

## A BALANCED DIET FOR A CHOLERIC MAN IN EARLY MODERN ENGLAND

### URAVNOTEŽENA PREHRANA ZA KOLERIKA U RANOMU MODERNOM DOBU ENGLLESKE

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#### SUMMARY

*In the early modern period, dietary practice was widely understood through humoral theory, which held that health depended on maintaining balance among the four bodily humours. This article examines dietary advice for individuals identified as choleric, characterized by an excess of yellow bile associated with heat and dryness, within sixteenth- and seventeenth-century medical thought. Building on previous studies of humoral balance and the melancholic constitution, the article explores how physicians and health writers adapted classical and medieval dietetic principles to manage the heat and dryness characteristic of cholera. Drawing on English popular health manuals and herbals, the article outlines explicit dietary prescriptions formulated within a Galenic framework to temper physiological and emotional excess.*

*The study also considers how these medical recommendations intersect with contemporary culinary practice through an analysis of printed English cookbooks. While medical texts articulated overtly therapeutic dietary regimes, culinary sources rarely framed recipes in medical terms. Nevertheless, many recipes produced forms of balance that aligned with humoral expectations. The article argues that this convergence reflects a shared cultural logic of moderation, shaped by the long transmission of Hippocratic and Galenic dietetic ideas, rather than deliberate medical intent in cooking.*

**Keywords:** *balanced diet, choleric temperament, dietary regimen, humoral theory, early modern cookbooks*

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## INTRODUCTION

This article forms part of a broader research project devoted to the study of diet through the lens of humoral theory. Earlier studies in this series have examined the concept of a balanced diet in general (Kuropatnicki, 2012) and the specific regimen appropriate for a melancholic constitution (Kuropatnicki, 2021). The present paper continues this systematic exploration by focusing on the choleric temperament. Governed by yellow bile, the choleric individual, with a nature of heat and dryness, was thought especially vulnerable to imbalance, particularly in youth and summer, when these traits were most potent.

The choice to focus on the choleric temperament arises from its symbolic as well as physiological prominence in early modern thought. Cholera, associated with the element of fire and the planet Mars, was linked not only to bodily health but also to emotional states such as anger, ambition, and restlessness. Early modern writers, such as Thomas Elyot, Henry Butt, and playwrights like William Shakespeare or Ben Jonson, often regarded this temperament as one that demanded careful regulation through dietary discipline. By examining prescriptive and culinary texts concerned with the management of cholera, this article investigates how diet functioned as both a medical and a moral means of tempering the passions.

The following analysis situates early modern dietary recommendations for the choleric constitution within a long intellectual lineage, from Hippocratic and Galenic principles to Renaissance and seventeenth-century medical practice. The analysis is based on a selection of primary sources, such as health manuals, herbals, and culinary manuscripts, to examine how concerns with humoral balance operated across both scholarly and domestic contexts. Recent scholarship has highlighted the enduring significance of food as a moral and cultural category in premodern Europe (Bynum, 1987; Albala, 2002; Gentilcore, 2016; Snowden, 2019; Winchcombe, 2023, Shapin 2024), and this study contributes to the discussion by demonstrating how humoral dietetics integrated medical reasoning with ethical self-formation. Rather than assuming direct transmission from medical theory to culinary practice, the article approaches cookbooks as texts shaped by their own conventions, whose patterns may align with humoral reasoning without explicitly articulating therapeutic intent.

As Ken Albala has shown, early modern understandings of diet were not concerned with nutrition in the modern sense, but with maintaining humoral balance through the regulation of food, drink, and lifestyle. Dietary advice functioned primarily as a preventive and regulative discipline, grounded in the belief that foods possessed inherent qualities that interacted with complexion, age, season, and

environment. This understanding of diet as a daily practice of self-management, shaped by the long continuity of Hippocratic and Galenic medicine, provides the conceptual framework for this present study (Albala, 2002).

## SOURCES AND APPROACH

This study draws on a selective corpus of English-language sources produced between c. 1500 and 1700. Medical texts include Thomas Elyot's *The Castel of Helth* (1541), Andrew Boorde's *Dietary of Health* (1547), and Nicholas Culpeper's *Complete Herbal* (1653). These works were selected because they explicitly address diet, temperament, and the management of humoral imbalance for a broad readership. Culinary evidence is drawn primarily from printed English cookbooks, including *The Good Huswifes Handmaide for the Kitchin* (1594) and Robert May's *The Accomplisht Cook* (1660). Written for audiences ranging from household managers to professional chefs, these texts are not treated as transparent records of medical practice, but as culturally embedded works shaped by genre conventions, taste preferences, and social aspiration.

