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Evidence of audience in MS Hunter 93, a medical text

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ABSTRACT

The aim of this paper is to explore the concept and evidence of audience in the text of MS Hunter 93 (T.4.10), a remedy book written in the second half of the 16th century (c.a. 1565). This manual is presented by its author as a book addressed to anyone who “has not a physician at hand”, so it is presumably intended to a general audience. Several studies about the classification of medical texts have taken into account the audience as a criterion for taxonomy (academic or non-academic). My intention is to show how audience is codified in language by means of strategies such as specific use of vocabulary and the authorities quoted in the running text. My ultimate goal is to see whether the author has really written his text for a general audience, as he affirms in the prologue, or whether he has failed to do so and so we should not take his initial statement at face value.

Keywords: audience, medical text, context of situation, recipes, evidentiality.

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1. Introduction

The study of audience has been a criterion for taxonomy in the classification of medical texts belonging to the medieval period. Several authors as Voigts (1982), Taavitsainen (2001) and Alonso-Almeida and Carroll (2004) have analysed the particular use of the language and the contents of the texts to determine their addressee. Voigts (1982) and Taavitsainen (2001) have characterized the medical texts into academic or non-academic as far as audience is concerned, whereas Alonso-Almeida and Carroll (2004) have characterized them according to the contents into theory-only books, theory-practice books and practice-only books.

Other studies have analysed the use of linguistic and non-linguistic strategies to establish readership in scientific texts (Taavitsainen, 2004), or have concentrated on the concept of audience in medical texts belonging to the fifteenth and sixteenth centuries (Alonso-Almeida forthcoming). My research focuses on the study of the concept of audience in a remedy book written in the 16th century (MS Hunter 93) by considering aspects related to the context of situation and how these are linguistically realised.

The context of situation, first used by Malinowsky (1923), is the environment of the text, that is, the verbal environment and also the situation in which the text was uttered (Halliday, 1989, p. 6). Halliday also refers to the context of culture, defining it as “the way the text is interpreted in its context of situation” (Halliday, 1989, p. 47), it means “the institutional and ideological background that give value

to the text and constrain its interpretation” (p. 49). Both contexts (situational and cultural) refer to the non-verbal environment of a text and so this aspect relates to the concept of potential audience. Halliday (1989) distinguishes three main features to be analysed in the context of situation: the field, the tenor and the mode. The field is related to the facts (what the language is used to talk about), the tenor is the participants (the relationship between the interactants) and the mode is the use of the language (the role language is playing). The application of these to the text of MS Hunter 93 will be described in the description of data section.

In the prologue of the manuscript under survey Hunter 93 (henceforth H93), the author claims the following:

This booke of soueraigne medicines against the most common and knowne diseases, both of men & women, was by good prooffe and long experience collected of Doctor Pfecknam, late abbott of Westminster & that cheifly for those <w>ho have not allway<es> the learned p<hisitians> at hand. (p. i)

In this preamble, the author offers medicines to cure the most common diseases affirming that the book is intended for people who cannot be assisted by a doctor, as if implying that everybody regardless of their literate background could read and use the remedies offered in the book. In order to determine whether this was actually the intention of the author, I will try first (i) to contextualize the text in its historical period, (ii) to analyse the language and registers used by the writer to show how audience is codified in linguistic terms, and finally, (iii) to see whether the author has achieved his initial intention, or, conversely, he has failed to do so.

This said, the structure of this article is as follows: section 2 offers the description and the contextualization of H93; in section 3, the working definitions used as theoretical framework in the present study are given. After this, I concentrate on the description and analysis of the author’s strategies to identify the addressee. The last part shows the results drawn from the present study.

2. Description and contextualization of data: MS Hunter 93

2.1. Description of data

The data for analysis consist in the recipes contained in Glasgow University Library, MS Hunter 93 (T.4.10), whose title is *Booke of Soueraigne Medicines*. This text, ascribed to the medical tradition, was written in the second half of the 16th century by John de Feckenham, née John Howman (1518?, Worcestershire, England – 1584/85, Wisbech, Cambridgeshire), a well-known courtly member and last abbot of Westminster. He took the degree of bachelor of divinity in 1539. For a time he retired to the university and he was rector of Solihull, Warwickshire. In 1556 he took his D.D. (Doctor of Divinity) degree at Oxford.

