

VIRUS

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A CENTURY OF MIRACLES

Miracles of Jesuit Saints in Bohemia 1620–1720

I.

Christianity and healing are related from the days of the early church. There are more than 70 healings in the New Testament related to Jesus Christ. And it seems that mutual affection of Christianity and medicine survived throughout the centuries. One of the reasons why Christianity won its struggle against pagan religions in Late Antiquity has probably been its ability to explain suffering as a sensible part of a divine intention.¹

As a newly established religion that gained its dominant position throughout Europe, Christianity did not aim only at consolation. Over the centuries a number of methods were developed to assist impoverished and suffering believers. This process involved both the study of natural resources based usually on traditional authorities and the search for a spiritual help with broad impact on the psychical and physic condition of a person.

As some authors suggest the idea of remedy within Christianity underwent a slow process of separation of its natural and spiritual aspects during the 1st millennium of the Christian era.² It started with a homogeneous concept of *Christus medicus* – God who brings not only salvation of the soul but also that of the body. During the first centuries the emphasis gradually shifted from God to the Saints. In writings of Saint Gregory of Tours Jesus Christ is still the ultimate source of mercy but the faith needs intermediaries to spread the mercy among petitioners; that aspect of the role of Christ is taken over by Saints.

A number of them integrated both the function of a worldly physician and a holy person, as we can see in the case of the patrons of medicine, Cosmas and Damian or Gil de Santerém, a Portugese physician-saint from the 13th century. This union was probably more frequent in the East. Individuals who were considered to wield the power of healing often used an undistinguishable mix of techniques, partly medical (touching organs, ointments, herbs) and partly spiritual. Even long dead Saints when appeared in a dream of a patient could perform healing in a very practical manner – suggesting a suitable mix of remedies for example.³ That shows us that medical procedures were used as a tool of explanation for a spiritual healing, too.

However during the Middle Ages the saint-physician unity slowly weakened and finally disappeared within Western Christianity. If a parallel between medicine and salvation was used, it worked as a metaphor. This development was accompanied by an increasing tendency to forbid priests to run a medical business as physicians or apothecaries.

1 Amanda PORTERFIELD, *Healing in the History of Christianity* (Oxford University Press 2005) 4.

2 Hubertus LUTTERBACH, *Der Christus medicus und die Sancti medici. Das Wechselvolle Verhältnis zweier Grundmotive christlicher Frömmigkeit zwischen Spätantike und Früher Neuzeit*. In: *Saeculum. Jahrbuch für Universalgeschichte* 47 (1996) 247–248, and also Iona McCLEERY, *Multos ex Medicinae Arte Curaverat, Multos Verbo et Oratione: Curing in Medieval Portugese Saints' Lives*. In: Kate COOPER, Jeremy GREGORY (eds.), *Signs, Wonders, Miracles. Representation of Divine Power in the Life of the Church*. (Athenaeum Press 2005) 192–202.

3 Cf. PORTERFIELD, *Healing* 72.

As a result the religious healing lost its “medical” apparatus and the practice inclined towards prayers and other purely spiritual activities without a medical purpose. In an long-lasting competition between classical medicine and Saints the church began to regard physicians rather as suspicious rivals.

During the Early Modern Era Western Christianity, which was divided into the competing blocks of catholic and protestant churches, experienced a growing importance of natural philosophy and also a substantial change in the understanding of miracles. Miracles actually became an important source of verification of one’s own belief.⁴ Both confessions looked on them differently. Protestants claimed the era of miracles to be over. Neither Luther nor Calvin refused the possibility of miracles at all, but they thought that God had only performed them in the Age of Gospels and possibly shortly after that. They believed that at their present there was no need for them and seeking for a miracle was a dangerous way of tempting the divine providence.⁵ Catholics on the contrary strengthened the link between holiness or sanctity and the ability to perform miracles during the Tridentine Council, although they also had to change the process of distinguishing between a miracle and forgery during canonisation.⁶ It was natural philosophy, which started to play the role of an arbiter that examined, classified and subsequently defended or refused miracles. At this point the histories of religious healing and of medicine crossed again, although with completely different background – and we all know how this struggle between the sacred and the natural ended.

