CHAPTER V

THE LEPER IN ENGLAND

“From the benefactions and possessions charitably bestowed upon the hospital, the hunger, thirst and nakedness of those lepers, and other wants and miseries with which they are incessantly afflicted . . . may be relieved.”

(Foundation Charter of Sherburn.)

We now turn from leper-asylums to consider the leper himself—a sadly familiar figure to the wayfaring man in the Middle Ages. He wears a somber gown and cape, tightly closed; a hood conceals his want of hair, which is, however, betrayed by the absence of eyebrows and lashes; his limbs are maimed and stunted so that he can but hobble or crawl; his features are ulcerated and sunken; his staring eyes are unseeing or unsightly; his wasted lips part, and a husky voice entreats help as he “extends supplicating lazar arms with bell and clap-dish.”

At the outset it is necessary to state that inmates of lazar-houses were not all true lepers. Persons termed leprosi, infirmi, elefantuosi, languidi, frères malades, meselles, do not necessarily signify lepers in a strict sense. Gervase of Canterbury, writing about 1200, speaks of St. Oswald’s, Worcester, as intended for “Infirmi, item leprosi”; and these words are used synonymously in Pipe Rolls, charters, seals, etc. “Leprosy” was an elastic term as commonly used. In the statues of one hospital,

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the patriarch Job was claimed as a fellow-sufferer—“who was so smitten with the leprosy, that from the sole of his foot to the crown of his head there was no soundness in him.” A lazar was one “full of sores,” and any person having an inveterate and loathsome skin-eruption might be considered infected. Disfiguring and malignant disorders were common. Victims of scrofula, lepra, lupus, tuberculosis, erysipelas (or “St. Anthony’s fire”) and persons who had contracted disease as the baneful result of a life stained with sin, would sometimes take
advantage of the provision made for lepers, for in extremity of destitution this questionable benefit was not to be despised. In foreign lands to-day, some are found not unwilling to join the infected for the sake of food and shelter; we are told, for example, that the Hawaiian Government provides so well for lepers that a difficulty arises in preventing healthy people from taking up their abode in hospitals. On the other hand, it often happens that those who are actually leprous refuse to join a segregation-camp.

No one, however, can deny that leprosy was once exceedingly prevalent, and after weighting all that might be said to the contrary, Sir J. Y. Simpson and Dr. George Newman were convinced that the disease existent in England was for the most part true leprosy (elephantiasis Graecorum).

I. Pioneers of Charity

One practical outcome of the religious revival of the twelfth century was a movement of charity towards the outcast. The Lazarus whom Jesus loved became linked in pious minds with that Lazarus ulceribus.

plenus neglected by men, but now “in Abraham’s bosom,” and the thought took a firm hold of the heart and imagination. Abandoned by relatives, loathed by neighbours, the famished leper was now literally fed with crumbs of comfort from the rich man’s table.

The work of providing for “Christ’s poor,” begun by the great churchmen Lafranc and Gundulf, was carried into the realm of personal service by Queen Maud (about 1101), the Abbot of Battle (before 1171) and High, Bishop of Lincoln (about 1186). Queen Maud is the brightest ornament of the new movement. Like St. Francis of Assisi a century later, she “adopted those means for grappling with the evil that none but an enthusiast and a visionary would have taken.” Aelred of Rievaulx relates how Prince David visited her and found the house full of lepers, in the midst of whom stood the queen. She washed, dried and even kissed their feet, telling her brother that in so doing she was kissing the feet of the Eternal King. When she begged him to follow her example, he withdrew smiling, afterwards confessing to Aelred:— “I was sore afraid and answered that I couldn’t on no account endure it, for as yet I did not know the Lord, nor had His spirit been revealed to me.” Of Walter de Lucy, the chronicler of Battle Abbey writes:—

“He especially compassionated the forlorn condition of those afflicted with leprosy and elephantiasis, whom he was so far from shunning, that he frequently waited upon them in person, washing their hands and feet, and, with the utmost cordiality, imprinting upon them the soothing kisses of love and piety.”

