlight practitioners’ agency and competency in working with sensitive plant material intelligently, while the common use of elder speaks to questions of authority in observing efficacy of botanicals as remedial agents, and the widespread use of spices illustrates the domestic practice’s situation within a wider, indeed global, trans-Atlantic context and practice. The domestic *materia medica* differed from the learned canon in being largely proscriptive; that is to say, it was not as reactive to the introduction of new medicines, particularly mineral and chemical medicines, as learned cultures. Yet it was adaptable enough to embrace a very few botanicals perceived to be of particular value, as seen in the five new world case studies. Both individually and collectively the old world case studies considered by the thesis highlight the consistency and adaptability of the domestic botanical culture. Moreover, they reflect an individual experience and aptitude on the part of authors which fed into and collectively constituted the body and spirit of the cultural practice.
In turning to examine the five new world botanicals found within the shared culture, the thesis has further traced the complexity of transmission routes impacting on the domestic practice, as well more fully fleshing out that range of individualized practices fundamental to the culture’s definition. A shared new world materia medica consisting solely of guaiac wood, sassafras, sarsaparilla, tobacco and cinchona existed in domestic sources on either side of the Atlantic from the sixteenth through to the eighteen centuries. That these five plants, and only these five plants, are typically found across sources on either side of the Atlantic further establishes this as a shared Anglo-American culture whereby colonial housewives employed a canon of both old and new world herbs identical to that of their English sisters. Further, examination of these few new world botanicals demonstrated instances of individual adaption of the materia medica typical of the broader trans-Atlantic domestic culture. Finally, in turning to consider the eighteenth-century inclusion of indigenous plants within Colonial household manuscripts, the thesis has established evidence of a fundamental differentiation in the practice which heralded the end of the entirely inherited, communal culture. The willingness of eighteenth-century colonialists to employ a range of indigenous plants using new menstruums indicates the beginning of a divergent culture, equally reflective of, and sensitive to, the broader cultural and social norms and needs in which it rested.

It is in tracing botanical use across domestic sources that the thesis has been able to identify an emergent American domestic culture which reflected, and ran concurrent with, greater Anglo-American socio-political schisms. This
developing culture differed from the inherited Early Modern English and Colonial American culture in a number of important ways, primary of which was the embrace of many new indigenous plants into its working materia medica. Ancillary to this, the American culture replaced base ingredients with alternative new world resources, as seen in the case of complex polypharmaceutical menstruums being eschewed in recipes which use rum instead. Further, this substitution of menstruum base by the nascent culture reflects a growing emphasis on the use of simples more generally, with complex formulae often being replaced by either single herb remedies, or combination formulations with material from fewer than five plants in each. This evolving American practice reflects the prior communal tradition’s key adaptability to both resource availability and to individual need, as well as reflecting a similar relationship to oral, scribal, and print transmission cultures, and as such is clearly a development of the preceding practice. Its amended list of herbs, combined with changes to the basic methods and of preparation, however, speaks to a break with the Anglo-derived practice, and heralds an increasing divergence in individual and community application of the domestic cultures.

**Analysing Methodologies**

There are two primary issues arising from the lack of parity between English and American resources. A disparity exists in the body of sources consulted by the thesis, with a far greater number of English receipt books available than their American counterparts. Equally, ingress into the Colonial practice has relied more heavily on other scribal sources than the English body
of work, notably journals and letters. This reflects the catalogued material to be found in archives, which most likely reflects trends in trans-Atlantic archiving as much as it does historical practices. By embracing the range of sources, however, the thesis has been able to establish that a virtually identical body of herbs was largely employed by households across the span of the Anglo-American culture, both in terms of old and new world botanicals; that the means of method of preparing those herbs remained largely unchanged; and that the illnesses addressed were entirely similar. So, while considerably more attention to ferreting out and comparing resources remains to be done, examination of what is now available suggests parity of practice in the case of old world herbs, and in the use of those new world herbs first adopted into the European canon. Equally, what has emerged from these sources is evidence that mid-eighteenth-century North American households included a far broader range of indigenous herbs, both singly, and in combination, than their English counterparts.

Secondly, reading this broad, and disparate, group of sources as a single ‘body’ representative of domestic Anglo-American practice not only reflects a lack of parity in terms of sheer numbers, but also the differences in authorship, format, and use of convention. Typically, the English remedy sources have female authorship, consist of receipt books, and follow a conventional ‘recipe’ format: list of ingredients followed by preparation instructions. Information on American domestic botanical usage, however, is derived from a diverse range of receipt books, journals, letters, and almanac marginalia, and while authorship here remains predominantly female, particularly for those receipt books from the southern colonies, there is a far higher proportion of lay males voices.
represented also. Disparities observed in the influence of printed information on
domestic receipts, particularly in the case of Colonial works, might have been
visible in the English case too, had a commensurate set of sources been
available for study. On the strength of the evidence available, however, the
directional relationship of influence between printed texts and the domestic
culture appears to indicate an increasing degree of household reference to, and
dependency on, printed authority towards the end of the period considered here
across both Anglo and American households. A clear correlation between
increased broad social access to, and reliance on, print, household recourse to
printed medical texts, and the decline of a distinct domestic culture may be read
into the evidence viewed here, though far more study is needed in this area.

