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## **THOMAS LINACRE AND MEDICAL TRANSLATION**

"He left... an example of a life of devotion to learning, to medicine and to the interests of humanity." This succinct tribute, penned by one of the few known biographers of Thomas Linacre, summarizes in a somewhat understated fashion the innovative accomplishments of England's first medical humanist. Perhaps as a result of geographical isolation, the revolution in secular thought that was sweeping the European continent, fuelled by the rediscovery of ancient Greek and Roman philosophy, was only much later transported to the British Isles. Linacre is credited with introducing scientific rationalism to English medical practice, both through his translations of the Greek physician Galen's writings and through his activities that were intended to instill some accountability into the practice of medicine.

Of Linacre's personality, however, little is known. The various biographical analyses available reveal characteristics that would typically be associated with the above-listed accomplishments, specifically a thoroughness of erudition, a taste for austerity, a certain amount of intellectual modesty, and an overall benevolent nature.

### **Biographic details**

Thomas Linacre was born in 1460, in the city of Canterbury; no details are known about his childhood, however later records indicate the existence of three siblings. It is believed that he began his education at Canterbury, in the school of Christ Church monastery, under the tutelage of William de Selling. This teacher, who had spent part of his life in Italy and brought back a number of Greek manuscripts, was a significant influence on Linacre's academic orientation, since it was he

who instilled in the young student a passion for the Hellenistic civilization that constituted an important factor in Linacre's later development as a translator.

At the age of 20, Linacre was sent to Oxford, where he is believed to have pursued his Greek studies under Cornelio Vitelli (said to be the first professor of Greek studies based in England). It can be construed that Linacre's interest in Hellenism placed him in the minority, since Latin was still considered the language of erudition in England. The somewhat austere picture of life at Oxford during this era confirms the personality traits Linacre developed in later years: "Studies scholastic, life monastic express in a sentence Oxford at the end of the 15th century."

In 1488, Linacre was invited to accompany de Selling as an envoy to Rome, but he changed his route in Bologna, after meeting Angelo Poliziano, de Selling's former teacher. Linacre opted to accompany Poliziano to Florence, where he was afforded the opportunity to pursue his Greek studies at the court of Lorenzo dei Medici, along with the young princes Piero and Giovanni, under the tutelage of the scholar Demetrius Chalcondylas.

Two years later, Linacre moved to Rome, where he met Hermolaus Barbarus, a well-known medical scholar who transmitted to the student his keen interest in the works of Dioscorides (the Greek pharmacologist whose interest in botany engendered an extensive study of plants called *De materia medica*, which became the definitive pharmacologic work for nearly fifteen centuries). Barbarus is credited with having inspired Linacre to pursue the calling of medicine, and it was during this period that Linacre is believed to have felt the first stirrings of interest in Greek medical translation and the works of Galen. In 1492, he was accepted at and obtained a medical degree from the University of Padua, the most reputed school in Europe at the time.

Upon his return to England in 1499, Linacre was designated a "Medical Doctor" and appointed lecturer at Oxford. He also distinguished himself as court physician and tutor (during which period

he composed two Latin grammars), and through later fellowship endowments (financed through the sale of various ecclesiastical positions). Linacre also founded the Royal College of Physicians, which represented the first definitive attempt, through the establishment of a formal governing body, to introduce some form of accountability to the practice of medicine.

No clear picture exists of Linacre's personality, however various biographers have succeeded in extrapolating certain characteristics, including erudition, austerity and modesty ("[a] love of letters and of retirement,... celibate life and... indifference to honours"); a benevolent nature and a lack of concern for petty jealousies; an adamant adherence to his own theories and a zeal for professional thoroughness ("a man so completely learned in all manner of disciplines, as to be in nothing, I may say, other than over scrupulously attentive [in the practice of medicine]"); coupled with an acute sense of literary and scholarly judgment and an unparalleled sincerity of purpose. Two other characteristics include his focus on practicality and the methodical nature of his procedures ("[W]e retain more an impression of a practical, exact, and human scholar").

### **Historical chronology**

Linacre's lifespan encompasses the reign of the last two kings of the House of York, as well as those of the first two monarchs of the House of Tudor.