St. High used to visit in certain hospitals, possibly those at Peterborough and Newark connected with the
See or the Mallardry at Lincoln. He would even dwell among the lepers, eating with them and ministering to them, saying that he was inspired by the example of the Saviour and by His teaching concerning the beggar Lazarus. On one occasion, in reply to a remonstrance from his Chancellor, he said that these afflicted ones were the flowers of Paradise, pearls in the coronet of the Eternal King.

2. Public Opinion

These noble pioneers were doubtless important factors in moulding public opinion. They may often have out stepped the bounds of prudence, but, as one has observed, “an evil is removed only by putting it for a time into strong relief, when it comes to be rightly dealt with and so is gradually checked.” As long as possible the world ignored the existence of leprosy. The thing was so dreadful that men shut their eyes to it, until they were shamed into action by those who dared to face the evil. The Canon of the Lateran Council of 1179 acknowledged that unchristian selfishness had hitherto possessed men with regard to lepers. We need not suppose that the heroism of those who ministered to lepers was that which boldly faces a terrible risk, but it was rather that which overcomes the strongest repulsion for hideous and noisome objects. There is no hint in the language of the chroniclers of encountering danger, but rather, expression of horror that any should hold intercourse with such loathsome creatures. The remonstrance’s of Prince David and of William de Monte were not primarily on account of contagion.—“What is it that thou doest, O my lady?

surely if the King knew this, he would not deign to kiss with his lips your mouth thus polluted with the feet of lepers ! ” “When I saw Bishop Hugh touch the livid face of the lepers, kiss their sightless eyes or eyeless sockets, I shuddered with disgust.”—If St. Francis raised an objection to inmates wandering outside their precincts, it was because people could not endure the sight of them. The popular opinion regarding the contagious nature of the disease developed strongly, however, toward the close of the twelfth century. The Canon De Leprosis (Rome, 1179 ; Westminster, 1200) declares emphatically that lepers cannot dwell with healthy men. Englishmen begin to act consistently with this conviction. The Prior of Taunton (1174-85) separates a monk from the company of the brethren “in fear of the danger of this illness” ; and the Durham chronicler mentions an infirmary for those “stricken with the contagion of leprosy.”

3. Civil Jurisdiction

(a) The Writ for Removal.—The right to expel lepers was acknowledged before it was legally enforced. An entry upon the statue-book may be merely the
official recognition of an established custom. The fact that where use and wont are sufficiently strong, law is unnecessary, is illustrated to-day in Japan, where public opinion alone enforced the separation of lepers. At length English civil law set its seal upon the theory of infection by the writ De Leproso Amovendo, authorizing the expulsion of lepers on account of manifest peril by contagion. An early instance of removal occurs in the Curia Regis Rolls (1220). It is mentioned that William, son of Nicholas Malesmeins, had been consigned with the assent

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of his friends to a certain Maladria in Bidelington, where he abode for two years. This was the leper-house near Bramber, mentioned four years previously in a Close Roll as “the hospital of the infirm of St. Mary Magdalene of Bidelington.”

Legislation on this subject was chiefly local. The Assizes of London had proclaimed in 1276 that “no leper shall be in the city, nor come there, nor make any stay there.” Edward III supplemented existing measures by an urgent local edict for London and Middlesex. The royal proclamation sets forth that many publicly dwell among the citizens, being smitten with the taint of leprosy; these not only injure people by the contagion of their polluted breath, but they even strive to contaminate others by a loose and vicious life, resorting to houses of ill-fame, “that so, to their own retched solace, they may have the more fellows in suffering.”

All persons proved leprous—citizens or others, of whatever sex or condition—are to quit the city within fifteen days, “and betake themselves to places in the country, solitary, and notably distant from the city and suburbs.” This order, sent to the mayor, was followed by a proclamation to the sheriff of the county. Lepers are to abandon the highways and field-ways between the city and Westminster, where several such persons sit and stay, associating with whole men, to the manifest danger of passers-by.

This social problem continued to vex municipal authorities. A precept was issued (1369) “that no leper beg in the street for fear of spreading infection.” The porters of the eight principal gates of the city were sworn

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to refuse them admittance. (That barbers—forerunners of the barber-chirurgeons—were included among the gate-keepers in 1310 and 1375, was perhaps due to their supposed capability of recognizing diseases.) If a leper tried to enter, he should forfeit his horse or his outer garment, and if persisting, be taken into custody. The foreman at “le loke” and an official at the Hackney lazare-house were also bound to prevent their entry into the city.