All sources, as discussed here, are in English or have been translated into English. This linguistic focus reflects both practical constraints and the coherence of the English medical and culinary print tradition. While humoral medicine circulated widely across early modern Europe, this article does not claim to represent continental practice comprehensively. Instead, it situates English dietary advice within a broader Galenic framework, drawing on scholarship that has demonstrated the wide circulation and relative consistency of humoral concepts during the period.

Methodologically, the article adopts a qualitative, comparative reading of prescriptive and practical texts, comparing explicit dietary prescriptions in medical treatises with the implicit balancing of ingredients in culinary recipes. Rather than assuming intentional therapeutic design, the analysis examines whether patterns of ingredient selection and preparation align with humoral expectations articulated elsewhere. This approach allows for a distinction between prescription and practice, as well as between medical intent and culinary convention.

## HIPPOCRATIC DIETETICS AND THE PRINCIPLE OF BALANCE

Early modern medical theory inherited from antiquity the doctrine of the four humours: blood (Lat. *sanguis*), phlegm (Gr. *phlegma*), yellow bile (Gr. *kholē*), and black bile (Gr. *melas* + *kholē*), each associated with specific elemental qualities. Within this framework, the ancient Greek concept of diet was formalized as a

hygienic and therapeutic practice known as *diata*:<sup>1</sup> a regimen encompassing a holistic way of life aimed at maintaining or restoring health. *Diata* included not only food and drink but also exercise, sleep, air, bathing practices, and other lifestyle factors. Writers of the *Hippocratic Corpus*<sup>2</sup> articulated the necessity of balancing both diet and exercise. They emphasized that consuming inappropriate foods disrupted the natural balance of the body's constituents.

Because no individual was thought to possess the humours in perfect proportion, dietary management was understood as a lifelong process of adjustment. This logic was not merely theoretical. Medical authors repeatedly stressed that inappropriate food could exacerbate a dominant humour, while an appropriate diet could prevent illness. Dietetics (*diatetike*) was therefore regarded as one of the three foundational pillars of medicine, alongside surgery (*cheirurgia*) and pharmacy (*pharmakeutike*), and was considered the most important of the three. Hippocratic physicians adopted an observational method and individualized approach, tailoring dietary regimens to personal constitution, age, gender, occupation, climate, and season. This personalized framework represented a major conceptual advance in ancient medicine and laid the foundation for later Graeco-Roman and medieval dietetics.

## MEDIEVAL DIETETICS AND THE REGIMEN SANITATIS TRADITION

During the medieval period, the term 'diet' retained its classical meaning, referring to a comprehensive regimen encompassing not only food but also lifestyle, environment, and mental disposition. As a result, the terms 'diet' and 'regimen' were often used interchangeably. From the eleventh to the sixteenth centuries, the Latin phrase *regimen sanitatis* ("regimen of health") denoted a widely circulated genre of medical texts intended for both educated elites and lay audiences. Beginning with the *Regimen sanitatis Salernitanum* produced by the School of Salerno, the tradition was continued by such writers as Michael Scot (*Mensa philosophica*), Catalan physician Arnaldus de Villanova (*Regimen ad Regem Aragonum* for King James II of Aragon),<sup>3</sup> Bernard de Gordon (*Regimen sanitatis*),<sup>4</sup> and Magnusus of

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<sup>1</sup> A fairly good study of Greek dietetics is presented in Lonie, 1977. Dietetics is discussed by Adamson (1995); Appleby (1979, pp. 97–116); Richards (1939); Ackerknecht (1971).

<sup>2</sup> This is a body of medical treatises in the Ionic dialect of Greek. Although the 34 books included in the collection were originally attributed to Hippocrates himself, scholars now believe they were more likely composed between the sixth and fourth centuries BC.

<sup>3</sup> This medical text was written in the early 14th c. (between 1305 and 1308).