Edward IV (1461-70 and 1471-83): During Linacre's childhood and early student years, England was embroiled in the Wars of the Roses, with King Edward successively battling the House of Lancaster, the state of France, and the Duchy of Burgundy. Another internal enemy was the Earl of Warwick, who deposed the king in 1470 and installed his own puppet monarch, Henry VI. Edward retook the throne in 1471 and maintained his reign for twelve more years.

Although social stratification was still entrenched in this primarily agrarian society, the 15th century was an era of significant economic change, with England seeing the decentralization of property management, the slow dismantling of its feudal system, and increased exposure to European culture and commerce due to the growth of the wool and textile industries. The second term of Edward's reign was characterized by an accrual of power to the monarch, a marked lack of political violence, and the imposition of fewer levies.

With no clear line of succession in place at the time of Edward IV's death, his brother Richard III (1483-85) was first installed as Regent and then went on to earn the title of "Usurper". Richard was seen as dictatorial, imbued with an unrelenting drive for power and attributed with a penchant for executing all perceived enemies, including Edward's two young sons, who had been imprisoned in the Tower of London. He was abandoned by his supporters and killed in battle. Economically, Richard III's reign, which corresponds roughly with Linacre's Oxford days, was characterized by minimal taxation and protectionism.

Henry VII (1485-1509) and Henry VIII (1509-47): Thus began a 118-year dynasty under the House of Tudor, which was characterized by political astuteness and socio-economic prosperity. One example of the first was Henry VII's decision to engage in a marriage of convenience in order to resolve the York/Lancaster conflict, an event that assumed personal significance for Linacre, since it afforded him the opportunity to travel to the Continent as a member of de Selling's entourage (de Selling was assigned the mission of obtaining a Papal dispensation for the royal marriage).

England's newfound socio-economic prosperity is attributed to the increased benefits of the wool trade: "[Henry VII] achieved... a secure and permanent dynasty because England in 1485 was moving into a period of unprecedented economic growth and social change." The period is also noted for its centralized justice system, with emphasis on the rule of law. In summary, both of these monarchs are credited -- albeit in the context of their own personal agendas -- with bringing

England out of the medieval era: the former through economic, commercial, and judicial reforms, and the latter by divesting the Catholic Church of its all-pervasive control of the country. Upon Linacre's return from Italy seven years later, he would have found the new post-medieval England to be philosophically fertile ground for the seeds of the new humanism.

## **Cultural backdrop**

Any overview of the Humanist period necessarily begins with a definition of "humanism", typically seen as synonymous with secularization: "[a series of] beliefs, methods, and philosophies that place central emphasis on the human realm". The concept also incorporates an ideal known as *humanitas*, a Latin term designating the completeness of human virtue through compassion, benevolence, prudence, eloquence, strength of character, sound judgment, and love of honor, specifically, the complementary union of reflection and action. Concomitant with this ideal were the notions of man's reliance on his perception processes, of self-sufficiency in ethics and politics, and an anthropocentric perspective in the plastic arts.

Prior to the humanist period, the Western world was barely cognizant of the ancient Greeks' knowledge of medicine: the key concepts, rendered by medieval translators who had misconstrued the message of their source texts, were largely incomprehensible, and pre-humanist era was marked in fact by a regressive mentality: "Greek doctrine was diluted by medieval interpretation and medieval belief; terminology was badly confused; spurious writings... falsified the Greek position, and, generally speaking, the rational, scientific spirit of the Greeks was sacrificed." The year 1543, which saw the first widespread print distribution of Copernicus' major works and of Vesalius' study of anatomy, heralded a definitive transition from ancient medievalism to a context of scientific, rational thought.

English humanism did not become predominant until the late 15th century: "The influence of the Italian Renaissance in learning and culture was very limited before 1485", and on the whole, this century was regarded as a period of relative literary sterility (post-Chaucer). Two phases of English humanism have been identified: the academic one (defined by Sir Thomas More's utopian projections) and the poetic one (characterized to some extent by Shakespearean theater). It was also a key period for educational progress, which saw the establishment of numerous schools and colleges (including Eton in 1440, and Cambridge in 1441).