The “Customs of Bristol,” written down by the recorder in 1344, declare “that in future no leper reside within the precincts of the town.” Imprisonment was the penalty—a plan of doubtful wisdom. The measures ordained by the burgesses of Berwick-on-Tweed were summary:
“No leper shall come within the gates of the borough; and if one gets in by chance, the serjeant shall put him out at once. If one willfully forces his way in, his clothes shall be taken off him and burnt, and he shall be turned out naked. For we have already taken care that a proper place for lepers shall be kept up outside the town, and that alms shall be there given to them.”

It was comparatively easy for the civic authorities to control the ejection of lepers when the asylum was under their supervision, as it frequently was. At Exeter, ecclesiastical lenience permitted a continuance of the custom (which was already “ancient” in 1163) of allowing lepers to circulate freely in the town. In 1244 the bishop seems to have agreed with the mayor and corporation about the inadvisability of the practice; and he resigned the guardianship of the lazaret-house, accepting in its stead that of St. John’s hospital.

Municipal documents record the expulsion of lepers. In Gloucester (1273), Richard, Alice and Matilda gave trouble and would remain within the town “to the great damage and prejudice of the inhabitants.” John Mayn, after repeated warnings to provide for himself some dwelling outside London, was sworn to depart forthwith and not return, on pain of the pillory (1327). A Leet Roll among the records of Norwich states that “Thomas Tytel Webstere is a leper, therefore he must go out of the city” (1375). In the following instances, the infected were consigned to hospitals. Margaret Taylor came before the keepers of Beverley in the Gild Hall, and asked by way of charity permission to have a bed in the lepers’ house outside Keldgate Bar, which request was granted. (1394). The town-clerk of Lydd makes an entry of ten shillings “Paied for delyvere of Simone Reede unto the howse of Lazaris” (circa 1460). The manorial court sometimes dealt with such cases. That of the Bishop of Ely at Littleport recorded (1321):— “The jurors say upon their oath that Joan daughter of Geoffrey Whitring is leprous. Therefore be she set apart.”

The law evidently had no power to touch a leper unless he made himself a source of public danger. No one interfered with him as long as he remained in a quiet hiding-place, quitting it, perhaps, only at night. Individuals, sheltered by the affection or self-interest of relatives, might never come under the ban of the law: in the Norwich record, for example, Isabella Lucas seems to have been allowed to remain at home (1391). Judge Fitz-Herbert, commenting on the writ of removal, observes

that it lies where a leper is dwelling in a town, and will come into the church or amongst his neighbours.

English legislation was never severe regarding lepers. We may believe that the tolerant spirit of a certain thirteenth-century Scottish canon prevailed throughout Great Britain. Lepers, it was declared, might well fulfil their parochial
obligations, but “if they cannot be induced to do so, let no coercion be employed, seeing that affliction should not be accumulated upon the afflicted, but rather their misfortunes commiserated.” In France, however, upon one terrible occasion, Philip V was guilty of the abominable crime of burning lepers on the pretext that they had maliciously poisoned wells. Mezeray says: “they were burned alive in order that the fire might purify at once the infection of the body and of the soul.” The report of this inhuman act reached England and was recorded both in the Chronicle of Lanercost (under date 1318) and also by John Capgrave, who says:

“And in this same yere [1318] (sic) the Myssles [lepers] (sic) thorow oute Cristendam were slandered that thei had mad couenaunt with Sarasines for to poison alle Cristen men, to put unym in wellis, and alle maner uesseles that long to mannes use ; of which malice mony of hem were conuiete, and brent, and many Jewes that gave hem councel and comforn.”