He opposed Edward VI's advancing Protestantism and spent most of the time imprisoned until the accession of Mary. During Mary's reign he was much employed to preach against the reformed religion and he was made a chaplain to the queen and dean of St. Paul's. With the accession of Elizabeth I in 1557, as he was a leading opponent of the religious changes introduced by this queen, he was sent to the tower of London where he passed the remainder of his life, except for the years 1574-1577.

John de Feckenham was a striking figure, an eloquent preacher and his sermons were very popular. He exercised a moderating influence during the Marian persecution (interceding for Lady Jane Grey and for Elizabeth), and he was one of the most prominent of the Marian churchmen who survived into Elizabeth I's reign and refused to conform to the new religious settlement. He was all his life noted for his benevolence, and in 1576 he built a hospice for the poor who frequented the mineral waters at Bath. All the aspects of his life influenced the contents of his book.

The contents of the book analysed are varied; we find a set of remedies for the head down to the feet in the traditional *de-capite-ad-pedem* arrangement, some recipes giving instructions to prepare medicinal waters, other preparations to restore health, some rules to be observed at the baths, some recommendations to be followed, and so on.

The texts are indexed in a tabula that is offered preceding the recipes. This allows for quick reference in the search of therapeutic help or information. The book presents over 700 recipes, all of them nearly of a same size: between 23 and 28 lines, and written in English although we find some Latin and French words and expressions. We find eleven different scribes who have participated in the volume, but we will be only centered on those recipes written by the main scribe, that is, by Feckenham (ff.1-257). The authority of these folios is attributed to Feckenham by paleographic means. The sources of this compilation of recipes are varied, but they are mostly medieval. An example of this medieval influence is the following four instances, the first one belonging to H93 (a), and the other three ones to the medieval period (b, c, and d), excerpted from: *Medical works of the Fourteenth Century* (Henslow, 1925); *Liber de Diversis Medicinis* (Ogden, 1988); and, *Late Medieval English Medical Receptarium. G.U.L. MS Hunter 185* (Alonso-Almeida, 2000):

- a) *MS Hunter 93, p. 221*: ffor him that hath lost speche in sickness. Take the iuce of sage of primrose with wormewood of like quantitie, and putt it into his mouth (...) it shall helpe him speedily.
- b) *Henslow, MS [A], p. 179*: who so haþ y-lost his speche ius of souþernewode or of primelrose (...) nyme wos of sauge of þe wos of primelrose and do hit in hys moþ and he schal speke anon.
- c) *MS Hunter 185, l. 2009*: for hym that haþ loste his speche in seknesse tak þe jus of sauge oþer of primerole & do it in his mouþ & he schal speke þor3 þe vertu of god.
- d) *Ogden, p. 14, l. 15*: speche: Take sauge or primerose & stampe it wele & anoint his tonge vnderneath with þe jewse & he sall spek sone.

In these four instances, the titles are literatim or very similar; the ingredients are also the same, except for *wormewood* (added in H93) and *souþernewode* (Henslow, 1925). The preparation (*stampe it*) only appears in Ogden (1988), and the application section remains the same in all of them (*put it into his mouth*), except for Ogden's; and all of them present the same efficacy sentence. It reveals the presence of medieval sources in H93 since the recipe persists practically the same as its antecedents.

The recipes under study present a definite generic structure that divides them into different sections which have a set of linguistic characteristics and a vocabulary related to them, as can be seen in the following table:

SECTIONS	PURPOSE	LINGUISTIC FEATURES OF RECIPES
Title	To indicate the beginning of the recipe and what the recipe is good for	<ul style="list-style-type: none"> • Use of noun phrases.
Ingredients	To contain the list of the elements or materials needed	<ul style="list-style-type: none"> • Use of <i>and</i> conjunction to show mainly temporal and result meanings.
Preparation	To guide the reader to combine the ingredients	<ul style="list-style-type: none"> • Vocabulary: medical terms (<i>glistet, beadach</i>) herbs (<i>saffron, elacampana</i>), culinary terms (<i>boil, peel, earthen pot</i>), measures (<i>ounce, pound</i>), verbs related to application (<i>eat, drink, give, do</i>), and cooking verbs (<i>frye, boil</i>).
Application	To show how to administer the product to the ill person	<ul style="list-style-type: none"> • Use of the second person singular pronoun (<i>you, your</i>)
Efficacy	To reveal the expected remedy results ¹	<ul style="list-style-type: none"> • Massive use of imperatives (<i>take, spread, put, lay</i>) • Use of time expressions (<i>when, after, first</i>)