In the long turn, miracles were marked as unscientific and transferred to the very edge of scholarly interest. From the enlightened point of view the problem was clear: how could we study something that is *ex definitione* incommunicable? This attitude towards religious healing has dominated for the last two centuries and it is still maintained by the medical public, even though historiography has changed its interpretation of medical miracles greatly during the last three decades and made substantial contributions to the analysis of marvels and miracles from various points of view.⁷

I believe that several points must be taken into consideration if we want to evaluate the role of a medieval or early modern healing miracle. First, we have to accept the idea of working with something that seemingly doesn’t belong to the domain of modern science. That involves the search for a method of communicating those phenomena in a way acceptable in the modern scientific discourse. How shall we describe something that, from the perspective of the system of natural laws, could not have happened? Second, a more elaborated view on miraculous healings in 17th century reveals a complicated structure. There are substantial differences between a miracle and something called *res mirabilis*.

Even the most distinct Anti-Catholics in the 17th century could not deny that besides perfectly natural phenomena they often witnessed

4 Peter HARRISON, Miracles, Early Modern Science, and Rational Religion. In: Church History 75/3 (2006) 493.

5 Cf. PORTERFIELD, Healing 95–100; Alexandra WALSHAM, Miracles in Post Reformation England. In: Kate COOPER, Jeremy GREGORY (eds.), Signs, Wonders, Miracles. Representation of Divine Power in the Life of the Church (Athenaeum Press 2005) 273–306.

6 Salvador RYAN, Steadfast Saints or Malleable Models? Seventeenth-Century Irish Hagiography Revisited. In: Catholic Historical Review 91/2 (2005) 251.

7 In addition to the literature mentioned above see for example: Ronald C. FINUCANE, The Rescue of the Innocents. Endangered Children in Medieval Miracles (New York 1997); Anne-Marie KORTE (ed.), Women and miracle stories. A multidisciplinary exploration (Leiden – Boston – Köln 2001); Maria WITTMER-BUSCH, Constanze RENDTEL, Miracula – Wunderheilungen im Mittelalter. Eine historisch-psychologische Annäherung (Köln – Wiemar – Wien 2003); Daniel DOLEŽAL, Hartmut KÜHNE (eds.), Wallfahrten in der europäischen Kultur/Pilgrimage in European Culture (Frankfurt am Main 2006); Timothy S. JONES, David S. SPRUNGER, Marvels, Monsters, and Miracles. Studies in the Medieval and Early Modern Imaginations, (Kalamazoo (Michigan USA) 2002).

rare, extraordinary events. While Catholics covered a vast part of them under the definition of “miracle”, that was not possible anymore on the protestant side since the abandonment of the idea of the miraculous. Therefore a widened definition of a marvel was necessary. A deformed childbirth could have been either a marvel or a miracle. As A. W. Bates in his dissertation thesis suggests, human “monsters” in the 16th and 17th century were treated mainly in two types of books: collections of marvels and publications concerning natural philosophy. This first variant was more characteristic for protestant areas and emphasizes the monster as a sign of divine providence. The second one – paradoxically more “scientific” – often occurred in catholic parts of Europe and it was more concerned with natural causes of the phenomenon, like the quality of semen or the shape of a womb.⁸

Thirdly the word „miracle“ is a multi-level reality. It involves both the miraculous event and the fabricated story. This story was passed on, repeatedly altered, modified and re-constructed according to contemporary contexts.⁹

Although we usually tend to associate the birth of the modern science with protestant regions (where a new mechanistic approach supposedly flourished), there were examples for the opposite, too. There is not even a rule of proportion between the affiliation to a church and the tendency to seek divine providence behind a particular event, which can be proved here by the case of Jesuit miracles.