(b) Property.—The legal status of the leper must now be examined. When pronounced a leper in early days, a man lost not only his liberty, but the right to inherit or bequeath property. A manuscript Norman law-book declares “that the mezel cannot be heir to any one.” In the days of Stephen, for example, Brien Fitz-Count was lord of Wallingford and Abergavenny. “He had two sons, whom, being lepers, he placed in the Priory of Bergavenny and gave lands and tithes there to for their support,” bequeathing his property to other kinsmen. Again, two women of the Fitz-Fulke family appeared in the King’s Court (1203) in a dispute about property at Sutton in Kent: Avice urged that Mabel, having a brother, had no claim—but against this Mabel says that he is a leper.” Even a grant made by such a person was void. In 1204 King John committed the lands of William of Newmarch to an official who should answer for them at the Exchequer, but “if he have given away any of his lands after he fell sick of the leprosy, cause the same to be restored to his barony.” This illustrates Bracton’s statement that “a leprous person who is placed out of the communion of mankind cannot give . . . as he cannot ask,” and, again, “if the claimant be a leper and so deformed that the sight of him is insupportable, and such that he has been separated . . . [he] (sic) cannot plead or claim an inheritance.”

On the other hand, Lord Coke declares that “ideots, leapers &c. may be heires,” and he comments thus upon Bracton and Britton: “if these ancient writers be understood of an appearance in person, I think their opinions are good law : for [lepers] (sic) ought not to sue nor defend in proper person, but by attorney.” Possibly the Norman custom of disinheritance prevailed in England at one time and then died out. The case of Adam
de Gaugy proves that in 1278 this Northumbrian baron was not liable to forfeiture. He was excused, indeed, from appearing in the presence of Edward I, but was directed to swear fealty to an official. Although spoken of as his brother’s heir, Adam did not long enjoy his property. He died the same year, childless, but leaving a widow (Eve), and the barony passed to a kinsman.  

The Norman maxim that the leper “may possess the inheritance he had before he became a leper” is illustrated by the story of the youthful heir of Nicholas de Malesmeins. Having attained full age, he left the hospital where he had been confined, appeared before his feudal lord, did homage, made his payment, and entered his fief.

4. Ecclesiastical Jurisdiction

Although leprosy was a penal offence, only laymen could be cited and dealt with by the king, mayor or feudal lord. Clerks in holy orders had to answer to their bishop. In the case of parochial clergy, the diocesan was responsible for their suspension from office, as stated by the Canon De Leprosis. Lucius III (1181-1185) decreed that they must serve by coadjutors and wrote to the Bishop of Lincoln on the subject. The Episcopal registers of Lincoln afterwards record the case of the rector of Seyton (1310). Several leprous parish priests are named in other registers, e.g. St. Neot, 1314 (Exeter), Colyton, 1330 (Exeter), Castle Carrock, 1357 (Carlisle). In the latter instance, the bishop having learned with sorrow that the rector was infected and unable to administer the sacraments, cited him to appear at Rose with a view to appointing a coadjutor. It was ordered by Clement III that when clergy were thus removed, they should be supported from the fruits of their benefices. Sir Philip, the leper-priest of St. Neot in Cornwall, was allowed two shillings a week, besides twenty shillings a year for clothing. He was permitted to keep the best room in his vicarage and the adjoining chambers, except the hall. The rest of the house was partitioned off for the curate, the door between them being walled up.

5. Examination of Suspected Persons.

The duty of reporting and examining cases fell to the clergy, doctors, civil officers or a jury of discreet men. (Cf. Fig. 7.) A curiously complicated lawsuit brought into the King’s court in 1220 relates how a certain man had custody of the children of Nicholas de Malesmeins. When the eldest-born became a leper, his perplexed guardian took the young man to the King’s Exchequer, and before the barons of the Exchequer he was adjudged a leper, and consigned to a hospital. (See pp. 52, 58.)
In ordinary cases, the leper would show himself to the parish priest as the only scholar. It was the village priest who helped the stricken maiden to enter “Badele Spital” near Darlington, and afterwards attested her cure, as related by Reginald of Durham. (See p. 97.) The register of Bishop Bronescomb of Exeter declares that “it belongs to the office of the priest to distinguish between one form of leprosy and another.” It was the duty of the clergy to take cognizance of cases, but it was not always politic to interfere. In 1433 the parson of Sparham endeavoured to get a parishioner, John Folkard, to withdraw from the company of other men because he was “gretely infect with the sekeness of leper.” The vicar advertised him to depart, for “his sekeness was contagious and myght hurte moche people.” After much disputing, John went off to Norwich and took an action for trespass against the parson before the sheriffs. Whereupon the vicar had to appeal to chancery.