Other areas for future study arising from the thesis are concerned with
the identification and specification of botanical medicines as remedial agents,
assessment of the domestic culture in particular instances, and examination of
how botanical medical cultures developed into the nineteenth and early
twentieth centuries. The first of these would be well served by a comprehensive
index of Early Modern and Colonial botanical medicines produced as a
reference work for medical historians who wish to access current thinking and
understanding of historical medicines. In the course of research for this thesis,
it has become apparent that much of current scholarship makes presumptions
about historical medicines that are incorrect and outdated. Plants and plant
actions are commonly conflated with each other across the scholarship, so that
the entire historical botanical canon becomes a reflection on quackery or quaint,
ineffective remedial prescribing. A scholarly attempt to access and evaluate
these medicines, using methodology from current work in the fields of botany and pharmacognosy would go some considerable way towards addressing this.\footnote{Pharmacognosy is the field of study specifically concerned with the physiological action of medical plants on the human body, as opposed to pharmacology which studies drugs more generally.} Re-evaluation of specific prescribing trends and practices, in turn, would better our understanding of the medical practice as a whole, and its place within, and impact on, wider social and cultural trends.

Furthermore, future scholarship looking to elaborate our understanding of what the domestic botanical culture was, its commonality, and how it was applied, would do well to focus on individual authors, not because they (atypically) illustrate contemporary learned thought as considered in a wealth of excellent scholarship ranging from Linda Pollack to Elaine Leong’s writing, but rather because they exemplify the atheoretical domestic practice.\footnote{Cf. Linda Pollock, \textit{With Faith in Physic, The life of a Tudor Gentlewoman. Lady Grace Mildmay 1552-1620}. (London; Collins and Brown, 1993); Elaine Leong, 'Making Medicines in the Early Modern Household', \textit{Bulletin History of Medicine}, 82 (2008), 82: 145-168.} Annotated reproductions of household manuscripts such as Elizabeth Jacob’s Tudor receipt book would provide an excellent illustrative example of Early Modern English domestic botanical culture, placing the practice into a clear domestic context.\footnote{WC.ms.3009/16, Elizabeth Jacob, (& others), \textit{physicall and chyrurgicall receipts. Cookery and preserves}, 1590-c.1685.} American contributions to the culture could be similarly exampled; for example, Karen Hess’s annotated monograph of Martha Washington’s \textit{Booke of Sweetmeats} might also be fruitfully revisited as an example of the prevailing domestic culture.\footnote{Karen Hess, ed., Martha Washington’s \textit{Booke of Cookery & Booke of Sweetmeats}, (New York: Columbia University Press, 1995). In her excellent examination of Washington’s medical recipes, Hess has referenced common learned theory in her notes, where Washington does not. While this serves to place the domestic practice within a broader cultural context, it does not help elucidate the domestic culture itself.} Re-examination of the original authors and the
botanical cultures which they produced in light of its own defining characteristics, rather than those of the learned culture, would, alongside re-evaluation of the botanicals themselves, further our understanding, and appreciation, for this key form of medical provisioning.

The final research strand to emerge from the thesis is concerned with examining the Anglo-American use of botanical medicines and botanical medical culture across the nineteenth- and into the beginnings of the twentieth-centuries. This field of inquiry, particularly as it relates to the emergent American botanical culture, is extremely rich. Many of the new botanical movements seen across this period (not only American, or even Anglo-American, but, equally, French and German), may be considered in relation to their debt to the earlier domestic culture, as well as in light of their relationship to popular philosophical and cultural movements of the day. In terms of American botanical cultures alone, focusing on plant medicines and their use by irregular schools of herbal medicine such as the Physiomedicalists and Eclectics in the nineteenth century would greatly add to a field scholarship which has to date primarily focused on the socio-political history of competing medical systems.

By looking at a broad chronological and geographical field, the thesis has established meaningful comparisons and traced commonalities of botanical usage as well as identifying emerging differences in the Anglo-American materia medica. Repeatedly, the authors of the domestic culture are seen to have taken on board the experience of working with a particular plant, or plant-
based medicine, observing, reflecting, and noting the effects which each has on the patient in a variety of circumstances, before then sharing this individual experience with family and friends, thus contributing back to the larger culture. Indeed, this cycle of broad culture and individual practice speaks again to the ability of the culture to work flexibly, and communally. In eschewing dogmatic categorization of botanicals, domestic authors, even in their personal individualization of agency and application, demonstrated shared practice and experience. In tracing their writings and practice, the thesis has outlined the scope and voice of a shared, domestic Anglo-American culture, as well as identified a new, emergent, Colonial voice. Ultimately, the ability of domestic practitioners to both adopt new herbs, and then to adapt them to the existing practice, reflects both the role, and the importance, of the individual within a broader domestic botanical culture. In eschewing dogmatic categorization of botanicals, domestic authors, even in their personal individualization of agency and application, demonstrated shared practice and experience. Ultimately, their ability to both adopt new herbs, and then adapt them to the existing practice, reflects both the use, and the importance, of plant medicines to both individual practitioners, and for the broader domestic culture. In tracing botanicals via the writings and practice of domestic authors, the thesis has outlined the scope and voice of a shared, domestic Anglo-American culture, as well as identified a new, emergent, colonial voice.
Glossary

Antilithic A medicine used in the treatment (both the dissolution and the prevention) of calculi (kidney stones).