<sup>4</sup> Bernard de Gordon (c. 1260–1318) authored a *Regimen sanitatis* in 1308, which forms the fourth book of his major medical compendium, the *Tractatus* (also known as *Lilium medicinae*)

Milan (*Regimen sanitatis*). These works exemplify a pedagogical effort to render complex medical theory, rooted in Galenic and Hippocratic traditions and enriched by Arabic medicine through the translations of Avicenna, Rhazes, and Haly Abbas, accessible and applicable to everyday life.<sup>5</sup>

Medieval dietetics diverged sharply from modern nutritional science. Concepts such as carbohydrates, lipids, and proteins were entirely absent; instead, foods were classified according to the ancient system of elemental qualities of hot, cold, moist, and dry. These qualities were not merely descriptive but prescriptive, as each food's effects were understood in terms of its capacity to correct or aggravate an individual's humoral balance. Cucumbers, for instance, were considered cold and moist and thus thought to increase phlegm (Elyot, fol. 24v), while wine, regarded as hot and dry, could counteract an excess of cold or moisture in the body (Elyot, fols. 32v-33r).<sup>6</sup>

This humoral framework permeated both elite medical theory and popular health culture. An individual's temperament (sanguine, choleric, melancholic, or phlegmatic) was believed to shape not only physical constitution but also dietary needs, susceptibilities, and behavioural tendencies. Diet, therefore, functioned not merely as a preventive measure but as a form of ongoing self-regulation. As Davidson observes, early medical knowledge grounded in humoral theory viewed the consequences of eating as "a continuum, an ever-present influence on an individual's health and well-being" (Davidson, 2006, p. 248).

## GALENIC HUMORAL THEORY AND THE REGULATION OF HEALTH

Early modern approaches to diet and health combined structured logical systems with the enduring authority of classical thought, particularly the teachings of

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<sup>5</sup> The development of medieval European dietetics was profoundly shaped by Arabic medical scholarship, through which Galenic and Hippocratic knowledge was preserved, expanded, and reintroduced to the Latin West. Between the ninth and twelfth centuries, major translation centres such as those of Baghdad, Toledo, and Salerno rendered Arabic compendia and commentaries into Latin, allowing the systematic doctrines of Avicenna (*Ibn Sīnā*), Rhazes (*al-Rāzī*), Haly Abbas (*'Alī ibn al-'Abbās al-Majūsī*), and Averroes (*Ibn Rushd*) to circulate widely. Their writings elaborated on the Hippocratic concept of temperament (*mizāj*) and refined the relationship between individual constitution and dietary prescription. This synthesis of Greek and Arabic medicine deeply influenced the regimen sanitatis tradition, which adapted these ideas into a Christian moral framework. As Kashif Anwar and Zeba Haneef note, the typology of "individual temperaments and diet patterns" remains rooted in this Greco-Arabic heritage, in which the balance of the humours was achieved through tailored regimens of food, activity, and environment (Anwar & Haneef, 2019).

<sup>6</sup> For instance, wine was not recommended for children and youths because it contains alcohol, but because its qualities coincided with those of youth, and because it would enhance the dryness and hotness of the young people's bodies.

Hippocrates and Aristotle.<sup>7</sup> Central to this intellectual inheritance was the work of Galen of Pergamum (AD 129–c. 200 or 216), who synthesized earlier medical theories into a comprehensive and influential doctrine.<sup>8</sup> Drawing on empirical observation and Aristotelian logic, Galen conceptualised the human body as a rational system governed by discernible principles, in which cause and effect could be inferred through the interaction of elements, organs, and bodily fluids.

The doctrine of the four humours lay at the core of Galen's medical model. These bodily fluids were believed to shape both physical constitution and mental disposition. Health was defined as the harmonious balance of the humours, while disease resulted from their excess, deficiency, or corruption. Galen articulated this principle clearly: "It seems that health is characterised by the equality and symmetry of these humours. Diseases occur when the humours decrease or increase contrary to what is usual in terms of quantity, shifting of position, irregular combination or putrefaction of whatever has rotted." (Grant, 2000, p. 16). Within this framework, medicine was understood as the art of restoring balance through carefully regulated regimens of food, drink, activity, and environment.