The writ of removal ordered the careful investigation of cases in the presence of discreet and lawful men having the best knowledge of the accused person and his disease. Probably the best was not very good, for many judged by the outward appearance only. The Bishop of Lincoln, directing the resignation of a clergyman (1310), says that he is besprinkled with the spot of leprosy. The decree of 1346 condemns “all those who are found infected with leprous spots” to be removed. Anthony Fitz-Herbert, writing in 1534, points out that the writ is for those “who appear to the sign of all men that they are lepers,” by their voice, disfigurement and noisome condition.

In medical treatises, great stress was laid on the necessity of investigation with pondering and meditation. The Rosa Anglica of John of Gaddesden...
(physician to Edward II) declares that “no one is to be adjudged a leper, and separated from intercourse of mankind, until

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the figure and form of the face is actually changed.” The contemporary French doctor, Gordon, uses almost the same words; and, repeating his precautions, observes that “lepers are at the present day very injudiciously judged.” A later writer, Guy de Chauliac (circa 1363) says:—

“In examination and judgement of lepers, there must be much circumspection, because the injury is very great, whether we thus submit to confinement those that ought not to be confined, or allow lepers to mix with the people, seeing the disease is contagious and infectious.”

Sir. J. Simpson gives copious extracts from Guy’s Chirurgia, which has also been translated into modern French (1890). Guy describes fully the examination of a suspected person, giving in detail all possible symptoms. It may here be observed that Bartholomew Angelicus, his contemporary, enumerates among the causes predisposing to leprosy, dwelling and oft talking with leprous men, marriage and heredity, evil diet—e.g. rotten meat, measled hogs, flesh infected with poison, and the biting of a venomous worm: “in these manners and in many other the evil of lepra breedeth in man’s body.” Guy advises the doctor to inquire if the person under examination comes of tainted stock, if he have conversed with lepers, etc. He must then consider and reconsider the equivocal and unequivocal signs of disease. After a searching investigation—not to be confined to one day—the patient must either be set free (absolvendus) with a certificate, or separated from the people and conducted to the lazaret-house.

About the time that John of Gaddesden was professor of medicine at Oxford (1307 – 1325), and was writing upon

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leprosy, “experienced physicians” were summoned to examine a provincial magnate. The mayor and bailiffs of royal Winchester had been over-zealous “under colour of the king’s late order to cause lepers who were amongst the healthy citizens to be expelled.” It was surely a bitter hour to Peter de Nutle, late mayor of the grand old city, when his successor and former colleagues hounded him out! But there was justice for one “falsely accused”; and subsequently an order of redress was sent, not without rebuke to the civic authorities for their malicious behaviour towards a fellow citizen:—

“as it appears, from the inspection and examination before our council by the council and by physicians expert in the knowledge of this disease, that the said Peter is whole and clean, and infected in no part of his body.”
A few days later the sheriff of Hampshire was directed to make a proclamation to
the same effect, so that Peter might dwell as he was wont unmolested. 20

The royal mandate of 1346 reiterated the stipulation that men of
knowledge should inquire into suspected cases. It therefore seems unlikely that a
London baker ejected in 1372 was merely suffering from an inveterate eczema, as
has been suggested. Careless as were the popular notions of disease, medical
diagnosis was becoming more exact; four kinds of leprosy were distinguished, of
which “leonine” and “elephantine” were the worst.

There is an interesting document extant concerning a certain woman who
lived at Brentwood in 1468. She was indicted by a Chancery warrant, but
acquitted on the

authority of a medical certificate of health. The neighbours of Johanna
Nightingale petitioned against her, complaining that she habitually mixed with
them and refused to retire to a solitary place, although “infected by the foul
contact of leprosy.” A writ was therefore issued by Edward IV commanding a
legal inquiry. Finally, Johanna appeared before a medical jury in the presence of
the Chancellor. They examined her person, touched and handled her, made
mature and diligent investigation, going through over forty distinctive signs of
disease. She was at length pronounced “utterly free and untainted,” and the royal
physicians were prepared to demonstrate this in Chancery “by scientific process.”

