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‘Make the *Medick* Art my Whole Concern’: Poetry as Women’s Literary Medical Practice

ASHLEIGH BLACKWOOD 

Abstract: The act of writing has long been acknowledged as integral to eighteenth-century medical practice, with medical practitioners relying on their ability to communicate via the written word for professional success. Partly as a result of their literary activities, the achievements of male physicians, surgeons, and apothecaries are frequently well-documented, yet the same cannot be said of women engaging in medical work. This essay argues that eighteenth-century women’s medical practice extended into their creative writing, with numerous women writers utilising poetry as a central form of authoritative expression on matters of health. Verse offered opportunities to scrutinise, advise on, and influence medical knowledge and practice. Print and manuscript works by authors Jane Barker (1652–1732), Martha Hodges (fl.1675–1725), and Susanna Blamire (1747–94), serve a variety of functions, including arguing for women’s medical education, reimagining the workings of the body, and advocating holistic forms of practice that unite physical and emotional forms of care.

Keywords: women, gender, poetry, medicine, poetry, health, physician, Jane Barker, Susanna Blamire, remedy

This ’tis, makes me a fam’d *Physician* grow,
As *Saul* ’mongst *Prophets* turn’d a *Prophet* too.
The sturdy *Gout*, which all *Male* power withstands,
Is overcome by my soft *Female* hands:
Not *Deb’ra*, *Judith*, or *Semiramis*
Could boast of Conquests half so great as this;
More than they slew, I save in this Disease.¹

Long before Elizabeth Garrett Anderson (1836–1917) and the Edinburgh Seven came to be known as Britain’s early pioneers for women’s participation in medicine, there was Jane Barker (1652–1732).² A writer and practising medic of the late seventeenth and early eighteenth centuries, Barker’s autobiographical poem ‘On the Apothecary’s Filing my Bills amongst the Doctors’, which appeared in her *Poetical Recreations* (1688), documents her participation in the rapidly changing medical marketplace and her personal ambition to become a ‘fam’d Physician’. Women would not be permitted to attend university to receive a medical education until 1874, but throughout the eighteenth century, many still offered their services, and Barker was not deterred in her ambitions by a patriarchal medical hierarchy.³ Advancing her learning informally with the help of her own familial and social networks, including her brother Edward, who had studied medicine at Oxford, and Richard Lower, another relative who had been a student of the famed

physician Thomas Willis,⁴ she developed an in-depth understanding of the human body and soon adopted the title of 'doctor' in recognition of the skills she had acquired, creating a private practice through which she saw and treated patients and advertised remedies of her own making, including 'Dr. Barkers [*sic*] Famous *Gout Plaister* which infallibly takes away the pain in Twelve Hours time, with the *Paroxysm* of the Distemper, and in time may effect a perfect Cure'.⁵ These activities, when set alongside her continued production of literary works that reflect her medical interests, reveal Barker's acute awareness of the need to self-fashion a public identity that would cultivate and expand her reputation as an experienced and competent practitioner, the likes of which had not been enjoyed by other women she knew. Barker may have assumed a professional title both as symbol of achievement of her learning and as part of her desire to be competitive within the bustling medical services market of the late seventeenth century, but it is through her verse that she truly assimilates herself with the '*Medick Art*' and, as Kathryn King argues, 'claim[s] belonging with the medical establishment' on her own terms.⁶ Poetry enables Barker to integrate herself into the intellectual world of physic from which she was otherwise excluded, writing in a form that was respected, but not controlled by, the same medical elite that denied women the benefits of training. A closer examination of her language reveals that her approach to healthcare is fundamentally different from that of her male competitors, utilizing her femininity as a central component and distinctive feature of her practice. Though Barker was not the first English woman to produce medical literature in print, she was innovative in terms of her use of verse to make medical discourse more inclusive of women's thought, practice, and experiences of medicine.

Scholarship in literature and medicine has long recognized the symbiotic relationship that operated between professional health practice and literary creativity throughout the long eighteenth century. A multitude of examples have been recovered by literary scholars and medical historians alike to evidence that those involved in medical care often wrote poetry or literary prose that was based on or inflected with their expertise and that literature was filled with bodies, narratives, and tropes.⁷ Clark Lawlor and Akihito Suzuki describe this culture in which literary authorship involved itself with questions of healing, emphasizing that '[m]en of literature mingled freely with men of medicine: [George] Cheyne influenced writers such as Alexander Pope and Samuel Richardson. John Arbuthnot was both physician to Queen Anne and a core member of the Scriblerus Club'.⁸ Literary production formed part of a wider intellectual exchange on matters of healthcare with imaginative texts serving as places in which scientific experimentation itself could take place. As Sari Altschuler further suggests, poetry in particular 'allowed physicians to explore medical questions imaginatively using creative and ordered intellectual thought', making it an essential mechanism through which scientific progress occurred.⁹ While such observations about the environment of literature and medicine are unquestionably true, these scholars base their findings on medico-literary productivity exclusively around the experiences and outputs of male medical professionals. Women's literary-medical works have remained notably absent from contemporary mappings of this dynamic environment.¹⁰ Though a scattering of topics, such as childbearing, menstruation, spa culture, and nervous disorder, have become identified arenas in which women were engaged in matters of health during the period, these subjects more often frame women as the passive recipients of care rather than as active participants in, or even leaders of, medical care.¹¹

One of the significant medical-historical issues concerning the recovery of information on women's medical achievements as practitioners is a lack of evidence of their practice at least in comparison to the legacies left by professional organizations that registered and

represented male-led professions, including the Royal Colleges of Physicians and Surgeons that continue to play a role in professional medical life today. With the notable exception of female-led midwifery, eighteenth-century women lacked access to organized communities of practice that could record, represent, and promote their skills and knowledge. Some professions made available routes for a widow to continue the enterprise of her late husband, or to be an apprentice but, as A.L. Wyman calculates, of 850 licences that were issued by the Archbishops of Canterbury for the practice of surgery between 1580 and 1775, only 7 were given to women.¹² These figures give some indication that women's medical practice was acknowledged only by exception, but in reality, there were two systems of licencing for surgery: one governed by the Church, the other by the Barber-Surgeons, and in many cases, practitioners of both sexes simply worked without a licence or found other outlets for their medical skills. As Leigh Whaley explains, '[w]omen and other non-university trained practitioners were formally excluded from medicine, but they did not stop healing. They were forced [instead] to become more creative in order to continue their important work'.¹³ The long eighteenth century brought with it an explosion of publishing on medical themes, with numerous women writers following in Barker's footsteps in producing poetry on medicine and healthcare. Yet, despite such a rich landscape of imaginative literary practice that existed across verse that dealt with medical knowledge, skills, and experience, any poetics of women's medical practice remains unexplored.