Although classical authorities maintained that all four humours were present in every individual, it was widely accepted that perfect proportionality was rare. Instead, one or two humours typically predominated, producing a characteristic temperament: sanguine, phlegmatic, choleric, or melancholic. These temperaments were thought to influence not only appearance and disposition but also dietary requirements and susceptibility to particular illnesses.

A defining feature of humoral theory was its integration with broader cosmic and seasonal cycles of nature. Each humour corresponded to an element, a season, a planet, and a stage of life, creating a unified model that linked the human body to the natural and celestial order (see Fig. 1).

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<sup>7</sup> Although Aristotle did not compose a treatise devoted specifically to diet, his biological and philosophical writings frequently address related themes. In *Parts of Animals* (II.2, 648a–b), he describes digestion as a process of "concoction" (*pepsis*) effected by innate heat (*thermotēs*), a key Aristotelian physiological concept later adopted by Galen (Aristotle, 1937); in *Generation of Animals* (II.4, 738b) he explicitly relates nourishment to the maintenance of innate heat and the generative principle (Aristotle, 1943); and in *On the Soul* (II.4, 415a–416b) he discusses the nutritive soul (*threptikē psychē*) as the fundamental life faculty responsible for growth and sustenance (Aristotle, 1935). These discussions provided a conceptual framework later developed in Galenic physiology and medieval dietetics.

<sup>8</sup> The works of great importance in the field of dietetics were *De sanitae tuenda* ("On the Preservation of Health"), *De alimentorum facultatibus* ("On the Properties of Food"), and *De probis pravisque alimentorum succis* ("On the Good and Bad Juices of Food"). In them, Galen discusses individual foods as well as diet in the broad sense of the word. Owen Powell's translation of *De alimentorum facultatibus* ("On the Properties of Foodstuffs") is the standard English reference for Galen's dietary theory (Galen, 2003).



Curthose, who was reportedly cured during his stay in Salerno from an arm injury sustained during a crusade to Palestine. Other sources suggest that it was presented by the Salernitan authors as a gift to the King of England (Lafaille, 1990, p. 58). Comprising approximately 360 lines, it distilled Galenic medical advice into memorable verse, facilitating the transmission of learned medicine across social strata.

Such regimens formed part of the broader genre of *regimina*,<sup>10</sup> medical writings concerned with the preservation and restoration of health through ordered daily practices. The Salernitan text exemplifies this tradition by linking bodily care with emotional regulation, reflecting the holistic orientation of medieval and early modern medicine. Beyond their strictly medical function, humoral models also operated as moral and psychological frameworks, shaping literature, education, and social thought. In literary contexts, humoral typology informed modes of characterization, as in Chaucer's *Canterbury Tales* and Shakespeare's drama, where the choleric temperament in particular is repeatedly associated with ambition, assertiveness, and emotional volatility. In educational theory, humoral psychology guided pedagogical approaches that tailored instruction to students' physiological constitutions, as seen in the works of Juan Luis Vives and Erasmus of Rotterdam. Similarly, in social and moral thought, humoral principles structured ideals of comportment, emotional moderation, and self-fashioning, exemplified in courtesy literature such as Castiglione's *Book of the Courtier*.

#### MEDICAL DIETARY ADVICE FOR CHOLERIC TEMPERAMENT

As shown in the diagram above (Fig. 1), yellow bile (hot and dry in nature) was thought to dominate youth and summer and to give rise to the choleric temperament, traditionally associated with fiery qualities. Individuals of a choleric disposition were believed to possess a yellowish complexion and a dry, nervous body, and were frequently described as irascible and prone to sudden outbursts. They were also considered susceptible to thinness and liver-related ailments, slept little, and were said to dream of fire, fighting, and anger (Elyot, 1541, fol. 2v).

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<sup>10</sup> The term was defined by George Sarton (Sarton, 1948, II, p. 244). According to Andrew Wear, early modern regimens were intended for the literate and the well-to-do, "extending their advice from individual princes and nobles [of later antiquity and the Middle Ages] to a print audience." (Wear, 2000, p. 159). The regimens were thus aimed at a relatively narrow section of society, and they are "another pointer to the fact that classical Greek medical tradition and early modern learned medicine hoped for well-off, socially respectable clients, and were not concerned with the health of the whole population." (Wear, 2000, p. 165).