Antimony A highly toxic salt used in historical medicines.

Antipruritic Anti-itch.

Aromatick Any highly scented plant used in medicines, though these also appeared in culinary recipes as well as in wider household use (i.e. in pomanders).

Botanical Pertaining to either a specific plant, or to a plant-based medicine.

Carminative A medicine which reduces or helps to expel gas from the stomach and intestines.

Compounds Mixtures comprised of material from many different (plant or other) sources.

Cordial A liquid medicine to be drunk, often considered stimulating, or ‘bracing’, although medical cordials may equally have soothing properties, as is the case with many aperitifs which act as carminative stomachics, calming the gastro-intestinal system.

Diacodium Also ‘diacodion’. Syrup of poppy (typically made from the opium poppy, *Papaver somniferens*).

Diamber A cordial stomachic medicine containing aromatic material from both animals, such as ambergris and musk, and plants, such as rosemary, lavender, and thyme.

Decoction A preparation made by steeping or soaking plant material in a hot liquid, typically water, in order to extract any water soluble constituents.

Distillate The product of distillation. Typically Early Modern and Colonial households prized the aromatic water portion of distillates, often throwing out the volatile oil portion, though this varied across households and manuscript sources.

Dropsy Oedema.

Diuresis Increased production of urine.

Electuary A medicinal paste made by mixing a powdered substance with
honey or syrup. Also known as a ‘lectuary’ or ‘lecturey’.

**Expectorant** A medicine which both loosens and promotes the expectoration of mucus or phlegm from the respiratory system.

**Glister** Also ‘clyster’. A type of enema using a plunger mechanism and syringe to deliver the liquid into the rectum.

**Macerate** v. To steep or soak (in order to both soften the plant material, and to aid in extraction of plant constituents, typically using a cold liquid as opposed to a hot liquid *decoction*). n. The liquid resulting from the maceration of plant, or other, material.

**Materia medica** A collected body of medical agents; commonly used to describe herbal and homoeopathic formulary. The term refers equally to books which contain these lists of medical agents, and to the corpus of agents themselves. Thus *materia medica* may refer to a book, or type of book, as in ‘she consulted Bartram’s *materia medica*’, or to a specific body of medicines, as in ‘thyme is well established member of the European *materia medica*’.

**Menstruum** The holding, base liquid for a medical preparation. Often considered inert, the menstruum certainly affected the botanical’s action indirectly (for example, in terms of its action in extracting and preserving plant molecules) and directly (for example, the alcohol content alone in certain remedies would have had an effect on the nervous system if taken in quantity).

**Nephroliphic** A medicine for the treatment of kidney stones.

**Pleural** Also ‘pleurifical’. Pertaining to the lungs (in reference to the pleura which line the cavity containing the lungs).

**Polychrest** A ‘cure all’ medicine that may be widely applied to any number, or all, diseases.

**Polypharmacy** A medicine made containing many ingredients, typically ten or more.

**Receipt** Recipe.

**Rubefacient** A topical medicine containing irritant, inflammatory ingredients which, when applied, stimulates localized blood flow.

**Simple** A medicine made from a single raw ingredient, ‘simples’ are made from single plants in herbal preparations.

**Stilliard** Also ‘steelyard’. A portable ‘table top’ scale for measuring domestic quantities of goods.
Stomachic: A medicine which soothes the stomach.
Sudorific: A medicine which promotes sweating.
Surfeit water: A liquid medicine often used to treat indigestion which is generally made from a combination of floral waters (hydrolats).
Sympathetic: Mutually supportive, synergistic agents.
Topical: A medicine that is applied externally, to a particular area of the body.
Unguent: A topical agent, a salve, cream, or ointment.
Vermifuge: A medicine which kills, or expels, intestinal worms.
Vollital: An unstable liquid medicine which evaporates on contact with air.
Vulnerary: From the latin ‘vulnus’, meaning ‘wound’; a vulnerary is a medicine which aids in the healing of wounds and restoration of healthy tissue.
Appendix 1a

BL.Add.ms.57944, f.10r, Mary Glover’s culinary and recipe books, 1688.

Appendix 1b

BL.Add.ms.57944, f.151v, Mary Glover’s culinary and recipe books, 1688.
Appendix 2a


FSL.ms. W.a.332, unfoliated, Ann Goodenough’s cookery book, 1700-1775 ‘the duchess of somersetts hog hoof powder good against the gravel’, p.98

Appendix 2b

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