This essay fills this gap in scholarship, arguing that women's medical practice extended into the world of literary writing and publishing, with poetry being utilized as a central form of authoritative expression on matters of health. Furthermore, a poetics of women's healthcare is essential to developing a full understanding of women's participation in and leadership of medical culture of the long eighteenth century, which medical history has been unable to provide to date. Though not all women medical practitioners were poets and not all women poets were medics, the production of verse offered up opportunities for those with literary inclinations to educate, advise, inform, and advocate in ways that demonstrated their technical and creative abilities in new ways. I explore first how literary creativity was intrinsically linked to the primary contexts in which women's medico-literary participation took place, maintaining and supporting healthcare within the domestic household, before turning to the wide-ranging array of functions fulfilled by women's verse concerning healthcare. Published and manuscript works examined here, by authors including Barker, Martha Hodges (fl. 1675–1725), and Susanna Blamire (1747–1794), serve to argue the case for women's medical practice, reposition and re-imagine the study of anatomy to render it accessible to and inclusive of women's experience, and centre the place of emotional well-being as part of the treatment of patients. As we will see, women's literary medical innovations make a series of vital and imaginative contributions to the rapidly changing landscape of scientific development in the eighteenth century. Poetry offered a range of different, though consilient, avenues for comment about human bodies and their care to forms like medical treatises and self-help writing. Works by women poets were situated within a different set of experiences to that of their male counterparts, and women's writing about healthcare formed an important part of the wider creation and advancement of medical discourse of the eighteenth century.

1. *Literature, Medicine, and the Woman Writer*

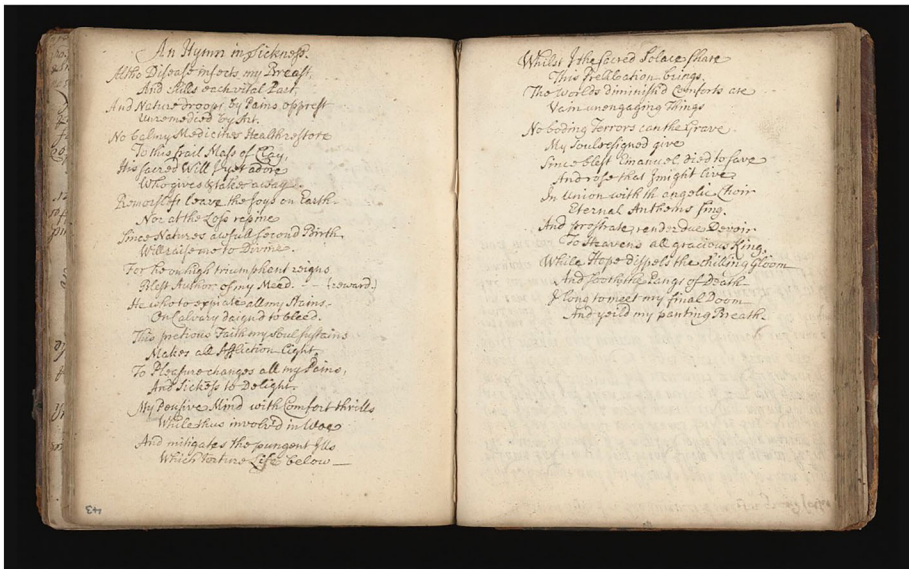
By 1688, the year that Barker's *Poetical Recreations* was published, medical writings by women were already in the hands and homes of the reading public. Treatises by authors

including Louyse Bourgeois (1563–1636), Jane Sharp (fl. 1641–1671), and Oliva Sabuco de Nantes Barrera (1562–c. 1646) were already circulating in France, England, and Spain, respectively, offering their authors recognizable professional identities based on their expertise that extended beyond their dealings with their own patients. At the same time, others, including chemical surgeon Mary Trye (fl. 1675) and midwife Elizabeth Cellier (fl. 1668–1688), produced texts that addressed the political facets of their respective trades, expressing their views about their own involvement and that of others in providing care to the public. For Trye, this came in the form of defending chemical medicine itself and the practice she had inherited from her late father, Henry Stubbe.¹⁴ Cellier, on the other hand, concerned herself with education and training opportunities for midwives, advocating for the establishment of a ‘Colledg [*sic*] of Midwives’ that would sustain female-led midwifery practice.¹⁵ Female authors also curated collections of domestic and literary materials, in the form of recipe collections, miscellanies, and commonplace books which sought to educate and advise on matters of health management. Martha Hodges’ commonplace book (c. 1675–1725) offers an effective example of how women and their families engaged with cultures of healthcare in a variety of textual forms. Domestic recipes feature alongside prayers, essays, and transcriptions of other complete and fragmented reading materials. Hodges’ book, like many commonplace books of the period, resists being categorized within any one specific genre because of the broad variety of materials that are contained within the volume itself but also cannot be termed ephemeral as it fulfils a purpose that was both immediate and long term. While useful in the short term as a reference point for the regular management of household tasks, the book’s longer-term value as a means of communicating advice across generations is also evidenced by an inscription inserted into the front of the text:

Our Great Grandmother Hodges her receipt book. She was mother to Mrs. Priaulx who was the Grandmother of Mrs Sarah Tilley by Mr Howes marrying her daughter Mrs Mary Priaulx. Her name is written by herself at the other end. She was sister of Dr. Hodges the writer of a large book of receipts.¹⁶

This mapping out of family relationships reveals that Hodges was surrounded by relatives who, much like Barker’s family, made medicine an integral part of their day-to-day environment. Furthermore, entries to the text itself demonstrate the early connections between poetry and women’s medical practice during the period. Among the multitude of recipes targeted at curing ill-health and supporting well-being, Hodges includes a forty-line poem entitled ‘Hymn in Sickness’. The verse documents an individual struggle with an illness that is referred to as ‘Disease’ which has been ‘Unremedied by Art’ or medical assistance. Faith itself becomes a remedy: ‘A Pensive Mind with Comfort thrills / While thus involv’d in Woe / And mitigates the pungent Ills / Which torture life below’.¹⁷ Emotions are placed centre stage in the process of managing or recovering from illness. These reflections on emotional care constitute just one of the functions that poetry held in relation to influencing medical and health cultures of the long eighteenth century (Fig. 1).