Table 1. Generic structure and linguistic features associated to recipes

This generic structure will help us to analyse the language and vocabulary used by the author to study the intended audience of the manuscript, knowing that the text type used is the instructive one.

According to Halliday's (1989) classification of the context of situation (previously mentioned), the field of this text is the procedure to get a remedy to improve health; the tenor is formed by the writer and the reader (a specialist and the audience); and the mode is that it has been written to be read; to be followed by using commands (imperatives) and to be persuasive through the use of efficacy sentences.

¹ Alonso-Almeida (1998 and 1999) has divided and analysed the stages presented in recipes establishing the purpose and the distinguishable lexicogrammatical features of each section.

2.2. Contextualization of H93

H93 was written in a period in which most people were illiterate. The processes of standardization and vernacularisation were taking place in England and medicine was spreading outside the academic settings because “the practical nature of medicine was undoubtedly a major incentive for the social diffusion of academic knowledge in the field, and through the process of vernacularisation, more people gained access to learning and useful knowledge” (Pahta and Taavitsainen, 2004, p. 2).

In this context the knowledge seemed to be accessible to everybody, but the number of trained physicians was low and their fees were too high for the poor or rural people so the burden of medical practice fell upon country doctors (not well trained but their fees were low), apothecaries (they sold medicines but they had not medical training), wise women and quacks who used remedy books to treat the diseases. This explains the author’s concern to provide a remedy book on hand in situations where there is not a trained physician available.

The healthiness in cities and towns during this period was poor. The towns were similar to medieval ones. They did not have systems of sewers or water pipes, consequently all the garbage and human waste was thrown into the streets so rats, lice and fleas flourished and produced plagues. A contemporary of this period, Desiderius Erasmus (Erasmus of Rotterdam) (1466?-1536)² wrote the following lines describing the health conditions in a letter sent to an English doctor:

Almost all the floors are made of clay and rushes from the marshes, so carelessly removed that the bottom layers sometimes remain for 20 years, keeping there below spittle and vomit and urine of dogs and men, beer that has been thrown down, leftovers of fishes and filth unnameable... It would help also if people made the council keep the streets less dirty from filth and urine.

² Desiderius Erasmus or Erasmus of Rotterdam was a known Dutch humanist, an important figure in patristics and in classical literature. One of his more important works is the first edition of the New Testament. He wrote the passage above mentioned to an English doctor in a letter dealing with how to stop the plague.

Erasmus wrote this passage in 1524 and considered the problems of these poor health conditions in towns during the Renaissance period when dealing with the symptoms and the prevention of the plague.³

This situation made necessary the presence of a physician near people, but as mentioned above, their fees were too high to be confronted by the poor, and therefore they were only available to the wealthy. For this reason during the medieval and the renaissance periods, the remedy books written in English, as the one studied in this article, emerged to supposedly help poor people to recover health and to make medicinal products reachable to a wider audience, as the author claims in the prologue. We will see, however, that this intention is hardly attainable in terms of medical knowledge and availability of products.

3. Audience

The concept of audience is considered as essential to shape texts, since it obviously poses some restrictions so as to the language used. The audience a particular work is envisaged makes the writer select carefully a set of linguistic variables to reach his aim. Let us clarify first the concept of audience since there is some controversy as for how this is applied. Some authors have differentiated between audience, readership and discourse communities. Readership refers to those who read the book; audience is a broader concept that comprises all people that can read the book, and discourse community is more useful and accurate than the previous. Barton (1994) offers the following definition of discourse community:

A group of people who have texts and practices in common, whether it is a group of academics, or the readers of teenage magazines. In fact, discourse community can refer to several overlapping groups of people who read a text; or it can refer to the people who participate in a set of discourse practices both by reading and by writing... More generally, discourse communities are defined by having a set of common interests, values and purposes (p. 57).