There was a famous early modern dispute upon the “weapon salve” or “unguentum armarium” – an ointment that was able to heal wounds caused by cutting weapons. In this particular case however, the remedy was not applied on the wound but – surprisingly for us – on the weapon which caused the injury (and this was said to work even on a great distance). Potency of this marvellous remedy was defended above all by outstanding protestant physicians, like Oswald Croll, Robertus Goclenius and others. Jesuits on the other hand denied the validity of this panacea, as we can see in the case of Father Athanasius Kircher or Father Johann Roberti.¹⁰

Yet another similar example can be found in the list of miracles focusing on psychic disorders that was given by Joannes Miller in his history of the Bohemian province of the Societas Jesu.¹¹ Jesuits were considered to be a vanguard of the counter-reformation and thanks to this reputation they were often associated with witchcraft processes. But in fact they often tried to explain a peculiar behaviour of people suffering from a psychic illness on a natural basis. That does not mean that there were no cases of alleged witchcraft mentioned in Miller’s list, but the mere fact that Jesuits used their authority to treat at least some madmen as naturally ill has to be pointed out. Still, they used the concept of miracle to explain diseases.

The fact that a miracle was recognized as a valuable segment of the faith did not mean that the church was willing to accept any extraordinary event or report as a valid proof of divine mercy. There was

8 Alan W. BATES, *Emblematic monsters. Unnatural Conceptions and Deformed Births in Early Modern Europe* (=Clio Medica 77, Amsterdam – New York 2005) 65.

9 Cf. Katherine Allen SMITH, *Mary of Michael? Saint-Switching, Gender and Sanctity in a Medieval Miracle of Childbirth*. In: *Church History* 74/4 (2005) 758–783; Clare PILSWORTH, *Miracles, missionaries and manuscripts in eighth-century southern Germany*. In: Kate COOPER, Jeremy GREGORY (eds.), *Signs, Wonders, Miracles. Representation of Divine Power in the Life of the Church* (Athenaeum Press 2005) 67–77.

10 See Carlos SOMMERVOGEL, *Bibliothèque de la Compagnie de Jésus VI* (Bruxelles – Paris 1890) column 1900; Carlos Ziller CAMENIETZKI, *Jesuits and Alchemy in the Early Seventeenth Century: Father Johannes Roberti and the Weapon-salve Controversy*. In: *Ambix* 48/2 (2001) 83; Mirko D. GRMEK (ed.), *Storia del pensiero medico occidentale. 2. Dal rinascimento all’inizio dell’ottocento* (Roma-Bari 1996) 75; Mark A. WADDELL, *The Perversion of Nature: Johannes Baptista Van Helmont, the Society of Jesus, and the Magnetic Cure of Wounds*. In: *Canadian Journal of History* 37/2 (2003) 179–198. For further details on that cure see: Theophrastus Bombastus von Hohenheim, gen. PARACELsus, *De summis naturae mysteriis libri tres* (Basileae 1570) 127–129.

11 Joannes MILLER, *Historia Provinciae Bohemiae S. J. ab anno D. 1555 [...] ad annum 1723 [...] conscripta anno 1723, tomus I–VI*. Manuscript in the National Library of the Czech Republic, Sig. XXIII C 104.

an understandable conflict between pious believers who tended not to miss any sign of God's will on one side and educated clergy that had to count with exaggeration and credulity.

II.

Now, the mentioned list of Jesuit miracles of the 16th and 17th century shall be dealt with. It can be found in a manuscript written by Father Joannes Miller (1650–1723), titled *Historia Provinciae Bohemiae Societatis Jesu*¹² and it covers approximately a century (1600–1723). That list contains more than one thousand miracles ascribed to Jesuit saints throughout the whole Czech province (i. e. Bohemia, Moravia and Silesia). It was probably created on the basis of annual reports of Jesuit colleges (so called *Litterae annuae*).¹³ The structure of information given on the miracles varies. Generally it consists of the place where the miracle occurred, the name or at least social status of the receiver of the miracle, and a short description of the event itself. However, sometimes parts of this ideal scheme are missing. Altogether 12 Jesuit saints or venerated men are mentioned.¹⁴ Some of them (like St. Robert Bellarmino) were included in the list before they were officially declared saints, and three were never even beatified.¹⁵

Nearly 84% of the miracles reported are related to healing, the rest covers a wide range of events (for example catching thieves, finding lost keys, repelling ghosts). Also the shares of different saints are not at all equal: In fact, 88% of the miracles refer either to Ignatius of Loyola (51,7 %) or to Franciscus Xaverius (36,1 %). The Saint mentioned most frequently after them, was an Italian Jesuit priest from the beginning of the 18th century named Francesco di Geronimo (6,3 %), who is virtually unknown in Bohemia today.