It is widely hypothesized that Greek classics constituted a minimal component of Linacre's Oxford studies. "[M]edical training in the two English universities remained completely medieval and rather philosophical than scientific". This reluctance to embrace the revolutionary new school of thought has been attributed to a concern with philosophical reprisal: "[T]he vast majority of [English] scholars... felt that [the spread of Greek thinking] might well produce a philosophical revolution, so that efforts to introduce this more ancient classical language were looked upon as a subversive and even heretical activity."

Linacre's extensive knowledge of Hellenistic culture was developed in Italy, where his various teachers guided him through the study of Pliny, Homer, Plato, and Aristotle. A later invitation to join the prestigious Aldine Academy, an institution dedicated to the study and dissemination of the Greek classics, speaks to his excellent mastery of the language.

From a medical perspective, however, the most significant influence on Linacre's development as a humanist remains his education at the University of Padua. Armed with his excellent mastery of Greek, it is believed that he was able to progress and develop an interest in more practical subjects (anatomy, pediatric disease, and clinical medicine), which served as a counterpoint to the abstract quality of classical texts.

The University of Padua stood out for its prestigious medical

training, which was mostly secularized, but also comprised an undiluted theological element. Both components of the program bore marks of their medieval origins: the theoretical, through Avicenna's fundamental theories (elements, temperaments, and humors), and the practical, through the study of fevers and the symptoms, diagnosis, and therapies of other conditions. At the same time, the Padovian arena was also the site of numerous innovations in the Renaissance style, such as the technique of dissection and the introduction of specialties like pediatrics and geriatrics.

### **Translation works**

It is widely acknowledged by historians that Linacre's introduction of European humanism, through his translation work, constitutes his outstanding contribution to English medicine. His corpus, which consists almost exclusively of Galenic medical works rendered into Latin, speaks to the inspiration afforded by his Italian training: "It must have been at this period [during his time at the Vatican] that he had access to the Greek manuscripts of Galen's works from which he made the translations published many years after."

Aside from Proclus' *de Sphaera* (published 1499), a joint collaboration with two friends on a work of Aristotle (unfulfilled by his two collaborators and therefore never published), and three other treatises (two of them by Paulus Aegineta), the Galenic corpus comprises the largest part of Linacre's translation work (a brief summary of the SL text content has been provided, where applicable, since this would constitute an integral component of any analysis of the translator's work) :

1. *De Sanitate tuenda* (Paris, 1517): a treatise on hygiene.
2. *abMethodus Medendi* (Paris, 1519): a work on medical treatment, considered the last in a series of three volumes dealing

with the key components of medicine; the first is either lost or unidentified, and the second is presumed to be #1 above.

*De Temperamentis* (Cambridge, 1521): Galen describes the nine human temperaments as primary qualities that are either single or coupled (i.e., always possessing one of a pair of attributes, as in "hot/cold" and "wet/dry"), and therefore conducive to mathematical plotting. He then connects this theory to variations in prophylaxis, diagnosis, and treatment modalities, based on certain Aristotelian concepts regarding human character and the notion of continuity in humors. The Galenic distinction between foodstuffs and drugs is also expounded in this work, thereafter attaining wide applicability in the fields of pharmacology and general therapy.

*De Inaequali intemperie*: This complementary work was intended as a requisite precursor to Galen's works on pharmacology and therapeutics, anticipating entry #4 below.

*De Symptomatum differentiis et causis* (London, 1524, posthumously): Galen's discussion of the causes of fever, both internal and external.

Also of interest are Galen's treatises on physiology and the pulse, respectively titled *De Naturalibus facultatibus* (London, 1523) and *De Pulsuum usu* (London; 1522, 1523, or 1524, according to various sources; attribution also varies).. In *De Pulsuum usu*, Galen draws a parallel between arterial and respiratory function, defining the former system as a cooling agent and the latter as a purificator (comparisons are also drawn between diastole/systole and inhalation/exhalation).

In addition to the foregoing general descriptions, other qualities identified in Galen's works would also have been pertinent to both Linacre and his analysts: the flowing style, perspicacity, and technical pertinence of Galen's treatise on personal hygiene are in stark contrast to the repetitiveness of the text and the author's use of abusive language and elegant phrasing.

