Part I: The body and the mind

Medicine lost the plot — and we lost a lot of blood, dignity, and reason.

From the fevered imagination of medieval medicine to the slow creep of climate and famine, unseen forces shaped lives in ways people rarely understood. Fear, faith, and the natural world were all pulling history's strings, and no one knew the rules of the game.

Or as one nameless medieval doctor (now, presumably, reflecting from heaven) might have put it:

> *Before we knew how to cure anyone, we mostly just opened a vein and hoped for the best.*

Let it bleed: Why losing half a liter was once considered healing

My wife is lying on the bed, half-covered with the blanket, her pale skin like an angel's. I hate seeing her like this, but I can do nothing. She seemed well after the labor, insisted on feeding our son herself. I knew she must be weak, I'd heard her screams, seen the maid carry away the bloody sheets, but that day she smiled.

By morning, the fever was burning her from within.

The doctor stands in the corner, back turned, sharpening his little knife. The hot blood must leave the body to take the fever away, he says.

Catherine opens her eyes. Horror creeps into them as she sees him approach.

"No, not again!"

I rush to her side. "Stay still, my love. Just a tiny cut, like before."

"It hurts," she moans. "It makes me weak."

"The fever makes you weak, my lady," the doctor says, indignation flashing. "Bloodletting is a proven technique."

"I feel worse every time you do it," she says, grasping my wrist with surprising strength.

"Nonsense," the doctor scoffs. "The fever is fighting back. It does not want to leave you."

"Do you trust me?" I whisper. "Then trust the good doctor."

She nods and holds out her hand. The knife touches her delicate skin, just an inch — but blood wells fast, spilling into the bucket. A few drops, then more, drumming on the surface until the bottom is covered in red.

Catherine gasps. Her breathing slows. She stops shivering. For a moment I think — perhaps the fever is losing its grip. Her arm grows heavy on my lap. Her lips are turning purple.

I bend closer. "Catherine?"

She stares at the ceiling. Doesn't blink. Doesn't answer.

A cold weight begins to press down on my chest.

"Doctor, my wife—"

He stops counting drops.

"She must have passed out," he says, voice flat.

"Well, do something!" I shout.

He takes her pulse, his fingers moving to her neck, then her chest.

The sympathy in his arrogant professional expression terrifies me.

"My deepest condolences," he says. "Your wife passed away; the fever got her. Despite everything I did, it was God's will."

I keep holding her hand. It's losing its warmth. The room feels suddenly enormous and empty.

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Sometimes you look back and wonder: how on earth did anyone survive? History is full of medical practices that make modern minds boggle; and yet, for centuries, they were serious science taught at universities.

Hot blood? Let it out.

Take bloodletting, for example. Doctors cut a vein and let the patient bleed.

It was a beloved treatment until the late 19th century. Got a fever? There was clearly too much hot blood. Just drain some out. That'll sort you out.

It wasn't random cruelty. It was Galenic theory in action. Galen, the ancient Greek physician whose ideas ruled Western medicine (mostly via Arabic sources) for over a thousand years, taught that health meant keeping the four bodily fluids — blood, black bile, yellow bile, and phlegm — in balance. If things got too hot, out came the lancet.

And don't imagine a gentle prick like a modern blood test. Bloodletting meant losing up to half a liter at a time, sometimes more, and often repeated during an illness. In severe cases, it could happen several times a day.

Modern medicine, and plain common sense, tells us the opposite: the sicker you are, the more you need every drop of blood to recover. Back then, it was the reverse. The more serious the case, the more blood doctors took, even after childbirth or injuries where the patient had already lost plenty.

Today, bloodletting survives only in rare, specific treatments. Back then, it was the cure for nearly everything, which, frankly, is like treating a twisted ankle by breaking the other leg for symmetry.

However, before we roll our eyes too hard, let's try to understand where these ideas came from. Historically speaking, people weren't stupid, they were just desperate.

In the dark, with no map

Galen lived in the 2nd century. For about 1,400 years after him, no one in the West really knew what the inside of a human body looked like. Dissection wasn't a regular part of Western medical education. Instead, physicians relied on ancient texts.

Nobody had any real idea what caused disease, neither the doctors nor the patients. If someone died from an infected scratch, people were grateful it wasn't worse. Sickness often meant, to them, God killing entire villages in His apparent anger. Theories stuck around because there was nothing better to replace them with.

Doctors hurried to offer explanations that went against common sense, and clung to them even when people opposed them. Because, like today, experts rarely admit their ignorance,

either to themselves or to the public. That's not just historical context; it's human nature.

When medicine met morality

Medicine wasn't a science the way we think of it now. Nothing really was. Disciplines didn't sit in neat boxes. Galenic medicine wasn't just anatomy; it was philosophy, steeped in religion and classical authority.