A lack of paratextual information surrounding the poem means that it is not possible to tell from the manuscript alone whether the poem was written by Hodges or another member of her family, or even whether it was copied from another source. Nevertheless, its presence within the commonplace book evidences the parallel use of recipes and poetry to explore and articulate thought and practice on matters of healthcare.¹⁸ The two forms are brought together to represent the many ways in which Hodges and her relatives consider the potential of various forms of healing as part of the fabric of their everyday lives. Yet, while appearing alongside each other, it is essential to recognize that recipes and



1. Martha Hodges (& others), 'A Hymn in Sickness', Receipt and Commonplace Book, c. 1675–1725. © Wellcome Collection [Colour figure can be viewed at [wileyonlinelibrary.com](https://onlinelibrary.wiley.com/doi/10.1111/1754-0208.12869)]

poetry operate as fundamentally distinct forms of communication. As Jayne Elisabeth Archer reflects in her examination of poetry and recipe books, 'recipes do not depend on the symbolic qualities of language, whereas the poem is potent insofar as its allusive dimension lends itself to a variety of interpretations: a poem changes minds, not things, while a recipe changes things, not minds'.¹⁹ The poem contained within Hodges' collection shows this, at least in part, by addressing the role of spirituality and emotional support in healing — factors that do not appear regularly in recipes and remedies of the period. Where recipes of the period are targeted at guiding readers through the practicalities of identifying and combining ingredients, poetry is, at least in this instance, directed towards the experiential challenges of ill-health and how these might be managed through an individual's faith. The versification of medical knowledge and experience offers new ways of looking at women's participation in medical cultures that are entangled with, yet fulfilling alternative needs to, domestic recipes and allows for commentary on a wider range of issues than the composition of individual medications which are central to the support of the unwell patient. While many male medics, such as Edward Baynard, Mark Akenside, and John Armstrong, also produced much insightful poetry on subjects of healthcare, the larger range of avenues available to them for professional self-expression meant that their reliance on identifying and utilizing such creative outlets to develop their voices was not as great.²⁰ By writing poetry rather than or as well as medical treatises, women authors were able to offer to their readers' interpretations of medical information and approaches to care that would have remained otherwise undocumented.

2. Advocating for the Role of the Woman Practitioner

Much as Archer describes of manuscript recipes and commonplace books of the period, Jane Barker's *Poetical Recreations* 'absorb[s] all aspects of a woman's life, imagination

and intellect', covering a wide range of topics within the author's reach.²¹ Healthcare is a recurrent theme in Barker's poetry, and 'On the Apothecary's Filing my Bills amongst the Doctors' records an occasion whereupon one of Barker's own prescribed remedies was accepted by an apothecary for preparation. Though the production of a prescription may appear to be a relatively straightforward means of supporting an individual patient's needs, in reality, this was no small achievement for a self-styled woman physician. The late seventeenth century was a period of significant tension and competition among groups of medical practitioners, and nowhere was this power struggle more apparent than between physicians and apothecaries. Harold Cook and Elizabeth Furdell both argue that this resulted in the close scrutiny of medical practice by both civic authorities and the Royal College of Physicians, and those who were considered to be acting outside of the scope of regulated practice were held to account.²² If, as Furdell points out, elite physicians such as John Radcliffe (1650–1714), who counted royalty among his patients, were penalized for transgressions against the accepted practices of the Royal College of Physicians, then readers of Barker's poem would likely already be aware that her actions, both in prescribing a remedy independently and then in writing about having done so, risked prosecution or, at the very least, drawing unwelcome attention to her work.²³ Whether her poems were ever meant for publication has been the subject of much scholarly debate. Where Jane Spencer and Carol Barash have characterized Barker as one of the early woman authors to embrace print culture and self-consciously cultivate a reputation for their work from the late seventeenth century, others claim that she wrote only for friends and did not intend for *Poetical Recreations* to appear in print.²⁴ King highlights an annotation of Barker's that appears in a surviving manuscript of her later work, now known as the Magdalen Manuscript, which claims that the volume had been published 'without her consent'.²⁵ Even if this is the case, however, and she did not seek a wider readership, Barker still opted to write and circulate her works concerning medicine among friends, meaning that she was willing to acknowledge to others her identity as a practitioner irrespective of the consequences of doing so. Furthermore, her medical verse also features in two of her later autobiographical works that were published under her own name, *A Patch-Work Screen for the Ladies; or, Love and Virtue Recommended* (1723) and *The Lining of the Patch-Work Screen* (1726), thus indicating that she was happy to be associated with these poems and their content.²⁶

Documentary evidence concerning her life in London makes no mention of Barker ever facing repercussions for practising medicine. This may be because, as Deborah Harkness indicates in her analysis of sixteenth- and seventeenth-century women's medical practice, 'the overwhelming majority of unlicensed practitioners (including women) were never prosecuted at all'.²⁷ While women's medical practice continued to be a matter for concern for both the College of Physicians and the Barber-Surgeons' Company, female practitioners continued to work in sufficiently large numbers to make it impossible to remove them from the medical services market altogether. Barker's awareness of the cultural disconnect between the desire to exclude women from medical work and the realities of their being a significant source of experienced and skilled labour is evident in 'On the Apothecary's Filing my Bills amongst the Doctors'. She opens the poem 'I hope I shan't be blamed if I am proud', anticipating first the criticism she perceives may follow for taking ownership of her practice, before quickly taking a more assertive stance, 'To be proud of a fortune so sublime, / Methinks is rather duty, than crime'.²⁸ While acknowledging her feelings of good fortune at having been able to access a medical education, however informal this may have been, she desires nevertheless to be able to lay claim to her work and achievements rather than have it labelled a 'crime'.

Despite the strength of her individual views, debates about the appropriateness of 'petticoat physic', the popular and somewhat derogatory term for women's practice, still endured for the long term. As late as the mid-nineteenth century, the question of women's suitability for medical professions continued to hang in the air. In January 1858, an anonymous 'Medical Annotation' entitled 'Petticoat Physic' appeared in *The Lancet* (1823–present) that challenged both women's intellectual and physical capability to manage the demands of medicine. The author disparages 'these foolish virgins who pretend to have studied physiology, and in defiance of its teachings [...] attempt to thrust themselves into the profession'.²⁹ Though published well over a century after Barker's death, the nature of the complaint and its focus on unmarried women who were self-taught had been long established even before the late seventeenth century and could have been directed at Barker herself, given that she remained unmarried throughout her life.³⁰ The term 'Petticoat Physician' is also one with which she would have likely been familiar. In 1636, Edward Edwards included the issue of self-taught practitioners, both male and female, in his address to the reader of *The Analysis of Chyrurgery*. Addressing deficiencies in the practice of surgery, he remonstrates, 'my soule is grieved to see the daily abuses and errours in many of this Profession! Chiefly in the Country, of many wicked wretches, not only men but infinite Petticote Surgeons, that swarme in every Towne, Parish, and for the most part in every Village: that take on them to practise this worthy Facultie; having neither conscience, learning, art, nor feare of God; nor never had good Tutor to instruct them'.³¹

'On the Apothecary's Filing my Bills amongst the Doctors' readily acknowledges both the 'good Tutor[ing]' provided by her brother and also Barker's life as an unmarried woman. She even goes so far as to indicate that, in fact, her overwhelming disappointment in love means that she can devote her time to medicine. After admitting 'Had he been true, I'd lived in sottish ease; / Ne'er study'd ought but to love and please', she goes on to explain how she came to be thankful for the events which led to her success as a practitioner.³² Reflecting on these emotions she describes her personal history:

Bless'd be the time, and bless'd my pains and fate,
Which introduc'd me to a place so great.
False *Strephon* too I now could almost bless,
Whose crimes conduc'd to this my happiness.
Had he been true, I'd liv'd in sottish ease;
Ne'er study'd ought, but how to love and please:
No other flame my *Virgin* Breast had fir'd,
But Love and Life together had expir'd.
But when, false wretch, he his forc'd kindness paid,
With less Devotion than e'er *Sexton* pray'd.
Fool that I was to sigh, weep, almost dye,
Little fore-thinking of this present joy.³³

Acutely aware that as a married woman her life would have been filled with the additional demands of managing a marriage and household, she treats her misfortune as a blessing in disguise that soon replaced her tears with joy on discovering how much she took pleasure in occupying herself with medical matters. Unlike the later view shared in *The Lancet*, Barker believes that unmarried women's conditions of living are exactly right to pursue a medical career and, equally unlike Edwards, further suggests that these women are among those who may have the most ability and time to dedicate to their art.