A further analysis shows the numbers of miracles for each decade, from 1600–1609 to 1710–1719 (see figure 1).

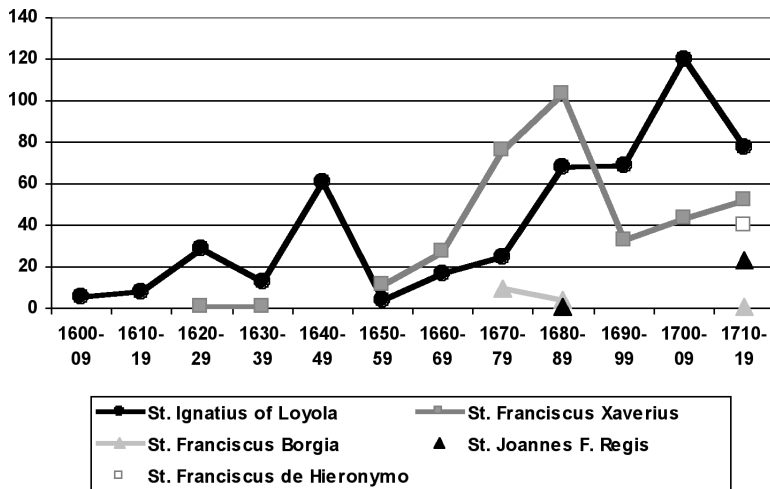
The graph reflects raising or descending popularity of Jesuit saints in the contemporary Czech, Moravian or Silesian society. We have to consider a possible lack of resources in certain periods – even in Miller's times the series of Jesuit catalogi and annual reports were not complete –, however I believe that the presented results can be regarded as a reasonable representation of the general tendencies. The first increase of concern can be seen in the 1640s, then steady rise in reports of miracles follows during the 1670s and 1680s. The decrease in the 1690s results from two factors: First a promising cult of St. Franciscus Borgia did not endure in the decade following after his canonization in 1672. Second, there was a sharp drop of miracles of St. Franciscus Xaverius, an anti-plague patron who was most popular throughout the 1680s, probably because of the great plague, which affected all Central Europe including Austria and Bohemia then, but not any more in the 1690s. Still, it seems to me that the increasing importance of Xaverius – who was also

12 Joannes MILLER, *Historia Provinciae Bohemiae S. J. ab anno D. 1555 [...] ad annum 1723 [...] conscripta anno 1723, tomus I–VI*, Manuscript in the National Library of the Czech Republic, sig. XXIII C 104, (Further cited as MILLER, *Historia*, followed by number of page, since the count of pages numbers is continuous throughout all volumes).

13 Regarding *litterae annuae* see: Gernot HEISS, Die "Litterae annuae" und die "Historiae" der Jesuiten. In: Josef PAUSER, Martin SCHEUTZ, Thomas WINKELBAUER, *Quellenkunde der Habsburgermonarchie (16. - 18. Jahrhundert)* (Wien 2004) 664–685.

14 St. Ignatius of Loyola (1491–1556), St. Franciscus Xaverius (1506–1552), St. Franciscus de Hieronymo (1642–1716), St. Franciscus Borgia (1510–1572), beat. Jean François Regis (1576–1640), beat. Luigi Gonzaga (1568–1591), St. Stanislav Kostka (1550–1568), Martin Sředa (1578–1649), Nikola Leczycki (1574–1653), St. Robert Bellarmini (1542–1621), three martyrs of Japan: Paul Michi, Joan de Goto, Jacob Quisai, venerated together since their canonization in 1627, and Bernard Collnag (about him no further data are available at the moment).

15 This demonstrates that process of gathering evidence for canonization dossiers was not always successful, even though the candidates belonged to the powerful Jesuit order.