This characterization appears vividly in the *Regimen sanitatis Salernitanum*:

Sharpe *Choller* is an humour most pernicious,  
All violent, and fierce, and full of fire,  
Of quicke conceit, and therewithall ambitious,  
Their thoughts to greater fortunes still aspire,  
Proud, bountifull ynough, yet oft malicious,  
A right bold speaker, and as bold a lyar,  
On little cause to anger great enclin'd,  
Much eating still, yet euer looking pin'd:  
In yonger yeares they vse to grow apace,  
In Elder hairie on their brest and face.

(*Regimen sanitatis Salernitanum*, 1920, p. 136).

According to humoral logic, the safest foods for any individual were those whose qualities most closely resembled their natural, healthy state. English health manuals of the sixteenth and seventeenth centuries, therefore, offered detailed dietary guidance for managing choleric temperaments. Thomas Elyot, in *The Castel of Helth*, warned that choleric individuals should avoid prolonged fasting, since an empty stomach allowed cholera to “burn itself,” producing harmful vapours. At the same time, he cautioned against foods that were themselves hot and dry, including strong spices, garlic, onions, leeks, pepper, sweet foods, and undiluted wine (Elyot, 1541, fol. 71v).

To counterbalance cholera, Elyot recommended foods and substances classified as cold and moist. These included leafy greens such as lettuce and endive, fruits such as pomegranates and melons, and cooling drinks such as whey and diluted vinegar (Elyot, 1541, fol. 58 r-v). Similar advice appears in the work of Andrew Boorde, who emphasized the importance of purging excess bile through both diet and mild medicinal remedies (Boorde, 1870, pp. 288-289). Herbals further reinforced this framework by attributing specific humoral qualities to plants and explaining their effects on the body. Nicholas Culpeper, for example, identified rhubarb, fumitory, violets, hops, and mercury as effective agents for purging cholera and cooling the liver and blood. Valued for their purgative properties, these substances were believed to expel excess bile and restore humoral balance. Of rhubarb, he writes:

The Culinary Rhubarb purges the cholera and phlegm, taken either by itself, made into powder, and drank in a draught of white wine, or steeped therein all night, and taken fasting, or put into other purgatives, as shall be convenient, cleansing the stomach, liver, and blood, it opens obstructions, and helps those diseases that come thereof, as the jaundice, dropsy, swelling of the spleen, tertian and daily agues, and pains in the sides (Culpeper, 1880, pp. 293-294).

Taken together, these texts demonstrate that early modern medical authors articulated a coherent and explicitly humoral dietary regime for choleric bodies, grounded in a shared theoretical framework and expressed through consistent practical advice.

#### CULINARY TEXTS AND THE QUESTION OF HUMORAL INTENT

Health manuals such as Elyot's *The Castel of Helth* (1541), Henry Buttes' *Dyets Dry Dinner* (1599), as well as *Tacuinum sanitatis*<sup>11</sup> (1531) and Culpeper's *Complete Herbal* (1653), allow for the identification of foodstuffs considered beneficial for individuals with an excess of choler. These foods were consistently described as cold and moist in nature, possessing qualities opposed to those of yellow bile. Although fruit was generally regarded with suspicion in humoral medicine, it was nevertheless considered advantageous for choleric individuals. Recommended fruits included apples, apricots, barberries, cherries, lemons, oranges, peaches, melons, plums, pomegranates, and prunes. Similarly, cold and moist vegetables such as white beets, cucumbers, gourds, lettuce, pumpkins, purslane, and spinach were advised. Among fish, eel, pike, and trout were preferred, while other beneficial foods included truffles, cheese, and animal brains. Spring water was considered the most suitable for consumption.

During this period, sugar was widely regarded as a health-giving substance because its perceived qualities (moderately warm and moist) were thought to correspond closely to the body's natural and desirable temperament. Derived from sugarcane and classified within humoral medicine as both nourishing and medicinal, sugar occupied an ambiguous position between food and drug. Medical writers frequently praised it for its ability to purify the body, comfort the stomach, strengthen digestion, and temper the harshness of more aggressive ingredients when used in compound remedies. Its widespread inclusion in syrups, electuaries, conserves, and cordials reflects this therapeutic value, particularly in treatments