³ The plague, mostly known as the *Black Death*, was an infectious disease that spread out during the 14th century all around the world. It was one of the worst pandemics in human history. During the Renaissance period there were three plagues: in 1563, in 1585-1587, and in 1593.

This definition encompasses the sense of readership and audience. In this paper I present a distinction between the intended or pocket audience and the general or potential audience. The former is conceived as the actual people to whom the text is addressed to, that is, “a reduced, often small, group of likely readers” (Alonso-Almeida, forthcoming), and the latter is all those who can read the text, although they are not able to entirely understand it (McDowell, 1988, p. 19). Throughout this article I will consider which the pocket and the potential audience of the book under study are, and the implications for the lexicogrammatical choices made by the author.

As previously said, the author explicitly states from the very beginning his intended audience in the following terms: “for those who have not allway<es> the learned p<hisitian> at hand” (p. i). With these words, he alludes to the practical nature of the book, asserting that this manuscript has been written to help anybody to cure from illnesses. In this case there is neither economical nor social distinction. Thus, he adds that the book is about the most common and known diseases assuring that the remedies have been proved, and hence effectiveness is somehow guaranteed. In this prologue, the scribe establishes that the intended and the potential audience are the same; both, professionals and non-professionals can buy and read the book to learn about the remedies.

4. Author’s strategies to identify the addressee

In the medical compilation under survey audience is codified in different ways. These allusions to audience have been scrutinized through (a) the presence of code-switching, (b) the references to authorities, (c) references to commerce and expensive products, (d) the presence of some surgical practices, and (e) the use of general extenders. I will comment on each one in the following sections.

4.1. The presence of code-switching

Code-switching can be defined as “the co-occurrence of different languages within individual texts” (Pahta, 2004, pp. 35-36). In the period under surveyed, Latin, French and English coexist: Latin and French as those remainders of “the

social and literate elite” (Pahta, 2004, p. 35) and English as “a spoken vernacular, marginal in written culture” (Pahta, 2004, p. 36). This coexistence materializes in H93, where code-switching appears on many an occasion, as is manifested in the examples presented in this paper and that will be commented in due time.

Occurrence of code-switching in every stage of the recipes suggests the presence of a specialized audience. This is contrary to our expectations because, if the intended and potential audiences are the same, it means that the reader will find a consistent and clear vocabulary, accessible to all kind of public regardless their diastratic condition.

The titles of the recipes examined are mostly written in English. It evidences that the information presented is accessible to anyone. However, there are some examples of code-switching, in which Latin and French words appear, as we appreciate in the following examples:

- (1) Pro gonorrea passione (p. 114)
- (2) Aqua mirabilis et pretiosa. (p. 244)
- (3) A drinke for the Gowte festred. (p. 108)
- (4) A good powder to helpe one that hath Collica passio. (p. 52)
- (5) ffor the Collique or Illiaca passio, and a greived stomach,
A speciall good drinke (p. 53)

In examples (1) and (2) the titles are completely in Latin. The presence of these two examples of code-switching makes us think that illiterate people were not able to know what the remedy is for, so if the user of the book did not know classical languages, he or she would not be able to understand the meaning of the title. Knowing that “the majority of the population was undoubtedly monolingual and only spoke English, but for the higher and educated parts of the society, monolingualism must have been rare” (Pahta, 2004: 74), the audience is not formed by illiterate people, but by a learned one.

In number (3) the name of the disease treated is in French. In this case if the reader does not know the vocabulary that refers to the illness (*Gowte festred*), it will be difficult to apply the remedy without knowing what it is for. In (4), apart from inferring the assertion of the validity of the remedy presented by using the word *good*, the name of the illness is in Latin (*Collica passio*). This cannot

be understood by illiterate or rural people who have no training in Latin, and therefore they do not know that the remedy is for a disease characterized by severe abdominal pain or colic.

In the last example (5), the author has used the English word (*collique*) together with the Latin word (*illiacca passio*) to refer to the disease, may be as a way to address to a wider audience, as was his first intention. In the five examples the author has employed some words belonging to other languages rather than English to refer to the diseases. These terms pertain to a specialized vocabulary only known by those people with some medical knowledge.