Distributions of miracles in decades for the saints mentioned most often
Note: Symbols near zero indicate at least one quotation in the pertaining decade, if there was none, no symbol is shown in the graph.

called an Apostle of India – in the second half of the 17th century represents also a shifting attitude of the Czech society towards the newly strengthened catholic faith. Raising interest in Xaverius also shows that thirty years-war was substituted by plague as the most threatening peril during the reign of emperor Leopold I. However after a peak of popularity of that Saint related probably to the great plague in 1679/80 it apparently did not prevail on that high level.

In regard to the recipients of the miracles, a focus on gender seems of special interest: 44,5% of the recipients of all miracles were women, whilst only 22,6% were men and 32,9% were of unknown sex. Those numbers however have to be treated cautiously. They do not confirm a greater tendency of female persons to seek miraculous help in general, because a more detailed analysis shows us, that there is a huge difference in the proportions of gender between miracles by St. Ignatius of Loyola – patron of pregnancy and successful childbirth – and those by other saints. A comparative analysis on a set of hundred miracles of Our Lady of Klatovy,¹⁶ that were published by Hammerschmid in 1699 confirms the assumption, that for a saint not connected to gender related problems (i.e. pregnancy, haemorrhagia, etc.) recipients were men (56,3 %) more often than women (41,7 %).¹⁷ In the following, medical miracles shall be examined with respect to individual saints.

Before doing so, something has to be said about historical diagnosis in general. I would like to point out that I do not believe that books of miracles can be used as a resource for any kind of retrospective diagnosis. The nature of historical description of illness does not comply with our present way of dealing with information. If we speak about a particular disease now we mean a nosological unit that could be accompanied by a wide range of symptoms. Early modern disease on the

¹⁶ The South-west Bohemian city of Klatovy (Klattau) was a centre of Virgin Mary's cult since the revelation of a miraculous painting in 1685.

¹⁷ Jan Florian HAMMERSCHMID, *Historie Klatovská* (Praha 1699) 272–366. In 2 % of these miracles, the gender of the person was not noted.

- 18 I do not have place to clarify all consequences which follow from this diversity but for example if an illness as we know it today develops through subsequent forms, in historical context it could be treated as a queue of following diseases rather than one gradually changing pathological process. For a recent work on this topic see Giorgio COSMACINI, *Le spade di Damocle. Paure e malattie nella storia* (Edizioni Laterza 2006) 4–5 or Mary LINDEMANN, *Medicine and Society in Early Modern Europe* (Cambridge 1999) 6–12. Sheldon Watts even speaks about “disease construct” to underline constructed and socially dependant nature of historical diagnosis, see Sheldon WATTS, *Epidemics and History. Disease, Power and Imperialism* (New Haven – London 1997) XV (The introductory chapter has Roman numerals).
- 19 Suggested classes are: 1. unknown disease, 2. other disease (mentioned in the manuscript but statistically insignificant), 3. successful childbirth, 4. diseases affecting mobility, 5. injuries and wounds, 6. infectious diseases, 7. cramps and epilepsy, 8. respiratory problems, 9. psychic illnesses, 10. blindness, mute, deafness, 11. swellings and tumours, 12. pain. Those conditions of affected health emerge in cases of all Jesuit saints, and also in the collection of miracles of Virgin Mary of Klatovy
- 20 Proportions of miracles related to St. Ignatius of Loyola: 17% of the miracles were non medical, 83% medical. The medical miracles related to: 55% successful childbirth; 12,2% unknown disease; 3,3% other disease; 2,5% psychic illness; 2,3% injuries and wounds; 1,9% diseases affecting mobility; 1,7% blindness, mute, deafness; 1,2% pain; 1% cramp or epilepsy; 0,6% swellings and tumours; 0,6% infectious diseases; 0,2% respiratory problems.
- 21 LINDEMANN, *Healing* 24.
- 22 See also Trevor JOHNSON, *Blood, Tears and Xavier Water: Jesuit Missionaries and Popular Religion in the Eighteenth-Century Upper Palatinate*. In: Bob SCRIBNER, Trevor JOHNSON (eds.), *Popular Religion in Germany and Central Europe, 1400–1800* (New York 1996) 183–202.
- 23 MILLER, *Historia* 1199, 1204, 1208.
- 24 For example MILLER, *Historia* 1173, 1210.
- 25 MILLER, *Historia* 1182–1183, 1252, 1279.
- 26 See Jean-Claude SCHMITT, *Revenants. Živí a mrtví ve středověké společnosti* (Praha 2002). This book was first published as “Les Revenants:

