

THE WOMAN BENEATH THE SKIN (PART 2) by Barbara Duden

The Body's Past

Although Storch believed that women's diseases were caused by mishaps, they always had a history in the lives of the patients, their neighborhood, or their ancestors, about whom the doctor "inquired." Storch could understand the ailing body only as a sum of past complaints. It was only in the nineteenth century that the concept of anamnesis constructed a case history as a series of imprints on the body, imprints the doctor had to decipher. For Storch, suffering adhered to the body, was constitutive of the body. Sufferings had a history, which ended only with death. The temporal horizon of the women and the doctor was larger than a single individual's life story. It stretched back in time—to the body history of the parents and grandparents—and forward into the future—the shadow falls on the children.

There was, to begin with, the individual's life story. An earlier injury remained engrained in the body:

In the case of a young woman who was suffering attacks of swooning, speech loss, and much more, the doctor investigated and was told that she had suffered "bad head injuries" in her youth. From these injuries "nature could still now take guidance in directing the surges (*congestion*) toward the formerly injured head." (8:141, case 28)

An earlier story lurked in the background:

A twenty-two-year-old noblewoman kept getting fatter. Storch was called in 1720 "to advise her on her violent headaches." "But when I discovered that she had had sickly attacks on numerous earlier occasions, I made it my concern to investigate further the circumstances, and was informed of the following: several years before, during spring in another village, she had tired herself out very much by dancing. Not only had she cooled herself off at an open window, but at night she also went along on the hunt for mountain cocks. From that time on she had been burdened with intensely painful fluxes and occasionally with womb anxiousness; in fact, she also had an oozing flux in her side (inguine) between her fat belly and thick legs." (8:146, case 29)

An error once made remained imprinted on the body and could not be remedied thereafter:

In 1718 a young woman had herself bled at the arm at the time of her menses—an "improper time" in Storch's view—and she "noticed right away that the monthly flow stagnated." Subsequently she had headaches and "infertility stemming from the improper bleeding." The incorrect bleeding was still remembered in 1737. With this same woman, "one should not forget, after all, that she has been strongly inclined to anger since her youth, on account of which she has during recent years repeatedly caused pains and induced the blood flow to surge." (8:81, case 17)

Nor did the stomach forget:

In 1726 a merchant's wife, "otherwise of a healthy and robust constitution," had "contracted a stomachache by eating stewed pork. This ache stuck with her for over ten years and was rekindled by the least bit of indigestible food." Even when she was a widow, "nature retained the memory of the stomachache, and on November 2, 1738, when she had felt considerable anger for some time, it aroused a vomitum cruentum [bloody sputum]." (8:20, case 2)

The thread that tied together such stories into a particular woman's body could be an incident in the distant past. This way of thinking is strange to us, especially since these causes—an improper bleeding, a fall down the stairs, a fit of anger, a wound, a fright—later could manifest themselves in places far removed from the original locations.

Sufferings remained stuck in the body. Even after they had disappeared, they still were present:

In 1734 a girl cured red spots in her face. When Storch happened to meet her again in 1746, he asked whether those spots had returned. After twelve years he still recalled the trivial incident when the girl had removed a

facial blemish. He expected that the vanished mark was still inside the body and could reappear at any time. (2:521, case 160)

Such trivial incidents, which cast lifelong shadows, appear frequently in Storch's cases.

"Heredity," understood as an inclination of the body, linked parents and children, sisters and brothers. This heredity could adhere to all parts of the body, but it sat above all in the chest. Discharges of blood were hereditary, for example, as was the golden vein:

A thirty-eight-year-old lady complained as a widow of the flow of the golden vein and said that her sister also had this kind of bleeding: "consequently the golden vein should in her be regarded as something hereditary or as a family illness." (8:319, case 80)

A nosebleed was hereditary:

A twenty-two-year-old noble girl had a nosebleed during the time of her menses. "Her mother reported that it had to be something hereditary, since she herself had been so inclined when she was that age." Storch: "I also knew that two sisters of this young woman had been inconvenienced by it several years before the onset of their menses." (2:225, case 54)

The *pravi humores*, the evil humors, could be hereditary (cf. 4/2:203). Heredity was likely to persist within the same gender, that is, it passed from father to sons, from mothers to daughter, but it also could cross over the gender line. "In *moralibus* as well as *vitalibus*" children could "take after" their parents (3:442, case 88). "In fact evil tendencies are more inclined to be passed on than good ones."