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<sup>11</sup> The *Tacuinum sanitates* ("Table of Health") is a group of richly illuminated medieval manuscripts that function as practical handbooks for healthy living. They are derived from the eleventh-century Arabic medical treatise *Taqwīm al-Ṣiḥḥa* ("Maintenance of Health") by the Christian physician Ibn Buṭlān of Baghdad. Produced mainly in northern Italy between the late fourteenth and early fifteenth centuries (c. 1380–1450), these manuscripts were commissioned by elite patrons, including Gian Galeazzo Visconti, Duke of Milan, and contain approximately 200 vividly coloured full-page miniatures. These illustrations depict everyday activities, agricultural labour, foods, plants, and therapeutic practices, all aimed at preserving humoral balance in accordance with Galenic medical theory. Translated into Latin in the thirteenth century, possibly at the court of Manfred of Sicily, the text presents medical knowledge in a tabular format. *Tacuinum sanitates* was originally printed in 1531.

aimed at restoring vitality and moderating bodily excesses. What is more, sugar was believed to be good for all temperaments, at all ages, in every season and region (Arano, 1976, fol. 92).

For choleric individuals, however, sugar presented a distinct risk. Because substances that were warm and moist were believed to be readily converted into yellow bile within bodies already predisposed to heat and dryness, sugar was therefore considered especially liable to transform into choler. As Bartolomeo Sacchi (better known as Platina) cautioned in his *De honesta voluptate et valetudine*,<sup>12</sup> sugar could “engender choler” when consumed excessively by those of a choleric complexion (Platina, 1967, II, p. 15). Rather than soothing the body, it was thus believed to intensify the very qualities (heat, dryness, and volatility) that dietetic regimens sought to restrain. Consequently, medical authorities advised careful regulation of sugar intake for choleric constitutions, permitting it only in small quantities or in combination with cooling and moistening ingredients designed to counterbalance its effects.

While medical and dietary manuals articulated such principles with relative clarity, printed cookbooks of the sixteenth and seventeenth centuries rarely framed recipes in explicitly medical or therapeutic terms. Unlike health manuals or herbals, they did not usually classify ingredients according to humoral qualities or prescribe dishes for specific temperaments. Instead, they emphasized taste, texture, visual appeal, and household management. This discrepancy raises an important methodological question: to what extent can culinary practices be interpreted as reflections of humoral medicine rather than as products of gastronomic convention?

One further consideration is necessary. As Jean-Louis Flandrin has argued, “by the late sixteenth and early seventeenth century, the principles of a healthy diet had changed completely.” Prior to the mid-sixteenth century, dietary practice primarily aimed to preserve an individual’s complexion by prescribing foods of similar qualities: cold foods for cold temperaments and hot foods for hot ones, thereby reinforcing rather than correcting innate constitutions. After 1550, however, dietary theory increasingly emphasized counteraction rather than reinforcement, advocating alimentary choices designed to correct humoral imbalances and regulate bodily equilibrium. This shift represents a major transformation in un-

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<sup>12</sup> Platina composed *De honesta voluptate et valetudine* (“On Honourable Pleasure and Health”) c. 1474, a theoretical treatise on Italian cuisine that integrates culinary practice with Galenic dietary theory. Large portions of the text were directly adapted from Maestro Martino of Como’s *Libro de arte coquinaria*, and Platina’s work is generally regarded as the first printed cookbook, reflecting the close interrelation of gastronomy, medicine, and moral philosophy in early modern dietary literature.

derstanding how diet can shape health and physiological stability (Flandrin, 1989, pp. 295–296).

Recent scholarship on medieval dietary culture and culinary practice further nuances this development. Studies by Massimo Montanari and Melitta Weiss Adamson have demonstrated that medieval food systems, professional cooking, and kitchen labour were already deeply embedded in medical, social, and institutional frameworks, anticipating later theoretical reforms. In particular, Weiss Adamson’s analysis of professional kitchens and service work underscores the extent to which culinary practice functioned as an applied form of medical and dietary knowledge, mediating between learned humoral theory and everyday consumption. Such findings suggest a greater degree of continuity between medieval and early modern dietary regimes than a strictly periodized narrative might imply, thereby strengthening the interpretation of dietary change as a process of gradual conceptual reorientation rather than an abrupt epistemic rupture (Flandrin, 1976; Montanari, 2006; Adamson, 2012).