contrary is rather a symptomatic unit that could represent a wide range of illnesses as we define them today.¹⁸ Unfortunately we can not fully integrate the historical and the contemporary approaches. Therefore I believe that we have to accept “diagnoses” in early modern sources as a social, cultural, mental, and/or physical condition that affected a particular person. We should not try to “translate” them into the modern medical terminology. With respect to this definition for my analysis I have tried to create more or less consistent groups of diseases according to early modern classificatory schemes.¹⁹ It depends on further research to enquire whether this procedure can be used also for other sets of historical diagnoses or not.

III.

Now the focus shall lay on individual saints: The founder of the order of the Jesuits, St. Ignatius of Loyola, is related to an extraordinary high proportion of miracles in childbirth.²⁰ Although birth is not an illness but rather a physiological process, it was seen as a dangerous period in the life of a woman or a child in early modern time. It is widely known that high child mortality has changed substantially only during the last two centuries. However it has been discussed lately, how fatal childbirth itself could be. Some recent studies suggest a low average amount of fatal cases.²¹ On the other hand the number of miracles related to that topic clearly expresses fear and uncertainty.

The perceived help of Saints usually occurred in the presence of some kind of representation of his person, for instance: a painting, a statue, a coin or a necklace. The aid was also invoked by means of relics and by the use of water blessed in St. Ignatius’ name.²² The “water of St. Ignatius” had a wide range of use, often it was associated with preserving and reproducing (harvest, herd and so on).

St. Ignatius’ intervention did not necessarily mean that both mother and child survived. Generally, the life of the mother was considered to be the decisive value. Some cases contain vivid descriptions of complications caused by already dead foetuses, including the participation of surgeons, who *in utero* performed dissections of decomposing bodies.²³ Reference to surgeons attending the bed of the mother indicates that help in delivering babies was not limited to midwives only.

Apart from miracles related to childbirth another interesting role of St. Ignatius is that of an exorcist. Exorcism of ghosts is the topic of 5,4% of the related to him. It is perhaps not a coincidence that most of the cases happened during the 1st half of the 17th century, before the catholic faith definitely won its struggle over the Central European kingdom of Bohemia. During the 2nd half of the century this theme gradually faded away and apparitions of human beings are replaced with less specific ones.²⁴ If a spectre beared resemblance to a person, it was either the Saint himself²⁵ or – in most cases – a revenant,²⁶ the condemned soul of a heretic returning from hell, that usually haunts

a place where he or she had died. Needless to say that all the diabolical power was successfully banished by using prayers and some of the representations of the Saint mentioned above.

Sanctity of Franciscus Xaverius was officially declared in 1622, in the same year when Ignatius was canonized. But his cult spread only little in the beginning.²⁷ The situation changed in the 1650s, probably as a result of his role as a anti-plague patron. The range of his medical miracles is less significant than that of St. Ignatius.²⁸ Nevertheless, nearly 9% of the cases refer to infectious diseases and another 6% to fevers, which at least partially represent contagious diseases, too. Joannes Miller moreover states explicitly that Xaverius is a patron against “stones” and other problems related to urination. The proportion of pertinent healings reaches only 2,5% though, which does not exceed numbers available for other Saints. It is worth mentioning that Xaverius’ help was sought by special means of special devotion called Novena of St. Franciscus Xaverius. The “Novena” (derived from the Latin word novem – nine) consisted of nine separate devotions (Hail Mary and Our Lord’s Prayers), spread across nine consequent Fridays. Some other Saints had their specific devotions too, but none of them was so popular or so strongly promoted by the order as that of Xaverius.²⁹