It is unclear whether the societal and philosophic backdrop of Galen's time was taken into account by Linacre as he undertook these



translation projects. Various analysts of the English humanist have pointed out certain factors that merit a brief mention: Galen's presumed intellectual arrogance, his elitist view of social stratification, and the overall worthiness of his practical advice, grounded as it is in the context of the Greek view of humors. By contrast, his thinking in medical psychology is much ahead of that the Renaissance writers: he refutes the Stoic thinking that πάθη (i.e., the Ciceronian "perturbationes" or Aquinas' "passiones animae") can only originate in misdirected cognitive processes; Galen recognized that empathy is a necessary component of psychoneurosis therapy.

Linacre is thought to have sharpened his interest in Greek medical knowledge after witnessing the dearth of scientific rationalism in English medical practice. Appalled by the proliferation of questionable medical practices, bordering on atrocity, quackery, and near-sorcery, that characterized the post-medieval era, he hoped that the introduction of comprehensible Greek medical knowledge would serve to improve the quality of medicine in England: "It was to combat this situation of medievalism, ignorance, and superstition that Linacre now devoted himself in his new-found leisure to the translation from Greek into Latin of a number of Galen's medical writings. From his point of view he was making superior medical literature available, and by contrast to English publications of that time he was correct. His goal was to help the practising physician, and in consequence he decided to present those works of Galen which had application to clinical medicine."

One commentator points out, however, that Linacre was applying an extended perspective to the question: having already established the lack of credibility that characterized the then-extant translations of Galen's works, the fact remained that these works constituted the only available source of invaluable, essential medical information. It remained to be decided if Galen's work had to be completely revamped or if the existing translated corpus was of any value: "Linacre was familiar with Galen's writings. The problem he had to solve as an educational reformer was whether Galen's teachings were so bad that no selection of

his writings could be made into an elementary text-book, that a root and branch reform was imperative, or whether Galen not as a vague oracle but as a writer known at least at second-hand might be a useful teacher."

## **Linacre's translation method**

### **and conception of the translation process**

The various testimonials of Linacre's contemporaries attest to the fact that he was scrupulous about meeting his self-imposed objectives. Character traits such as meticulous attention to detail and a serious attitude to scholarliness speak to a careful execution of the appointed tasks, and the overall success of his translation ventures (within the context of humanism) is succinctly summarized by one particular commentator: "It is certain that Linacre attached great importance to the preparation of a correct and readable translation of Galen's works and himself made valuable contributions to this task."

Of the one fairly specific analysis that has been conducted of his various Galenic translations, only a summary can be presented, since this writer's nonexistent grasp of Greek and minimal knowledge of Latin preclude any authoritative examination of the minute examples provided. The sole common factor pointed out in all of the works discussed (entries 1 through 4 in the preceding section) is the presence of gaps or omissions (*lacunae*) minor enough to be deemed permissible. Further evaluative comments are as follows:

*De Pulsuum usu*: an extremely faithful rendition.

*De Sanitate tuenda*: the gaps have been filled in through the insertion of text within square brackets.

*Methodus Medendi*: termed an exemplary rendition, characterized by the "translator's elegant and exquisite style, noting Linacre's preference for the *prisca scribendi vertendique severitas...*" Linacre himself comments on the lengthy, tedious wordiness of the

piece, invoking the reader's indulgence in overlooking the infrequent flaws caused by the monotony of the task. (Presumably in an effort to restore his reputation for scholarly meticulousness, he succeeded in incorporating 2,225 "emendations" in another version published prior to his death.)

*De Symptomatum causis*: omissions are attributed to hasty translation or SL text superfluity, among other factors.

The author also presents a summary of four specific techniques employed by Linacre in his Galenic translations:

Neologism would appear to have been used only as a last resort, with specific examples such as "symptoma", "phlegmone", "apotherapia", "symmetria" being cited from *De sanitate tuenda*. It is postulated that this technique was rarely needed, since the TL language (Latin) was developed enough to absorb all the nuances of the original text: "...[H]e exploits to the full the resources of a language now enriched by more than 1,500 years of pagan, patristic, and scholastic activity." In addition, numerous examples of nouns, adjectives, and verbs drawn from medieval Latin are cited, as are various forms drawn from Greek neologisms, such as "erysipelatosus", "oedematosus", "phlegmonosus", "membranificus", "nervificus", and "ossificus".