Ideas about women's bodies mirrored religious ideas about Eve's sin. Plagues were divine punishment; sometimes for entire societies, sometimes for a single sinful household. In such a world, morality and medicine were bound together like two threads in the same cloth.

This mindset helped keep practices like bloodletting in place. In a world that didn't prize originality, sticking to ancient wisdom felt safer than suggesting something new. Innovation looked suspicious. "Progress" as a concept hadn't been invented yet. Breakthroughs did happen, scientific and social, but they faced a harder road to acceptance than today, when we rush to embrace every shining new idea as a miracle. Back then, things were done because that's how they had always been done.

You're right if you think people had trouble trusting doctors who thought this way. Folk healers, midwives, and herbalists often had better results — and society valued them for it. Their methods were grounded in observation. If something didn't work, they adjusted. But that same skill made them indispensable, different, and therefore dangerous. In times of crisis, it was often these women who were hauled to the pyre, their deaths meant to placate God's wrath.

Most of the time, though, people simply paid them and preferred their care to that of the "learned" doctors. Some couldn't afford the university-trained physicians. Others just didn't want them.

This uneasy truce cracked in the second half of the 19th century, when scientists finally discovered microbes. At last, doctors had (in)visible villains to fight. Germ theory transformed medicine. But centuries of mistrust, built on bloodletting, botched cures, and deadly confidence, didn't vanish overnight.

Teaching people about hygiene, safe handling of the dead, and vaccination took generations. And doctors still made mistakes, still declared certainties that later proved disastrously wrong. The enemies change, from "bad humors" to bacteria, but fear, resistance, and the way trust shatters when expert advice later shifts... that part of the story never changes.

We've seen it in our own lifetimes: advice given with confidence, later reversed, leaving people more suspicious than before. The science moves forward, but public trust often limps behind.

The long war against infectious diseases

For most of history, people didn't know what lay behind illness. They labeled diseases by symptoms, not by the pathogens that caused them. Treatment focused on what you could see, fever, swelling, coughing. If someone had a high temperature, the goal was to lower it, not recognize it as part of the body's immune defense.

This symptom-based approach only changed in the late 1800s. Even then, the progress dragged its feet.

Miasma: A foul smell and a worse theory

When the plague hit, people knew it spread but had no idea how. The leading theory of the day was miasma; the belief that foul air and rotting matter carried disease. It had roots in Greek mythology, sounded vaguely scientific, and seemed to explain everything.

This idea posed a dangerous deception. Yes, a sick person might produce a stench through decay, as might dead animals, sewage, or garbage. So far, so good; the theory at least kept people away from obvious sources of infection. But no one understood incubation periods or asymptomatic carriers.

Wealthy families fled plague-ridden cities for the countryside, certain they'd escaped danger. They brought their entire household with them, and sometimes, without knowing it, the plague as well. Servants, companions, or children could already be infected but show no signs yet. The exodus meant the disease traveled in carts, on foot, and in luggage, right into

previously untouched towns.

No one realized rats carried fleas, and no one paid attention to flea bites. Fleas traveled in luggage with clothes, and rats might travel in chests carrying food supplies. People thought they were saving themselves; when in truth, they were smuggling death.

That was the trouble with pre-modern medicine: it rarely lacked confidence, just knowledge. Doctors didn't mean to harm; they weren't malicious. They were believers. And belief, when absolute, can drown out common sense, override observation, and silence the quiet voices saying, "I feel worse every time you do this."

Still, in the medieval world, a fever wasn't your only enemy. The body was not just a battlefield for disease; it was a battlefield for ideology.

And no one's body stirred more panic, provoked more theories, or inspired more creative nonsense... than a woman's.

A womb on the loose: How medieval doctors feared women more than disease

In the hush of a monastery scriptorium, a young monk dips his quill and leans over a manuscript. The candlelight flickers as he carefully copies the words of a respected authority, one of the ancient physicians, filtered through the commentaries of Church fathers and scholars long dead.

Today's passage is particularly vivid: women, it claims, are by nature cold and wet, their bodies unruly, their minds prone to confusion, their desires insatiable unless controlled. Their wombs are restless, their reason weak, their virtue in constant peril.

The monk pauses.He frowns, though his face remains composed. He thinks of his mother, who held their household together through two failed harvests and a harsh winter. Of his sister, who once stitched his robe back together while explaining the Psalms more insightfully than half the novices here. They are not dangerous. Or unbalanced. Or ruled by lust.

He hesitates, quill hovering mid-air.But these are the words of Galen. Of Aristotle. Of the eminent authorities. The voice of reason that has been preserved through the centuries. And what is he, barely professed and young, to doubt them?

He reminds himself that feelings are not knowledge. His memories are not doctrine. The wise men must know what he does not.

He dips the quill again and keeps writing.

His doubt remains unspoken, neatly folded away between the lines. And so, another copy of the same belief enters the world; scripted with precision, sealed with reverence, and left, for now, unquestioned.

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