The miracles referred by Miller also contain a description, which helps to clarify how the Society of Jesus acquired relics that have been later used for medical purposes. Relics generally consisted of two groups, the first one was created by body remnants of holy men and there was always a limited amount of these. The second group included various items which were “touched” or belonged to the possession of the Saint. In Prague there was (and in fact still exists) a hat worn by St. Franciscus Borgia and later by St. Edmund Campion (1540–1581).³⁰ The hat was reportedly very successful in easing headache.³¹

Some other relics were results of pious fabrication. For instance, Miller reports, that a set of special rings was created, attached to fingers of the bodies of Jesuit saints and left there for months or years. Those silver rings were then distributed among believers, and should carry the miraculous powers of their first bearers.³²

The last saint whose miracles could be analysed statistically is Francesco di Geronimo,³³ yet their structure lacks a distinctive focus. I believe that the majority of miraculous places and saints show such a wide and unspecific distribution of topics. The same situation can be found for the miraculous painting of Virgin Mary in Klatovy, which I have used as a comparative set of miracles.³⁴

IV.

There is a difficulty in extracting rather precise information using unprecise sources. However I believe that there are meaningful ways to work historically also with such types of phenomena like a miracle.

les vivants et les morts dans la société médiévale” in 1994.

- 27 Joannes Miller mentions this detail explicitly. See MILLER, *Historia* 1216.
- 28 The cases relate to: 34,1% unknown disease; 9,7% injuries and wounds; 8,9% infectious diseases; 5,8% fevers; 4,7% affected mobility; 4,4% blind, deaf, mute; 3% successful childbirth; 3% other diseases; 2,5% swellings and tumours; 2,5% urination difficulties, stones, nephroliths; 2,2% respiratory problems; 1,9% pain; 1,7% cramps and epilepsy; 1,1% psychic illnesses.
- 29 St. Ignatius of Loyola was venerated by the means of devotions on 12 following Wednesdays, which were introduced by the Society of Jesus in the beginning of the 18th century. St. Franciscus Borgia had his own devotion, too, based on Hail Mary and Our Lord’s prayers repeated five times a day.
- 30 A Jesuit of English origin who left British Isles and entered the Society then. He spent some time in Prague and later was secretly sent back to England for catholic mission. He was discovered, tortured and hanged by the protestant government.
- 31 A photo of such a relic was published in: Alena RICHTEROVÁ, Ivana ČORNEJOVÁ, *Jezuité a Klementinum* (Prague 2006) 170.
- 32 MILLER, 1232, 1257–1259, 1269, 1277. Detailed description of those silver rings donated to the Jesuit college in city of Klatovy by bishop Ignatz Dlouhoveský z Dlouhé Vsi can be found in written history of the college. See Library of National Museum (Knihovna Národního muzea), sig. VII-C-29, *Historia collegii Clattoviensis*, pag. 132.
- 33 His miracles refer to: 27,7% unknown disease; 13,8% other diseases; 12,3% swellings and tumours; 9,2% affected mobility; 9,2% injuries and wounds; 9,2% fevers; 7,7% blindness; 3,1% cramps and epilepsy; 1,5% respiratory problems; 1,5% psychic illnesses; 1,5% pain; 1,5% stones and nephroliths. The rest are non-medical miracles.
- 34 The proportions are: 16,5% unknown illness; 14,4% injuries and wounds; 13,4% other diseases; 9,3% pain; 9,3% deaf, mute, blind; 4,1% swellings and tumours; 4,1% hernia; 3,1% affected mobility; 3,1% infectious illness; 3,1% psychic illness; 2,1% respiration problems; 2,1% fevers; 2,1% difficult urination, stones, nephroliths; 2,1% apoplexy and heart attack; 2,1% profuse bleeding haemorrhagy.

Instead of focusing on “credulity” or simple psychological explicative schemes it had to be described as a rather complex, multilevel reality. Regarding the fact that the majority of miracles are healings we have to adapt the contemporary medical terminology that allows us to work with the sources. A disease has to be treated as a phenomenon affecting someone’s individual physical or psychical abilities and not as an objective entity. The analysis presented here (though based on two different sets of miracles) is still incomplete and requires further research in order to create a more elaborate picture of the graces of miraculous saints in early modern Central Europe.

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