This last sentence can serve as a key to understanding to Storch's "genetics," for it clearly indicates what he thought was passed on. It was a "habit," a "propensity," or an *inclinatio* in the Aristotelian scholastic sense: "the facility of choosing a certain path which has been acquired by repetition and practice," reads the standard scholastic definition of "habit," *consuetudo* (and thus also of *virtus* and *vitium*). But in Storch's conception it was not the moral personality which acquired these hereditary *consuetudines*, propensities, or habits, but the person's nature, the orientation or tendency of her blood.

There is the case of a woman whose tongue the surgeon depressed with a spatula in order to examine her mouth. She suffered a cramp in "maxillas" and bit her tongue: "she remembered that this had also happened to her father once, and she considered it *pro vitio haereditario*." (7:3, case 1)

It was incumbent upon the doctor to take preventive measures against the *vitium*.

The sanguine wife of a lawyer had been nursing for a year and a half and observed that her menses did not as usual resume a half-year after she had given birth. She suffered a sudden cramp, a "paroxysmus." Two days later she informed the doctor that she had bitten her tongue during this fit. As a result the monthly blood did resume unexpectedly, but she was concerned about this tongue-biting: "since she had had this attack once before in her sleep, she feared that might turn into a habit." She consulted Storch not because of the cramp, but with great concern that this tongue-biting, which now had been observed for the second time, might creep in as a regular thing. Storch prescribed a counter-remedy. (7:225, case 123)

Evil tendencies of the blood, such as the tendency toward stagnation in the breast, toward consumption, transmitted themselves particularly well.

A merchant's wife came down with a cough during many of her pregnancies, a "wild cough," which always threatened to induce an abortion in the sixth or seventh month. During pregnancies in the summer and fall she did not notice this cough, a fact that was noted as "unusual." The pregnant woman and her sister recalled "that their mother also once aborted during such a cough...wherefore it should be considered something hereditary." (3:76, case 5)

A woman in childbed had been "born of a mother who had died of consumption after giving birth to five children." The daughter had several bloody discharges, and when she was in childbed she was worried because

of this hereditary burden: “owing to these circumstances she thus wanted to be treated all the more gently.” (6:1, case 1)

Storch recorded the following about a lady. As a young woman, she “had expelled stones from the lung by coughing, around the years when the menses appeared.” Since her sister had had the same experience, and the brother also had not been spared, Storch noted that “her father had died of a breast dropsy with corruption of the lung, in which various stones had been found.” It was clear “that the affectus pulmonum was the haereditarius within this family.” (6:210, case 53)

Storch listened to the women’s complaints in the shadow cast by the past: self-inflicted ailments, things that had happened or were inherited determined the habits of the blood, the orientation of nature. This orientation was unique to each patient, and equally unique therefore was the story each woman told Storch in her own way.

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The Migration of Pain

The thread of inherited or ingrained habits of the blood combined the pains into a single story connecting a life and its ancestry. Similarly the women also frequently consolidated the chaotic multitude of painful sensations into one ailment, one “thing.” As I have indicated, in many cases the women approached Storch only once or twice. Their stories remain obscure for me, since I hear of them for only a brief moment of their lives. In other cases—in acute crises, during a lingering illness, or in the dense, day-to-day exchange of messages between a patient and Storch—we can trace how the women perceived their illness over the long term. Stringing together a persistent stream of complaints allows an insight into the manner in which the women linked up the individual moments of their illness into a single story. These stories speak of the multitude of tormenting experiences that were conceived of as one and the same thing. The course of an ailment showed itself in the increasing frequency of vague, unexpected pains that left their impression on the inner landscape, now here, now there. In the language of the patients’ complaints, pain was “something” that wandered about the body, changed location and form, but was thought of as *one* thing.

In Storch’s text every longer story has at least three actors: the woman, the doctor, and the illness. These three subjects are linked with characteristic verbs. A comparison of these verbs shows a social relationship that appears as a triangle:

the women: they say, complain, admit, confess, reveal, entrust something, send word, or report something they experience—the pains at whose command they are, which they must bear and endure, which they feel, which oppress, torment, and overwhelm them.

the doctor: he inquires, investigates, reflects, searches out, believes, prescribes, advises, sends word.

the pains: they present themselves, they happen and manifest themselves, they assail the patient, make an attack, settle here or there, return anew, gain a foothold, take up their seat, attack, change their seat, take their leave, and depart for good.

The women thus reported what was happening to them. The doctor followed the course of events, enquired, and responded with prescriptions. The pains were the active agent, the story revolved around them and they drove the story forward.