Even making this case, however, the lines between married and unmarried women are secondary to Barker when she advocates for female-led care as a whole:

Some Women-haters may be so uncivil,
To say the Devil's cast out by the Devil;
But so the good are pleas'd, no matter for the evil
Such ease to *States-men* this our Skill imparts,
I hope they'll force all Women to learn Arts.
Then Blessings on ye all ye learned Crew,
Who teach me that which you your selves ne'er knew
Thus Gold, which by th' *Sun's* influence do's grow,
Do's that i'th' Market *Phoebus* cannot doe.³⁴

Her words offer a powerful reflection of her own situation and approach to practice, as well as indicating its applicability to other women. Those who would be so 'uncivil' as to harbour such a view are labelled '[w]omen-haters', and she, in turn, challenges this by wishing that 'they'll force all Women to learn Arts' in the hope that their skills can be exhibited on a much wider scale. Barker's unwavering proto-feminist stance as it is presented here rejects any idea that women do not make suitable practitioners and makes the case in the strongest terms for women's intellectual and hands-on participation in professional life of all types.

3. *Reimagining Anatomy*

Through another of her verses, 'A Farewell to Poetry, with A Long Digression on Anatomy', or simply 'Anatomy' as it was retitled in 1723, Barker continues her crusade for writing women into medical discourse. Here, she uses verse to champion her position as a woman physician, reimagine the anatomical knowledge that underpins medical practice, and the ways in which it can be approached by different groups of practitioners. In the first version of the poem, printed in *Poetical Recreations*, Barker opens,

Farewell, my gentle Friend, kind *Poetry*,
For we no longer must Acquaintance be;
Though sweet and charming to me as thou art,
Yet I must dispossess thee of my Heart.
On new Acquaintance now I must dispence
What I receiv'd from *thy* bright influence.
Wise *Aristotle* and *Hippocrates*,
Galen, and the most Wise *Socrates*;
AEsculapius, whom first I should have nam'd,
And all *Apollo's* younger brood so fam'd,
Are they with whom I must Acquaintance make,
Who will, no doubt, receive me for the sake
Of *Him*, from whom they did expect to see
New Lights to search *Nature's* obscurity.³⁵

Though a seemingly curious path to take, rejecting poetry as an occupation while writing verse itself, there can be little doubt that this introduction is intended to make abundantly clear that so dedicated is Barker to her subject that she is willing to give up her interest in poetry to spend more time with the works of medicine's long history of innovators that assist her in becoming the 'fam'd physician' that she so desired to be in her previous poem. She lists in detail the reading that is necessary to make her an effective medic. Although styled as a projected reading list that will need to take place of poetry in future, readers cannot help but notice the ease with which Barker mentions the names of these authors, leading to the suspicion that she has, in fact, already read their works and is more confident in her knowledge than her language would suggest.

When the verse was republished in 1723, as part of Barker's experimental novel, *A Patch-Work Screen for the Ladies*, considerable changes were made to the text.³⁶ The differences between the two editions are so significant, including a replacement of these first fourteen lines and a retitling of the verse, simply as 'Anatomy', that Karen Bloom Gevirtz argues for treating the two as separate works.³⁷ Although the anatomical content remains the same, each version represents a different relationship between Barker, her poetry, and her medicine. In the 1723 version, these lines are removed, and a separate twelve-line poem entitled 'An Invocation of her Muse' prefaces the text. This new verse reads

Come, gentle muse! assist me now,
A double Wreath plait for my brow,
Of *Poetry* and *Physick* too.

Teach me in Numbers to rehearse
Hard Terms of Art, in smooth, soft Verse,
And how we grow, and how decrease.

Teach me to sing APOLLO's *Sons*,
The *Ancient* and the *Modern*-ones,
And sing their Praise in gentle Tones.

But chiefly sing those *Sons of Art*,
Which teach the *Motion of the Heart*,
Nerves, Spirits, Brains, and every Part.³⁸

Gone are the anxious pledges to set poetry aside in order to study anatomy in its place. Barker's language continues to respect both inherited and current authorities on anatomy but also celebrates her own accomplishments, both poetic and medical, with a 'double Wreath plait for [her] Brow'. As Heather Meek posits about Barker's novels, the change between the two versions of the poem demonstrates how she grows increasingly confident in presenting medicine, 'sometimes quite directly, as a creative force'.³⁹

In both versions, the poem progresses to demonstrate Barker's familiarity with anatomical knowledge, before challenging readers to think differently about how the inner working of the human body might be visualized. Her verse eschews for the most part the technical language and descriptions that were commonplace in the medical literature she read, employing instead a range of imaginative metaphors that contextualize anatomical terms and map out the inner workings of the human body in clear language. She writes,

We view'd the Kitchin call'd *Ventriculus*,
 Then pass'd we through the space call'd *Pylorus*;
 And to the Dining-Room we came at last,
 Where the *Lactæans* take their sweet repast.
 From thence we through a Drawing-room did pass,
 And came where Madam *Iecur* busie was;
Sanguificating the whole Mass of Chyle,
 And severing the *Cruoral* parts from bile:
 And when she's made it tolerably good,
 She pours it forth to mix with other Blood.⁴⁰

Touring through the organs, Barker likens the body to a domestic household with its various rooms and the activities that might take place in each, bringing familiar contexts into the teaching of anatomy particularly, though not exclusively, for women readers. 'Madam *Iecur*', or the liver, for example, is characterized as female and engaged in household medicine herself. As Paula Backschieider explains, female authors were '[e]ncouraged to put sweetmeats and china, not books, in their closets, and their pens [should be] restricted to copying recipes and tips on home management'.⁴¹ Barker's verse simultaneously utilizes and subverts these cultural expectations surrounding domestic management to create her own authoritative voice, as well as indicating the wider potential role for women in the management of healthcare. In doing so, she also challenges the role of what Darby Lewes labels British 'somatopias', or texts that are shaped by or for the human body.⁴² Earlier somatopias, such as Thomas Carew's 'A Rapture' (1641) or Charles Cotton's *Erotopolis: The Present State of Bettyland* (1648), were typically written for pornographic purposes and, being frequently misogynistic in nature, were specifically 'composed of bodies (female) and designed for bodily pleasures (male)'.⁴³ Barker reappropriates this emerging literary tradition for her own purposes, writing of a body that is of unknown gender, though heavily feminized in descriptions of its functions, and reclaims these types of text for intellectual (rather than sexual) pleasure, education, and good health. Her poetic contributions reveal new ways of thinking about medical participation and defend the place of women's medical practice as a legitimate part of health cultures. Furthermore, her verse demonstrates clearly how women writers could make use of their literary creativity to articulate original thought about anatomy. She opened the door for other women who later sought to use literature as a site of experimentation for their medical practice.