### CULINARY PRACTICES AND HUMOURAL BALANCE

An examination of a wider range of recipes suggests that, while explicit medical intent is largely absent, patterns of ingredient selection and preparation nonetheless align with humoral expectations familiar from contemporary medical literature.<sup>13</sup> Fish dishes provide a clear example. In *The Good Huswifes Handmaide for the Kitchin*, recipes for pike, carp, and perch commonly recommend boiling or stewing rather than roasting, methods understood within humoral theory to preserve moisture. These dishes are often accompanied by vinegar, verjuice, gooseberries, or herbs classified as cooling, producing meals dominated by cold and moist qualities, precisely those recommended for choleric bodies.

One such recipe, “To seeth a Pike,” calls for pike, a fish classified as cold and moist, to be boiled in fresh water with white wine, vinegar, and a little yeast, “or els a few gooseberries”. Before cooking, the fish should be soaked in vinegar and salt, as the recipe notes, “this is a good broth” (*Good Huswifes Handmaide*, 1594, fol. 34r). Pike was considered cold and moist in the second degree; vinegar, cold in the first and moist in the second; gooseberries, like most fruits, cold and moist. The only humorally hot and dry ingredient in the dish is white wine. Overall,

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<sup>13</sup> On the distinction between explicit medical prescription and the implicit circulation of humoral ideas in everyday practices, see (Albala, 2002) and (Shapin, 2024). See also Shapin (2008) for a broader discussion of knowledge as lived practice.

the preparation is dominated by cold and moist qualities, making it particularly suitable for individuals with a choleric temperament, defined by heat and dryness.

Robert May's *The Accomplisht Cook* offers further illustrative material. In one of his recipes May instructs the reader on how to prepare turbot or halibut.

*To stew Turbut or Holyburt*

Take it and cut it in slices, then fry it, and being half fryed put it in a stew-pan or deep dish, then put to it some claret, grated nutmeg, three or four slices of an orange, a little wine-vinegar, and sweet butter, stew it well, dish it, and run it over with beaten butter, slic't lemon or orange, and orange or lemon-peel (May, 1685, p. 312).

As with the pike recipe, the dominant ingredients (fish, citrus fruits, and vinegar) are cold and moist. However, the inclusion of claret, nutmeg, and butter introduces hot and dry qualities, which act to counterbalance the coolness of the primary components. This balanced composition reflects an early modern culinary goal of tempering potentially harmful qualities through careful ingredient pairing.

In addition to stewed turbot and halibut, May includes numerous recipes that apply the same logic to terrestrial meats, pairing inherently hot foods with cooling accompaniments. For example, roast lamb or kid is frequently served with sorrel-based green sauces or fruit-and-vinegar reductions.

*Green Sauce for Pork, Goslings, Chickens, Lamb, or Kid*

Stamp sorrel with white-bread and pared pipkins in a stone or wooden mortar, put sugar to it, and wine vinegar, then strain it thorow a fine cloth, pretty thick, dish it in saucers, and scrape sugar on it (May, 1685, p. 144).

From a humoral perspective, such sauces counteract the inherent heat of the meat, but they also reflect established culinary preferences for sharpness and contrast. These recipes demonstrate how culinary balance could coincide with humoral logic, even in the absence of explicit therapeutic framing.<sup>14</sup>

Fruit-based sauces and salads likewise merit attention. Early modern cookbooks include preparations of cherries, barberries, lemons, and oranges served with sugar and vinegar. Medical writers often warned against excessive fruit consumption, yet acknowledged that fruits' cold and moist qualities could benefit choleric individuals when properly prepared. Cooking, sweetening, or combining fruit with vinegar was thought to moderate its potentially harmful effects. In cu-

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<sup>14</sup> For a discussion of what constitutes "therapeutic" intent in early modern dietary texts, as opposed to culinary practices shaped by shared assumptions, see Albala (2002, Chapter 8).

linary contexts, these same techniques enhanced flavour and preservation, again producing convergence between medical caution and culinary practice.

Finally, the widespread use of sauces designed to accompany specific categories of food underscores the importance of balance as a culinary principle. Green sauces made from sorrel, apples, bread, vinegar, and sugar, which were frequently recommended for pork, goose, or lamb, demonstrate how early modern cooks routinely sought to temper richness, heat, and heaviness. Whether conceived as digestive aids, flavour enhancers, or both, such sauces illustrate how culinary practices could embody assumptions about bodily effects without overt medical commentary.