The second section presented in the recipe deals with the ingredients. This stage gives the name of the products and the measures that are necessary for the remedy. This section starts with the verb *take*, followed by a list of plants or other products, as we can see on examples (6) and (7):

- (6) Take two groats waight of fine ginger, and iiii groats waight of Elacampana Roots, and vij groats waight of the powder of Liquorice, and viij groats waight of the powder of Anniseeds, and three ounces of Sugarcandy (p. 55)
- (7) Take Bole Armoniake, Sanguis draconis, et terra Sigillatum, of each like much (p. 142)

In the first example (6), the author recommends *ginger*, *Elacampana roots*, *liquorice*, *anniseeds*, and *sugarcandy* as ingredients. *Elacampana* and *liquorice* are examples of Latin and French loans, respectively. The quantities given for each product are the ones established: *groats waight* and *ounces*. It means that they belong to a system of measurements so any reader who knows the products, only has to take the accurate extents, following the standard measurement units. It implies a previous knowledge of the standard units by the reader.

In the second instance, the Latin terms *bole armoniake*, *sanguis draconis*, et *terra sigillatum* are also examples of words referring to products (in the case of *bole armoniake* and *terra sigillatum*), or to a plant in the case of *sanguis draconis*. Being conscious of the fact that the author was an abbot and he had a good knowledge of the Latin language because “Latin was the institutionalised lingua franca of the church, government, and learning” (Pahta and Taavitsainen, 2004, p. 8), the expression *bole armoniake* has been anglicised, possibly to be understood by a

wider audience. In this case, the author should have used *Armenian bole* or *bolus armenicus* (Latin form). These products are only recognised by an expert or by someone used to working with them.

In the same example (7) the scribe uses his own system to refer to quantities: *like much*. He does not use a standard system of measurements; the measure has to be interpreted by the reader relying on their own expertise, if they had any, so it all depends on previous knowledge, or even chance. To this respect, Alonso-Almeida (1998-1999) claims: “inaccuracy of measurement could also refer to the inexperience of the scribe in medical theory, or metrology; or it could be just that the scribe assumed a certain degree of medical competence in his readers” (pp. 57-58). The scribe of H93 was a learned man so by using such vague measurements, he is assuming certain degree of qualification in the reader, thus constraining audience.

In other recipes the scribe gives, as ingredients, the names of some medical compounds that are familiar to medical practitioners as *diacameron* and *diamargariton*, but which are most certainly unknown to a general audience. The former is a medicinal compound of syrup and mulberry juice, whereas the latter is a preparation similar to the diacameron, but with pearl as the main ingredient.

In the preparation section, the use of a specific vocabulary belonging to other languages is also found:

- (8) and strayne it through a Cloth into
a Vessell of glasse (p.79)
- (9) putt them in a Possnett with faire water (p. 106)

In (8) and (9), the use of the terms *vessell* and *posnett*, reveals the presence of French words in this recipe section. The ignorance of the reader in relation to the containers where the remedy must be prepared, possibly will affect the expected result, so the reader must be again a person with knowledge in the art of healing and cooking to be able to recognize the containers where the remedies must be elaborated.

In the application section the verbs and the explanations found are understood without difficulty, and so anyone is able to apply the product, as can be observed in (10) and (11):

(10) And drinke a spoonefull or two thereof morning and evening (p. 59-60)

(11) And lay it plasterwise vpon the wound and canker (p. 63)

In these two examples, the verbs used (*drinke* and *lay*) do not require any previous knowledge to be understood, although the words *wound* and *canker*, in (11), imply a degree of familiarity with these concepts to be understood, so they are addressed to a specialized audience.

In the efficacy sentence, where the author presents the validity of the remedy, there are also Latin expressions as can be appreciated in the following instances:

(12) *Probatum* (p.112)

(13) *Probatum est per D: ff:* (p.69)

Examples (12) and (13) are written in Latin and they confirm that the remedy has been proved, being this a guarantee of the value of the remedy for those who know this classical language. The presence of these expressions suggests that an illiterate person might not be able to identify that the remedy has been proved and is effective. However, it may also point to some hidden intention of the author. The use of the word *probatum* might sound more learned and more credible to the folk laity who may easily retrieve the meaning *probate* in English. In other words, the use of *probatum* implies a higher degree of academicism which can be trusted thoroughly.