6. Treatment of the Body

Alleviation was sometimes sought in medicinal waters. Here and there the
site of a hospital seems to have been selected on account of its proximity to a
healing spring, e.g. Harbledown, Burton Lazars, Peterborough, Newark, and
Nantwich. In various places there are springs known as the Lepers’ Well,
frequented by sufferers of bygone days.

Tradition ascribes to bathing some actual cures of “leprosy.” Bladud the
Briton, a prehistoric prince, was driven from home because he was a leper. At
length he discovered the hot springs of Bath, where instinct had already taught
diseased swine to wallow: Baldud, too, washed and was clean. The virtue of the
mineral waters, well known to the Romans, was also appreciated by the Saxons;
possibly the baths were frequented by lepers

from early days, for there was long distributed in Bath “an ancient alms to the
poor and leprous of the foundation of Althelstan, Edgar and Ethelred.” A small
bath was afterwards set apart for their use, to which the infected flocked. Leland
notes that the place was “much frequented of People diseasid with Lepre, Pokkes,
Scabbes, and great Aches,” who found relief. A story similar to that of Bladud,
but of later date, comes from the eastern counties: a certain man, sorely afflicted
with leprosy, was healed by a spring in Beccles, near which in gratitude he built a hospital.

There was rivalry between the natural water of Bath and the miraculous water of Canterbury; the latter consisted of a drop of St. Thomas’ blood many times diluted from the well in the crypt of the cathedral. William of Canterbury, a prejudiced critic, is careful to relate how a leper-monk of Reading, Elias by name, went with his abbot’s approval to Bath desiring to ease his pain, and there sought earnestly of the physicians whatever he was able to gather from them. “He set his hope in the warmth of the sulphur and not in the wonder-working martyr,” says William. After forty days in Bath, Elias set out for Canterbury, but secretly, pretending to seek medicine in London; because (adds the chronicler) the abbot honoured the martyr less than he ought to have done, and might not have countenanced the pilgrimage. On his way, Elias met returning pilgrims, who gave him some of the water of St. Thomas (Fig. 8); he applied this externally and internally and became well. Lest any should doubt the miracle, Benedict of Canterbury tells us that many who were especially skilled in the art of medicine used to say that Elias was smitten with a terrible leprosy, and he proceeds to detail the horrible symptoms. In the end, however, William declares that he who had been so ulcerated that he
might have been called another Lazarus, now appeared pleasant in countenance, as was plain to all who saw him. What the Bath doctors and Bath waters could not do, that the miraculous help of St. Thomas had achieved.

We see from the story of the monk Elias that the ministrations of the physicians and the use of medicine were sought by lepers. Bartholomew says that the disease, although incurable “but by the help of God” when once confirmed, “may be somewhat hid and let, that it destroy not so soon” ; and he gives instruction about diet, blood-letting, purgative medicines, plasters and ointments. Efficacious too was (we are told) the eating of a certain adder sod with leeks.

There is no information forthcoming as to the remedial treatment of lepers in hospital. The only narrative we possesses Chatterton’s lively description of St. Bartholomew’s, Bristol, the Roll of which he professed to find ; it satisfied Barrett, a surgeon, and a local, though uncritical, historian. A father of the Austin Friary came to shrive the lepers (for which he received ten marks) and to dress

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their sores (for which he was given fifty marks) saying, “lette us cure both sprite and bodye.” When barber-surgeons came for an operation—“whanne some doughtie worke ys to bee donne on a Lazar”—friars attended “leste hurte ande scathe bee done to the lepers.” The friars’ knowledge was such that barber-surgeons were willing to attend “wythoute paye to gayne knowleche of aylimentes and theyr trew curis.”