4. Conversations of Care

One such successor to Barker is the lesser-known, yet no less productive, author Susanna Blamire (1747–1794) (Fig. 2). A prolific writer of verse whose work covers topics as varied as healthcare, religion, and travel, Blamire has been named 'unquestionably the best female writer of her age', yet the fact that much of her writing remained in manuscript until the mid-nineteenth century has limited the critical notice it has attracted to date.⁴⁴ Once believed to have been a poet of working rank, surviving manuscripts from Blamire herself and the letters of her relatives attest to their having been a middle-ranking family who frequented London and Edinburgh and employed household staff. She and her sister Sarah were raised at Thackwood Nook, the Raughton Head manor house of her maternal

aunt, Mary Simpson, after the death of their mother in 1754. At Thackwood, she experienced medical life as both a healer and a sufferer of chronic ill-health, the experiences of which are captured within her poems. Her work allows readers a set of unique insights into how medical care was offered by women in provincial locations.

As Christopher Hugh Maycock shares, Blamire acquired a wealth of medical knowledge from her brother, William, who was a naval surgeon serving on HMS *Alexander* during the Siege of Gibraltar, having first trained at St George's Hospital, London.⁴⁵ She was able to make use of this knowledge by practising medicine within the local community, as documented in her verse 'Epistle to her Friends at Gartmore' (wr. 1773). Though her medical education had been acquired through relatives, just as Barker's had been, Blamire opts to move away from exploring theoretical understandings of the body in her poetry and, instead, devotes her writing to medical practice itself. 'Epistle to her Friends at Gartmore' is addressed to unnamed friends residing in the Scottish village of the same name and details the author's day-to-day activities while at home in Cumbria. Alongside descriptions of her writing, breakfasts with cocoa, walks in the garden, and relationships with the household staff are fulsome examples of Blamire's medical interactions with the local community and her willingness to put her healing skills at their disposal. 'For, you must know', she tells readers, 'I'm fam'd for skill / In the nice compound of a pill'.⁴⁶ Through a poem designed as a conversation between herself and Peggy, a local woman who is concerned about the health of her young daughter, Blamire offers a well-rounded view of the care she provides, seeking to treat the anxieties of the family as well as the child's ailment.

Peggy is introduced by the dialogue crafted for her by Blamire, as she tells of the ill-health of the unnamed infant girl:

"Miss Sukey, here's a little lass,
She's not sae weel as what she was;
The peer peer bairn does oft complain,—
A'd tell ye where, but I think shame."
'Nay speak, good woman,—mind not me;
The child is not quite well I see."
"Nea;" she says, "her belly aches,
And Jwohnie [*sic*] got her some worm-cakes;
They did nea good—though purg'd her well,—
What is the matter we can't tell;
She sadly whets her teeth at neet
And a' the day does nought but fret;
It's outhr worms, or wind, or water,
Something you know mun be the matter."⁴⁷

As author-narrator, Blamire reveals, through the use of the name 'Sukey', a shortened version of her own, that she is personally well-known among her patients. She then establishes Peggy's voice in full. Shaped by the use of local dialect, Peggy is depicted as a woman of working rank who is at first apprehensive about revealing the truth about her daughter's illness before being encouraged by Blamire to speak freely.⁴⁸

One of the most striking features of Blamire's writing is her defence of engaging with individuals different in social rank to herself. While she may have benefitted from her family's moderate wealth, many others who lived in Raughton Head and its surrounding areas did not. This did not stop Blamire from seeking out their company, however, and her poetry attests to how much she enjoyed conversing with these groups,



2. Giacomo Cambruzzi, *Susanna Blamire*, crayon, 60.96 × 45.72 cm. Reproduced by kind permission of Christopher Hugh Maycock and James Maycock

even those whom the family employed as household staff. Commenting on her conversations with her maid, Fanny, she explains

And really as to different stations,
Or comforts in the various nations,
They're more upon an equal par
Than we imagine them by far.
They love and hate — have just the same
Feeling of pleasure and of pain;
Only our kind of education

Gives ours a greater elevation.
 I oft have listen'd to the chat
 Of country folks 'bout who knows what!
 And yet their wit, though unrefin'd,
 Seems the pure product of the mind.⁴⁹

Here, Blamire enters into the territory of scientific debate concerning the perceived connections between sensation, physiology, and lineage. From as early as the 1660s, scholarly attention had turned towards the nerves, as individuals such as Willis, John Locke, Bernard Mandeville, Robert Whytt, and John Brown all sought to offer explanations of how the nervous system impacted individual behaviour and well-being. Amid the fusion of theories that emerged was the prevailing idea that the condition of the nerves, in terms of their delicacy and refinement, was directly connected to an individual's surroundings, education, and position within society. Famed physician George Cheyne uses historical examples in his *The English Malady* (1733) to make this point. 'The antient [*sic*] Greeks', he reports, 'while they lived in their Simplicity and Virtue were Healthy, Strong, and Valiant: But afterwards, in Proportion as they advanced in Learning, and the Knowledge of the Sciences, and distinguished themselves from other Nations by their Politeness and Refinement, they sunk into Effeminacy, Luxury, and Diseases'.⁵⁰ In short, privilege of all types leads to greater refinement of nerves, the ability to feel more acutely the effects of external stimuli and emotions, and a greater predisposition towards disease. As G.J. Barker-Benfield notes, feelings themselves constituted a form of luxury that could only be experienced by those who participate in fashionable cultures of manners, sociability, and consumerism.⁵¹

Blamire challenges directly this idea, however, when she protests that those of working rank are 'more upon an equal par / Than we imagine them by far. / They love and hate — have just the same / Feeling of pleasure and of pain'. Known as 'the Poet of Friendship', her approach to treating all those she encounters with the same kindness and civility is of little surprise.⁵² Defending these experiences, she claims that the only difference between herself and Peggy is 'a greater elevation' in her language, which is derived from an education that has been purchased rather than inherited, but that their emotional experiences remain common to both and shared between them. 'Epistle to her Friends at Gartmore' offers a stout defence against any suggestion that her rural neighbours might be in some ways lesser, in both body and mind, than those of middling or elite status. The overall result of Blamire's having treated the child is never reported, most likely because the poem outlines only a single day in the author's life, but, by focusing on the immediacy of the conversation rather than any outcome, readers are left in no doubt of the importance of communication to her medical practice. She ensures that any differences in speech or experience do not prevent an effective exchange from taking place between herself and Peggy, which ensures that care can be given to a suffering child.