Another example that shows the premise that people need knowledge in the art of healing and in the classical languages is the presence of complete sentences written in Latin, as is seen in (14):

(14) ffor all diseases and paines in the
Back and sides.
Oleu^m de Pipere Vlpium & Philophorum, bee good
for all paines in the Back; And if the paines come-
of heat, Take vnguentu^m de Papauere. These
Pills purge the matter, which causeth paines in
the Back, Pillule aggregate Majores de Serapine,
et de opponare /. (p. 37)

In this instance, the majority of the ingredients are in Latin. The reader must recognize the ingredients presented as the *oleum de pipere vlpium & philophorum* and *papanere* to get the like effect. The last sentence of the remedy is completely in Latin (*Pillule aggregate Majores de Serapine et de opponare*) and, if the reader is not able to interpret its meaning, the medicine will not be the predicted one.

4.2. References to authorities

The reference to authorities is another strategy used in H93 to manifest audience. The use of these references is sometimes caused by the necessity of the writers to quote their predecessors, or as a stratagem to evidence the validity of the recipes. In the following example we find a reference to the advice of a physician or apothecary:

- (15) Take the powder of Bourage fflowers, the powder of –
Nuttmeggs, white Amber likewise in powder, the –
Bone in a staggs Heart, the powder of Cynamon, all
these in powder, and drinke it luke warme, with Beere,
Ale, or wyne, Evening and morning, and the Party ~~-
greived, shall fynd ease; These things must bee propor=
=cioned by the advice of a Phisitian (p. 124)

In this instance the author, after giving all the remedy, claims at the end that all the ingredients must be proportioned by a physician. The evidence presented here does not mean that the book has been written “for those who have not a physician at hand” which was the author’s first assumption. On the contrary, people need the presence and the advice of a physician (according to the author, although he is really referring to an apothecary) to get the recommended ingredients, so this book is not as useful for anybody interested in maintaining or restoring health as suggested earlier in the compendium, without the expertise guidance.

Other examples in which the scribe uses the reference to authorities are:

- (16) A Note to make a Pynt of Barly Creame,
very good for a hott or burning Ague, or –

- for a hott liver especially, vsed by the –
Lord Keeper./ (p.17)
- (17) Proued by mr Bauker. (p. 16)
- (18) A dyett for a burning Ague, made by-
the Queens males Phisitians./ (p. 17)
- (19) A Soueraigne water devised by doctor –
Stephens, Phisitian to the Archbⁱshopp of –
Canterbury, which hee vsed and p^reserved
his health thereby, and kept it long secrett,
and at his death confessed the same./ (p. 215)
- (20) Doctor Wendyes Medicine for the Gowte. (p. 109)
- (21) A speciall Medicine for the Gowte, vsed of many noble Personages (p. 109)

In all these examples the author cites contemporary doctors and noble personages of the period. We do not know if the laity knew all these authorities but the author uses their names to persuade the reader about the efficacy of the remedies presented giving more validity to the medicine, either because they are supposed to have been cured from the existing diseases, as in examples (16), (17), and (21), or because the remedy has been made by a professional physician, as in (18), (19), and (20). Thus the making of the water presented in (19) has been a secret. This confers a major value because it has been used by court members and by people belonging to the high class, and the author is revealing the secret to lay people.

The occurrence of these references to authorities exemplifies evidentiality. According to Grossman and Wirth (2007), “evidentiality covers all marks signalling what testifies to the validity of the information stated by a speaker or writer” (p. 32), so its “primary meaning is source of information” (Aikhenvald, 2004, p. 3). The authorities mentioned are the source of information since the recipes have been proved earlier by well known people. Following Willet’s (1988) classification of evidentiality in information that can be attested, reported or inferred, the authorities mentioned confirm that the information presented has been attested.

4.3. Commerce and expensive products

Another aspect that seems to constrain audience is the presence of some products that cannot be easily obtained because they are either too expensive or too difficult to find. This is the case of the *unicorne horne*. The unicorn horn is considered to be obtained from the legendary unicorn, but it is in reality the horn of a rhinoceros, narwhal, or other animal. It was used against poisons and it was very expensive and difficult to acquire.