Disease was sometimes regarded as an instrument of divine wrath, as in the scriptural case of Gehazi. Thus Gilbert de Saunervill after committing sacrilege was smitten with leprosy, whereupon he confessed with tears that he merited the scourge of God. The popular view that it was an expiation for sin is shown in the romance of Cresseid false to her true knight. But except in signal cases of wrong-doing this morbid idea was not prominent ; and the phrase “struck by the secret judgement of God” implies visitation rather than vengeance. Indeed, the use of the expression “Christ’s martyrs” suggests that the leper’s affliction was looked upon as a sacrifice—an attitude which illuminated the mystery of pain. St. Hugh preached upon the blessedness of such sufferers : they were in no wise under a curse, but were “beloved of God as was Lazarus.”

Those responsible for the care of lepers long ago realized exactly what is experienced by those who carry on the same extraordinarily difficult work to-day, namely, that leprosy develops to a high degree what is worst in man. Bodily torture, mental anguish, shattered nerves almost amounting to insanity, render lepers wearisome

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and offensive to themselves no less than to others. These causes, together with the absence of the restraining influence of family life, make them prone to rebellious conduct, irritability, ingratitude and other evil habits. Hope was, and is, the only thing to transform such lives, else intolerable in their wintry desolation. St. Hugh therefore bade lepers look for the consummation of the promise:—

“Who shall change our vile body, that it may be fashioned like unto His glorious Body.”

Alleviation of the agonized mind of the doomed victim was undertaken first by the physician and afterwards by the priest. A recognized part of the remedial treatment advocated by Guy was to comfort the heart. His counsel shows that doctors endeavoured to act as physicians of the soul, for they were to impress upon the afflicted person that this suffering was for his spiritual salvation. The priest then fulfilled his last duty towards his afflicted parishioner:—

“The priest . . . makes his way to the sick man’s home and addresses him with comforting words, pointing out and proving that if he blesses and praises God, and bears his sickness patiently, he may have a sure and certain hope that though he be sick in body, he may be whole in soul, and may receive the gift of eternal salvation.”

The affecting scene at the service which followed may be pictured from the form of Appendix A. There was a certain tenderness mingled with “the terrible ten commandments of man.” The priest endeavours to show the leper that he is sharing in the afflictions of Christ. For

his consolation the verse of Isaiah is recited:— “Surely He hath borne our griefs and carried our sorrows, yet did we esteem Him as a leper, smitten of God and afflicted.” The same passage from the Vulgate is quoted in the statutes for the lepers of St Julian’s:— “amongst all infirmities the disease of leprosy is more loathsome than any . . . yet ought they not on that account to despair or
murmur against God, but rather to praise and glorify Him who was led to death as a leper."

After separation the fate of the outcast is irrevocably sealed. Remembering the exhortation, he must never frequent places of public resort, nor eat and drink with the sound; he must not speak to them unless they are on the windward side, nor may he touch infants or young folk. Henceforth his signal is the clapper, by which he gives warning of his approach and draws attention to his request [request for alms]. (Fig. 26.) This instrument consisted of tablets of wood, attached at one end with leather thongs, which made a loud click when shaken. In England, a bell was often substituted for this dismal rattle. Stow and Holinshed refer to the “clapping of dishes and ringing of bels” by the lazar. The poor creature of shocking appearance shown in Fig. 9 holds in his one remaining hand a bell. His piteous cry is “Sum good, my gentyll mayster, for God sake.” This was the beggar’s common appeal: in an Early English Legendary, a mesel cries to St. Francis, “Sum good for godes love.”

Compelled to leave home and friends, many a leper thus haunted the highway—his only shelter a dilapidated hovel, his meager fare the scraps put into his dish. To others, the lines fell in more pleasant places, for in the hospital pain and privation were softened by kindness.

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Footnotes
4. Close 1346 pt. i. m. 18 d. 14 d. and 1348 pt. i. m. 25d.
9. Chron. and Mem., t. 186.
11. Chron. and Mem., 70, i. 95 ; vi. 325.
13. First Institutes, p. 8a., 135b.
15. Curia Regis Rolls, 72, m. 18 d.
20. Close 6 Edw. II, m. 21 d.
22. Chron. and Mem., 67, i. 416.
23. Id. ii. 242.
24. Compare the title of a modern leper-house at Kunamoto in Kiushiu, known as “The Hospital of the Resurrection of Hope” : and in Japanese *Kwaishun Byōin*—“the coming again of spring.”

-end chapter five-