Doublet, defined as the use of two elements (or more specifically, synonyms) occurring in pairs connected by conjunctives or disjunctives, is considered an innovation with Linacre: it was only after his death that the technique was unearthed in the works of early Latin writers and adopted by humanist scholars. A related technique cited is the use of rhetorical *abundantia* or pleonasm.

Gloss is the use of annotations to situate or explain words borrowed from the SL (Greek); the author points out that Linacre takes care to present the various meanings of the word used and specifies which particular meaning is to be construed in the particular context.

Periphrase or circumlocution is another technique resorted to in cases where no equivalent exists and where none can be formed through neologism: "[C]ertain Greek terms could only be rendered in roundabout fashion."

The universal consensus is that Linacre's methodology, and particularly his use of the above-described techniques, is justified in the light of his overall objectives. "[T]here is no doubt that Linacre was a considerable and meticulous scholar... Praise of his scholarship occurs in many of the texts we have had occasion to quote."

He succeeded in revolutionizing the practice of medicine not only through the rendition of comprehensible and well-executed translations, but also through the introduction of reliable scientific principles. Perhaps the most telling testimonial originates with one of his closest friends, an eminent figure of Western thought in his own right: "Erasmus said that Galen, in Linacre's version, spoke better Latin than he did Greek in the original, and Aristotle in Linacre's Latin had a grace of style hardly equalled in his own tongue."

### **The impact of Linacre's translations**

As stated earlier, Linacre's overriding motivation was to introduce an element of rational thinking and scientific methodology, through the translations of Galen, which he perceived as being of incalculable potential benefit to mankind, into the quagmire of medieval superstition that was English medical practice. It is generally agreed that his translations were radically instrumental in achieving this goal: "As a medical humanist Linacre's contribution lay in his introduction to English physicians of a series of classical medical texts which he considered as essential to any reputable physician and which were in fact superior in quality to other medical writings then published in England."

His achievements, however, apparently became self-perpetuating: the very methods brought to light by the Galenic corpus were ultimately used to refute certain misconceptions that prevailed in Greek thinking, but not without a certain amount of controversy. In the early 16th century, classical studies were seen as a progressive (possibly dangerous) enlightenment of medical theory, in direct contrast to the conservative school of thought that wished to preserve the medieval tradition. By the mid-16th century, however, proponents of the Galenic school of translation were cast in their turn as adherents to a so-called conservative viewpoint, since they refused to acknowledge the possibility of advancement beyond the teachings of the classical Greeks. This placed them in opposition to the anti-Galenists, deemed to be progressives, who espoused the very same scientific testing on which had been based the teachings of the ancient Greeks: "It was in consequence of that earlier conflict at the opening of the century that the seeds of modern medicine were planted, developed as roots, and have remained partly imbedded in the medicine of classical Greece."

Although the influence of Linacre's work did not persist for more than ten years following his death, the study of Hellenistic culture in England continued despite its medical roots being consigned into oblivion. His reputation is therefore predicated on his successful transformation of English medical knowledge through the introduction of classicism, thereby enhancing the Continental view of English academia: "...during the early years of the sixteenth century[, Britons were no longer looked on as barbarous.] Britain had come of age culturally and it was Linacre and his colleagues, all of whom had imbibed large doses of Italian humanism, who were responsible for this metamorphosis".

## **Conclusion**

Although this study of the various analyses of the life and work of England's first medical humanist reveals a somewhat limited catalog of

personality traits, this does not in any way detract from his accomplishments. Linacre's thoroughness, erudition, taste for austerity, intellectual modesty, and overall benevolent nature, not to mention his scholastic integrity and professional thoroughness, bespeak a figure who believed in the intrinsic value of his work, without any thought for personal stature. It can only be assumed that his unprepossessing nature has caused him to be consigned to a status of relative oblivion, but the English medical and academic professions have certainly installed the appropriate monuments of recognition to his accomplishments, specifically the legitimation of the English medical profession (and, by consequence, Canada's) and the radicalization of medical thought through the introduction of classicism.

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