Sometimes the author also proposes some compounds as *methridate*, a much dear compound, and some products as the *cypress*, a cloth made of gold or any other precious stone, only accessible to the rich. The writer also cites some products that come from other countries, such as *Portingale sugar*, *Rbenish wine*, *alligant* (wine from Alicante), and *lignum vitae*. These are products of the foreign trade that were fairly inaccessible to common unwealthy people.

4.4. Surgical practices

A practice that appears in the book and belongs to the learned tradition is *bloodletting*, as can be observed in example (22):

(22) The opening of a Veyne in Agues./
If Age will suffer it, the cutting of a Veyne before
the coming of the fitt, destroyeth greatly the Ague;
lett it bee vsed often, and a little at once./

In this instance the cut of a vein will stop the fever. This is a surgical practice that must be made by a specialist, not everybody can cut or open a vein without taking the risk of an eventual haemorrhage. Thus, the absence of the name of the vein, which must be cut, reflects that the reader must be in possession of suitable knowledge. This venesection is supposed to draw off all corrupt matter from the body. Referring to this practice, Siraisi (1990) explains:

Practitioners could inform themselves from the technical literature as to conditions for which bleeding was appropriate, together with the correct vein to

incise for each... Also provided were rules and recommendations regarding the patient's diet before and after the procedure and appropriate season of the year, phases of the moon, and times of day for performing the operation in different types of patients and cases. Also, it was well known that there were special days to practice bloodletting depending on the position of the planets. (p. 140)

This means that bloodletting could only be practiced by a learned person, a physician or a professional who assures the efficacy of this training, reinforcing the presence of a high level of knowledge of those who practice it because they have to consider different factors as the season or the moon phases to practice bloodletting.

4.5. General extenders

Apart from all these aspects dealing with vocabulary and expressions used by the scribe along the book, a further proof to determine the audience here is the use of general extenders, as in the instance (23):

- (23) A perfect water for the sight.
Take Sage, ffennell, Verven, Betony, Euphras or Eye
=bright, Pimpnell, Sinquefoyle and hearbe grace, and
lay all these in white wyne all night, and then still
them in a stillatory of glasse & *ceteris*.

In this example the last words are *& ceteris*, a Latin expression. This is an adjunctive general extender used to indicate that “there is more” (Overstreet, 2005, p. 1851), so the information omitted is shared by the writer and the reader. In (23) if the reader is not a specialist and does not know the recipe and the way to make this water, the part of the preparation section that has been missed out and replaced by *& ceteris* will remain a secret for the reader.

Another example in this vein is in (24):

- (24) A good Comfortable Powder to digest
well, *and many other good properties*

Here the reader can infer that the powder is not only good to digest well, but also for other things that the reader must be familiar with. These examples support the notion that this book is addressed to people with some knowledge in medicine or who are familiar with the terminology and the practice of the art of healing. Furthermore, most people during the renaissance period were illiterate and the book prices were too high confirming that they could only be acquired and read by learned people, as medical professionals.

5. Conclusion

The present study has shown the techniques used by the author to denote the audience, which are mostly linguistic and cultural. The text under survey is not linguistically accessible to non-professional people. This is exemplified in the use of (a) code-switching for specialized terminology, (b) the scribal own measure system, and (c) the use of general extenders. The use of specific words, such as ingredients or illnesses, from Latin and French suggests the existence of a learned audience that understands these two languages. Moreover, the scribal own measure system and the presence of general extenders also points to an educated audience who can interpret both a vague measure system and imprecise terms and incomplete lists, which cannot otherwise be understood without a previous shared knowledge.

On the other hand, the cultural aspects used by the author to address the audience are (a) the references to authorities, (b) the references to the use of products too expensive or too difficult to find, and (c) the surgical practices. Evidential expressions, in the form of references to authorities in order to confirm the validity of the remedies presented, imply that the book was not addressed to the lay folk, but to a very specific learned audience. Similarly, surgical practices also suggest a professional audience, since surgical methods are not described in minute detailed to allow non-specialists to undertake operations only by reading this manual. All said, this article proves that the initial statement in Feckenham's book should not be taken as face-value, as language constrains potential users to professionals rather than the laity.

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