5. Poetic Prescriptions

This sense of familiarity between the two women constitutes an important part of Blamire's approach to medical care, and these beliefs about the importance of developing meaningful relationships with patients also appear in other manuscript works of hers, including a short piece of prose simply titled 'An Allegory'.⁵³ The nine pages of Blamire's elegant script that comprise the allegory tell the story of a local woman medical practitioner, known only as 'Real Friendship', who has been unable to offer her aid to friends

and family for some time because of her own ill-health. During this time, another woman practitioner named 'False Friendship' attends to Real Friendship's patients. Once her own good health is sufficiently restored, Real Friendship then desires to return to her position as 'the physician — Councillor [*sic*] — & friend of Mankind' but finds it difficult to regain her place within the community.⁵⁴ While '[t]hose who knew her value, rejoiced to see her', many would still seek out the company and care of False Friendship.⁵⁵ Disappointed, Real Friendship 'continue[s] little valued & less known' than she was before.⁵⁶ Though she grows suspicious of her replacement's motives for lavishing attention on their mutual friends, she does not share this view. As time passes, it becomes increasingly clear that False Friendship uses her position and manipulates others in the interests of advancing her own social position, often neglecting or offending those who are most loyal to her. When a famine affects the area, False Friendship experiences an increased demand for her help. Though much needed, 'any application to False Friendship either for advice, the supply of wants, or the attendance on the sick-bed of those she loved' is rejected as she seeks only to serve her own needs. With her suspicions proved, Real Friendship returns to providing medical assistance to all those in need. While the community spurns False Friendship for her mistreatment of others, Real Friendship responds to their needs once more with kindness and compassion. It is at this point that Blamire's own approach to caring for those around her is revealed. Of Real Friendship's efforts, she describes

Her Voice was tenderness itself, yet so enlivened by the note of cheerfulness—that the patients found her self more revived by it than even by her life-giving Cordials. She knew too what blame to lay on a sultry Atmosphere & well how to accuse a cloudy sky.⁵⁷

Here, psychological well-being plays at least an equal, if not greater, role than that of physical health, and Blamire seeks to ensure that this forms an integral part of Real Friendship's consideration when treating a patient.

Much like her poetry, Blamire's allegory is at least partly autobiographical. Though no identifiable names are used within the narrative, like Real Friendship, Blamire also suffered from intermittent periods of ill-health from the age of twenty-six, which significantly disrupted her lifestyle and ability to practise medicine.⁵⁸ In another of her verses, untitled and remaining unpublished, she again addresses the importance of sociability and emotional support, this time as part of her own experience of enduring and attempting to recover from illness. She writes

Once more to Hygia [*sic*], smiling maid,
I offer the rejected prayer,
Nor leaves one Gallen rite unpaid,
Or now neglects one pious care.

Yet the gay Goddess flaunts along,
Regardless of this drooping frame,
No more she asks the sprightly song
Or leaves of Life aught but the name.

With her Enjoyment steals away
Few pleasures court this sickening heart.
The Springs of Joy I feel decay
Save those alone my friends impart.⁵⁹

When read alongside her other works, this poem explains why sociability and conviviality are the hallmarks of both her poetry and her medical practice. With friendship as her own primary sustenance, Blamire prescribes emotional support as she might offer other cordials or remedies and seeks to give others what she values most herself when struggling against illness.

This approach to developing relationships further shapes her response to Peggy in 'Epistle to her Friends at Gartmore'. Blamire encourages the woman and even confirms her feelings about the ill-health of the infant, 'Nay speak, good woman,—mind not me; The child is not quite well I see'. On being informed that the child appears to be struggling with her digestion, Sukey willingly offers her help:

"My little woman, come to me;
Her tongue is very white I see;
Come, wrap her little head up warm,
And give her this,—'twill do no harm;
'Twill give a gentle stool, or so."
"Is it a purge?" "No, Peggy, no;
Only an easy gentle lotion,
To give her once a-day a motion;
For Potheccaries [*sic*] late have found
Diseases rise from being bound,
'Gainst which they've physic in their shop,
And many a drug, and useless slop;
This here will purify your blood,
And this will do your stomach good;
This is for vapours when splenetic,
And here's a cure for the sciatic;
But let her take what I have given,
'Twill help to keep your child from heaven."⁶⁰

Blamire makes emotional, as well as physical, connections as she seeks to soothe both the child's discomfort and the mother's anxiety, whilst simultaneously highlighting concerns about keeping the child warm and cautioning against procuring harmful or ineffectual remedies from apothecaries. When Peggy becomes worried by the idea of a strong purgative being administered to her child, Blamire allows these concerns to be voiced, while also reassuring that the remedy she offers is 'Only an easy gentle lotion, / To give her once a-day a motion'. This focus on emotional well-being and allowing others to express themselves is a feature shared with other women's medical writing of the eighteenth century. Sarah Stone's *A Complete Practice of Midwifery* (1737), for example, summarizes '[u]pwards of FORTY CASES' from her practice, highlighting at numerous points the importance of responding directly to the concerns and emotional well-being of the pregnant and birthing woman. In *Observation IV*, Stone discusses 'a woman of very low spirits', making note of her emotional struggles even before examining her or offering any physiological details of the progression of the birth itself.⁶¹ She continues to respond to this emotional need throughout her work, reassuring the woman that she will be able to deliver her within the space of two hours, and even notes where the woman herself does not initially trust these supportive words.⁶² As Ernelle Fife interprets from an examination of her cases, '[f]or Stone the patients are more than just bodies; they are women with thoughts and fears, beliefs and concerns. Thus, she strives to comfort and reassure her patients, not

merely tend to their bodily pregnancies'.⁶³ Blamire's writing reflects this same rare commitment to treating not just an illness or injury, but rather a whole individual and, where needed, their support networks too.

6. *Towards a Woman's Poetics of Healthcare*

Poetry offered eighteenth-century women writers opportunities to redefine on their own terms who could write about medicine and what types of ideas could be expressed. Authors and compilers such as Hodges, Barker, and Blamire are able to advocate for the place of women in healthcare, reimagine how medical knowledge should be communicated to new and existing audiences, and question what it meant to practise medicine and provide care to others through their written works. While these women never received recognition on equal standing with their male peers for their contributions to medicine, particularly in the case of Blamire whose poems never reached a mass readership during her lifetime, their contributions are no less important or valuable than those of their male peers and indeed may be only more valuable for the difficulties they faced to become medical practitioners and maintain their essential work. Poems such as 'On the Apothecary's Filing my Bills amongst the Doctors', 'A Farewell to Poetry, with a Long Digression on Anatomy', and 'Epistle to her Friends at Gartmore' illustrate how women sought to develop and exercise their own authorial voices in the dynamic worlds of science and medicine during the seventeenth and eighteenth centuries and offer new and creative insights that others could not deliver. Alongside those women who published medical manuals and treatises, these authors are deserving of much greater acknowledgment for what their work does for recovering the unseen heritage of women's medical practice today. This article has only been able to lay the foundations for the exploration of poetry as a key literary form used in service of women's medical thought and practice, and there is undoubtedly much more that the works of eighteenth-century women poets still have to offer in terms of their medical content, from which both the fields of eighteenth-century studies and critical medical humanities have much to gain.