In summary, individuals with a choleric temperament were advised to avoid hot spices, undiluted wines, and most meats, especially red meats, thought to share the warm nature of human flesh. It was believed that such foods could intensify the choleric disposition, leading to emotional excesses, including anger and lechery, which were regarded as dangerous manifestations of humoral imbalance. Instead, choleric individuals were encouraged to consume foods that were moist and cold in nature and to avoid activities or substances that might stimulate the production of yellow bile. At the same time, it must be remembered that early modern cookbooks cannot be read as medical texts, nor can they be entirely divorced from contemporary understandings of diet and the body. The evidence points not to systematic therapeutic intent, but to overlapping assumptions about food, balance, and moderation that informed both medical and culinary practice.

#### ALIGNMENT RATHER THAN PRESCRIPTION

Taken together, the comparison between medical and culinary sources suggests a relationship of alignment rather than direct transmission. This distinction is important not only conceptually but methodologically: to argue that early modern cooking was systematically medicalized would require far more explicit evidence of health-oriented intent within recipes themselves. Instead, the evidence presented here supports a more cautious conclusion, consistent with recent historiography, that humoral theory functioned as a shared cultural framework shaping everyday understandings of food and bodily balance. Rather than seeing cookbooks as applied medical texts, it is therefore more productive to view them as operating alongside medical theory, drawing on common assumptions while serving distinct culinary and social purposes.

## CONCLUSION

Dietary advice for choleric individuals in early modern England was articulated most clearly in medical and health manuals grounded in Galenic humoral theory. These texts prescribed cooling and moistening foods to counteract the heat and dryness of yellow bile, and offered detailed guidance on managing the choleric body. Culinary texts, by contrast, rarely addressed health explicitly. Yet many of their recipes produced forms of balance that aligned with medical expectations. This alignment does not indicate deliberate therapeutic design, but it does reveal a shared cultural logic in which balance, moderation, and the management of bodily effects were widely understood values.

By distinguishing between prescription and practice, and between medical intent and culinary convention, this article contributes to ongoing discussions about the relationship between learned medicine and daily culinary practice in the early modern period. It suggests that while humoral medicine did not dictate culinary practice in a strict sense, it helped shape the conceptual environment in which early modern people cooked, ate, and understood their bodies.

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## SAŽETAK

*U ranomu modernom razdoblju prehrambena praksa uveliko se tumačila humoralnom teorijom karaktera, prema kojoj je zdravlje ovisilo o održavanju ravnoteže među četirima vrstama tjelesnih tekućina. Članak ispituje prehrambene savjete za osobe označene kao kolerici, u medicinskoj misli šesnaestog i sedamnaestog stoljeća karakterizirane viškom žute žuči povezane s toplinom i suhoćom. Nadovezujući se na prethodna istraživanja o humoralnoj ravnoteži i melankoličnoj konstituciji, članak istražuje kako su liječnici i autori zdravstvenih tema prilagodili klasična i srednjovjekovna dijetetička načela da bi ublažili toplinu i suhoću karakteristične za tjelesnu tekućinu – žuč. Oslanjajući se na engleske popularne zdravstvene priručnike i biljne pripravke, članak ocrta konkretne prehrambene preporuke oblikovane u sklopu galenske teorijske paradigme, s ciljem ublažavanja fiziološkog i emocionalnog viška.*

*Analizom tiskanih engleskih kuharica, studija razmatra i kako su se te medicinske preporuke prožimale sa suvremenom kulinarskom praksom. Dok su medicinski tekstovi iznosili izričito terapijske prehrambene režime, kulinarski izvori rijetko su recepte oblikovali u medicinskim terminima. Ipak, u mnogim je receptima postignuta ravnoteža usklađena s humoralnim očekivanjima. Članak tvrdi da ova konvergencija odražava zajedničku kulturnu logiku umjerenosti, oblikovanu dugotrajnim prijenosom Hipokratovih i Galenovih dijetetičkih ideja, a ne namjernu medicinsku intenciju u kuhanju.*

**Ključne riječi:** *uravnotežena prehrana, kolerični temperament, prehrambeni režim, humoralna teorija, kuharice ranoga modernog doba*