NOTES

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1. Jane Barker, 'On the Apothecary's Filing my Bills amongst the Doctors', in *Poetical Recreations* (London: Benjamin Crayle, 1688), pp. 31–34 (p. 31).

2. Laura Kelly, 'Elizabeth Garrett Anderson: Early Pioneer of Women in Medicine', *The Lancet*, 390.10113 (16–22 December 2017), 2620–21; Marelene Rayner-Canham and Geoff Rayner-Canham, *Pioneers of the London School of Medicine for Women (1874–1947): Their Contributions and Interwoven Lives* (Cham: Springer, 2022), pp. 19–24.

3. For an account of women's later access to medical education, see Laura Kelly, 'The Question Is One of Extreme Difficulty': The Admission of Women to the British and Irish Medical Profession, c.1850-1920', in *The Palgrave Handbook of Women and Science since 1660*, ed. by Claire G. Jones, Alison Martin, and Alexis Wolf (Cham: Palgrave Macmillan, 2021), pp. 529-48.
4. Heather Meek, 'Jane Barker, Medical Discourse, and the Origins of the Novel', in *Literature and Medicine: The Eighteenth Century*, ed. by Clark Lawlor and Andrew Mangham, 1 vol. (Cambridge: Cambridge University Press, 2021), I, 51-69 (p. 51).
5. Original spelling and punctuation have been preserved in this quote. *Delightful and Ingenious Novells Being Choice and Excellent Stories of Amours, Tragical and Comical* (London: Benjamin Crayle, 1685), unpaginated advertisement.
6. Kathryn King, *Jane Barker, Exile: A Literary Career 1675-1725* (Oxford: Oxford University Press, 2000), p. 68.
7. While two anthologies of poetry concerning medical matters currently exist and a number of edited collections of original works, no full-length study of the relationship between poetry and medicine exists in current print. See *A Body of Work: An Anthology of Poetry and Medicine*, ed. by Corinna Wagner and Andy Brown (London: Bloomsbury Academic, 2016); *Poetry in Medicine: An Anthology about Doctors, Patients, Illness, and Healing*, ed. by Michael Salcman (New York: Persea Books, 2015); Michelle Faubert, *Rhyming Reason: The Poetry of Romantic-Era Psychologists* (2009) (Abingdon: Routledge, 2016). For specific discussion of consilience between literary and medical cultures, see Wagner and Brown, pp. 4-8.
8. *Literature and Science, 1660-1834: Sciences of Body and Mind*, ed. by Clark Lawlor and Akihito Suzuki, 2 vols (London: Pickering & Chatto, 2003), II, xi.
9. Sari Altschuler, *The Medical Imagination: Literature and Health in the Early United States* (Pennsylvania: University of Pennsylvania Press, 2018), p. 11.
10. Anne Finch's 'A Pindaric Ode on the Spleen' (1701) does appear in Lawlor and Suzuki's *Sciences of Body and Mind* anthology as a lone female entrant because the poem was also included in the original print of William Stukeley's treatise *Of the Spleen* (1723). See Lawlor and Suzuki, p. xx.
11. Contributions to these topics that frame women as patients include Wendy D. Churchill, *Female Patients in Early Modern Britain: Gender, Diagnosis, and Treatment* (Farnham: Ashgate Publishing, 2012); Judith S. Lewis, *In the Family Way: Childbearing in the British Aristocracy, 1760-1860* (New Brunswick: Rutgers University Press, 1986); Sara Read, *Menstruation and the Female Body in Early Modern England* (Houndmills: Palgrave Macmillan, 2013); Rose Alexandra McCormack, "'An Assembly of Disorders": Exploring Illness as a Motive for Female Spa-Visiting at Bath and Tunbridge Wells throughout the Long Eighteenth Century', *Journal for Eighteenth-Century Studies*, 40.4 (December 2017), 555-69; Heather Meek, 'Of Wandering Wombs and Wrongs of Women: Evolving Conceptions of Hysteria in the Age of Reason', *ESC: English Studies in Canada*, 35.2 (2009), 105-28.
12. A.L. Wyman, 'The Surgeoness: The Female Practitioner of Surgery 1400-1800', *Medical History*, 28.1 (Jan 1984), 22-41 (p. 28). Also, see Doreen Evenden, 'Gender Differences in the Licensing and Practice of Female and Male Surgeons in Early Modern England', *Medical History*, 42.2 (1998), 194-216 (p. 194).
13. Leigh Whaley, *Women and the Practice of Medical Care in Early Modern Europe, 1400-1800* (Houndmills: Palgrave Macmillan, 2011), p. 1.
14. See Sara Read, "'My Method and Medicines": Mary Trye, Chemical Physician', *Early Modern Women*, 11.1 (Fall 2016), 137-48.
15. For more on Cellier and her writing, see Penny Richards, 'A Life in Writing: Elizabeth Cellier and Print Culture', *Women's Writing*, 7.3 (2000), 411-25.
16. Martha Hodges (& others), Wellcome Collection, MS 2844.
17. Martha Hodges (& others), Wellcome Collection, MS 2844.

18. 'A Hymn in Sickness' later also appeared as an anonymous contribution to a miscellany volume printed in Limerick by publisher J. Ferrar in 1773. See *Miscellaneous Poems. On Religious, Moral, and Entertaining Subjects: Collected from the Best English Authors* (Limerick: J. Ferrar, 1773), p. 156.

19. Jayne Elisabeth Archer, 'The "Quintessence of Wit": Poems and Recipes in Early Modern Women's Writing', in *Reading and Writing Recipe Books, 1550-1800*, ed. by Michelle Di Meo and Sara Pennell (Manchester: Manchester University Press, 2013), pp. 114-34 (p. 121).

20. Edward Baynard, *Health; A Poem. Shewing How To Keep and Preserve It in a Sane and Sound State. As Also To Restore It When Low and Diminish'd* (London: J. Roberts, 1716); Mark Akenside, *The Pleasures of Imagination. A Poem. In Three Books* (London: R. Dodsley, 1744); John Armstrong's *The Art of Preserving Health* (1744), ed. by Adam Budd (Farnham: Ashgate Publishing, 2011).

21. Archer, p. 119.

22. Harold J. Cook, 'The Rose Case Reconsidered: Physicians, Apothecaries, and the Law in Augustan England', *Journal of the History of Medicine and Allied Sciences*, 45.4 (October 1990), 527-55 (p. 528); Elizabeth Lane Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002), p. 27.

23. Radcliffe was among those physicians who supported the activity of apothecaries. He was first fined for failing to maintain Latin case notes, opting instead to write in English. Although he was later dismissed by the College, he remained successful and obtained substantial wealth for his efforts. His name and legacy remain preserved through the naming of John Radcliffe Hospital, Oxford, and the Radcliffe Camera, Oxford University, the funding for which was sourced from his estate after his death. Furdell, p. 27.

24. Jane Spencer, 'Creating the Woman Writer: The Autobiographical Works of Jane Barker', *Tulsa Studies in Women's Literature*, 2.2 (Autumn 1983), 165-81; Carol Barash, *English Women's Poetry, 1649-1714: Politics, Community, and Linguistic Authority* (Oxford: Oxford University Press, 2001), p. 175.

25. King posits that Barker's poems may have made their way into print by being shared with the publisher of *Poetical Recreations*, Benjamin Crayle. The manuscripts for the volume could have been given to him either by Barker herself, who lived locally to his print shop, or by friends to whom she had sent her work. See King, p. 32.

26. Although the protagonist in both texts is named Galesia, scholars generally agree that the character was designed as a version of Barker herself. See Spencer, p. 166; Kathryn R. King and Jeslyn Medoff, 'Jane Barker and her Life (1652-1732): The Documentary Record', *Eighteenth-Century Life*, 21.3 (1997), 16-38; Joanne Myers, 'Jane Barker's Conversion and the Forms of Religious Experience', *Eighteenth-Century Fiction*, 30.3 (2018), 369-93 (pp. 369-70).

27. Deborah Harkness, 'A View from the Streets: Women and Medical Work in Elizabethan London', *Bulletin of the History of Medicine*, 82.1 (Spring 2008), 52-85 (p. 59).

28. Barker, 'On the Apothecary's Filing my Bills amongst the Doctors', p. 32.

29. 'Petticoat Physic', *The Lancet* (9 January 1858), p. 44.

30. Barker, 'On the Apothecary's Filing my Bills amongst the Doctors', p. 32.

31. Original spelling has been preserved within this quotation. Edward Edwards, *The Analysis of Chyrurgery* (London: Thomas Harper, 1636), unpaginated dedicatory preface. For more on Edwards, see Lyn Bennett, *Rhetoric, Medicine, and the Woman Writer, 1600-1700* (Cambridge: Cambridge University Press, 2018), p. 22, 46.

32. The identity of Barker's suitor, later referred to as 'Bosvil' in her experimental fiction, remains unknown, though King postulates that the labels 'unkind Strephon', 'Bosvil', 'Mr S.L.', and 'Little Tom King' across her works each refer to the same person. See King, p. 42 n. 30.

33. Barker, 'On the Apothecary's Filing my Bills amongst the Doctors', pp. 32–33.
34. Barker, 'On the Apothecary's Filing my Bills amongst the Doctors', p. 32.
35. Jane Barker, 'A Farewell to Poetry, with A Long Digression on Anatomy', in *Poetical Recreations* (London: Benjamin Crayle, 1688), pp. 99–106 (p. 99).
36. For further discussion of Barker's literary experimentation with genre and the form of the novel, see Patricia Meyer Spacks, *Novel Beginnings: Experiments in Eighteenth-Century English Fiction* (New Haven: Yale University Press, 2006), pp. 34–37.
37. Karen Bloom Gevirtz, 'Philosophy and/in Verse Jane Barker's "Farewell to Poetry" and the Anatomy of Emotion', in *The Future of Feminist Eighteenth-Century Scholarship*, ed. by Robin Rubina (New York: Routledge, 2018), pp. 54–70 (pp. 56–57).
38. Jane Barker, 'An Invocation of her Muse', in *A Patch-Work Screen for the Ladies* (London: E. Curll and T. Payne, 1723), p. 15.
39. Meek, 'Jane Barker, Medical Discourse, and the Origins of the Novel', p. 57.
40. Barker, 'A Farewell to Poetry, with a Long Digression on Anatomy', pp. 101–02.
41. Paula Backshieder, *Eighteenth-Century Women Poets and their Poetry: Inventing Agency, Inventing Genre* (2005) (Baltimore: Johns Hopkins University Press, 2008), p. 68.
42. Darby Lewes, 'Utopian Sexual Landscapes: An Annotated Checklist of British Somatopias', *Utopian Studies*, 7.2 (1996), 167–95 (p. 167).
43. Lewes, p. 167.
44. Patrick Maxwell, 'Memoir of Miss Susanna Blamire', in *The Poetical Works of Susanna Blamire*, ed. by Henry Lonsdale (Edinburgh: John Menzies, R. Tyas, D. Robertson, and C. Thurnam, 1842), pp. xv–xlvii (p. xxxix).
45. Christopher Hugh Maycock, *A Passionate Poet: Susanna Blamire* (Penzance: Hypatia Press, 2003), pp. 77–78.
46. Susanna Blamire, 'Epistle to her Friends at Gartmore', in *The Poetical Works of Susanna Blamire*, ed. by Lonsdale, pp. 153–58 (p. 156).
47. Blamire, 'Epistle to her Friends at Gartmore', pp. 156–57.
48. Letters from Blamire's Aunt Simpson to her brother William refer affectionately to Susanna as 'Sukey' and Bridget, Susanna's half-sister, as 'Biddy'. See Mary Simpson, Letter to William Blamire, 3 November 1763, Wordsworth Trust, WLMS 1998.60.25.
49. Blamire, 'Epistle to her Friends at Gartmore', p. 156.
50. George Cheyne, *The English Malady; or, A Treatise of Nervous Diseases of All Kinds, as Spleen, Vapours, Lowness of Spirits, Hypochondriacal, and Hysterical Distempers, &c.* (London: G. Strahan and J. Leake, 1733), p. 56.
51. G.J. Barker-Benfield, *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago: University of Chicago Press, 1992), p. xxvi.
52. Blamire was labelled 'the Poet of Friendship' by Jonathan Wordsworth in his lecture celebrating the dedication of the Susanna Blamire bicentenary memorial tablet, in Carlisle Cathedral in March 1994. Wordsworth offers this title in recognition of the high value she placed on friendship and how this is reflected in her written works. See Jonathan Wordsworth, *Susanna Blamire — Poet of Friendship* (Much Wenlock, Shropshire: RJL Smith & Associates, 1994), pp. 4, 11–12.
53. Susanna Blamire, 'An Allegory', Wordsworth Trust, MS 2017.1.19.
54. MS 2017.1.19.
55. MS 2017.1.19.
56. MS 2017.1.19.
57. MS 2017.1.19.
58. Maycock suggests that Blamire may have suffered from rheumatic heart fever. Maycock, p. 109.

59. Susanna Blamire, Untitled poem about sickness, c. 1772, Wordsworth Trust, MS 1998.60.14.
60. Blamire, 'Epistle to her Friends at Gartmore', p. 157.
61. Sarah Stone, *A Complete Practice of Midwifery* (London: T. Cooper, 1737), title page.
62. Stone, p. 8.
63. Ernelle Fife, 'Gender and Professionalism in Eighteenth-Century Midwifery', *Women's Writing*, 11.2 (2004), 185–200 (p. 191).

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