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Source: *The Journal of American Folklore*, Vol. 66, No. 261 (Jul. - Sep., 1953), pp. 201-217

Published by: University of Illinois Press on behalf of American Folklore Society

Stable URL: <http://www.jstor.org/stable/537230>

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RELATIONSHIPS BETWEEN SPANISH AND SPANISH-AMERICAN FOLK MEDICINE¹

BY GEORGE M. FOSTER

THE transfer of much Spanish culture to the New World, and its subsequent assimilation with native American Indian elements to form modern Hispanic-American culture, was accomplished by both formal and informal mechanisms. State and Church formulated elaborate plans to guide colonial policy, particularly in government, religion, education, and social and economic forms. But also countless unplanned and informal contacts with the native peoples modified Spanish custom and belief in such areas as folklore, music, home economics, child training, and everyday family living. In medicine—particularly folk medicine—both formal and informal mechanisms have been important in the development of modern Spanish-American beliefs and practices. This paper points out a number of relationships between the two areas and raises several more general questions which are suggested by the data.

Spanish medicine at the time of the conquest of America was based largely on classical Greek and Roman practice, as modified during transmission by way of the Arab World, first through Persia and such famous doctors as Rhazes (c. 850–925) and Avicenna (980–1037) and then such Hispano-Arabic physicians as Avenzoar of Sevilla (1073–1161). The systems of these men, as they influenced thought in Spain, are revealed in a series of books reprinted or published for the first time

¹ The Spanish data in this paper are taken from the sources given in this footnote and from my field notes from the towns of Alosno, Cerro de Andévalo, and Puebla de Guzman, in the province of Huelva; Conil de la Frontera and Vejer de la Frontera, province of Cádiz; Bujalance, province of Córdoba; Yegén, province of Granada; Villanueva del Rio Segura, province of Murcia, as well as odd notes from many other parts of the country. This fieldwork was made possible by grants from the John Simon Guggenheim Memorial Foundation and the Wenner-Gren Foundation for Anthropological Research.

Published sources on Spain quoted or otherwise drawn upon are: Resurrección María de Azkue, *Euskaleriaren Yaķintza (Literatura popular del país vasco)*, 4 vols. (Madrid, 1947); Avila de Lobera (Luís), *El libro del régimen de la salud* (Biblioteca Clásica de la Medicina Española, Real Academia Nacional de Medicina, 5, Madrid, 1923); William George Black, *Medicina popular, un capítulo en la historia de la cultura*, trans. from the English by Antonio Machado y Alvarez, with appendices on Spanish folk medicine by Federico Rubio and Eugenio Olavarría y Huarte (Madrid, 1889); A. Castillo de Lucas, *Folklore médico-religioso. Hagiografías paramédicas* (Madrid, 1943); Alonso Chirino, *Menor daño de la medicina y espejo de Medicina* (Biblioteca Clásica de la Medicina Española, Real Academia de Medicina, 14, Madrid, 1944); George M. Foster, "Report on an Ethnological Reconnaissance of Spain," *American Anthropologist*, 53 (1951), 311–325; Isabel Gallardo de Alvarez, "Medicina popular," *Revista del Centro de Estudios Extremeños*, 17 (Badajóz, 1943), 291–296; "Del folklore extremeño. Medicina popular y supersticiosa," *Revista de Estudios Extremeños*, no. 3 (Badajóz, 1945), 359–364; "Medicina popular y supersticiosa," *Revista de Estudios Extremeños*, no. 1 (Badajóz, 1946), 61–68; "Medicina popular y supersticiosa," *Revista de Estudios Extremeños*,

in recent years by the Real Academia Nacional de Medicina, in Madrid. Among the most interesting are Alonso Chirino's *Menor daño de la medicina*, written during the first decade of the sixteenth century but not published at that time; Francisco López de Villalobos' *Sumario de la medicina*, first published in Salamanca in 1498; Avila de Lobera's *Régimen de la salud*, 1551; and Juan Sorapán de Rieros' *Medicina española contenida en proverbios de nuestra lengua*, 1616.

The Hippocratic doctrine of the four "humors"—blood, phlegm, black bile ("melancholy"), and yellow bile ("cholera")—formed the basis of medical theory. Each humor had its "complexion": blood, hot and wet; phlegm, cold and wet; black bile, cold and dry; and yellow bile, hot and dry. As the three most important organs of the body—the heart, brain, and liver—were thought to be respectively

nos. 1-2 (Badajoz, 1947), 179-196; José María Iribarren, *Retablo de Curiosidades* (Pamplona, 1948); Víctor Lis Quibén, "Medicina popular gallega," *Revista de Dialectología y Tradiciones Populares*, 1 (1945), 253-331, 694-722; "Los pastequeiros de Santa Comba y San Cibrán," *Revista de Dialectología y Tradiciones Populares*, 3 (1947), 491-523; "La medicina popular en Galicia (Pontevedra, 1949a); "Medicina popular gallega," *Revista de Dialectología y Tradiciones Populares*, 5 (1949b), 309-332, 471-506; Francisco López de Villalobos, *El sumario de la medicina, con un tratado sobre las pestíferas buvas* (Biblioteca Clásica de la Medicina, Real Academia Nacional de Medicina, 15, Madrid, 1948); Tomás López-Tapia, "Contribución al estudio del folklore en España y con preferencia en Aragón," in *Sociedad Española de Etnografía y Prehistoria, Memoria* 73, pp. 247-257 (Madrid, 1929); Nicolás Monardes, *Primera y segunda y tercera partes de la historia medicinal de las cosas que se traen de nuestras Indias Occidentales que sirven en medicina*, 2d ed. (Sevilla, 1574); Ricardo Royo Villanova, "El folklore médico aragonés," *Revista Española de Medicina y Cirugía*, 19 (1936) 128-140; Juan Sorapán de Rieros, *Medicina española contenida en proverbios vulgares de nuestra lengua* (Biblioteca Clásica de la Medicina Española, Real Academia Nacional de Medicina, 16, Madrid, 1949); Jesús Taboada, "La medicina popular en el Valle de Monterrey (Orense)," *Revista de Dialectología y Tradiciones Populares*, 3 (1947), 31-57.

The principal Latin American countries discussed are Mexico, Guatemala, El Salvador, Colombia, Ecuador, Peru, and Chile. The data are drawn from my field notes on Mexico, El Salvador, and Chile, and from recent field research by Isabel T. Kelly (Mexico), Charles Erasmus (Colombia and Ecuador), and Ozzie Simmons (Peru and Chile), anthropologists of the Institute of Social Anthropology. Greta Mostny contributed many data from Chile, José Crucent has supplied information on Venezuela and Cataluña, and the Servicio de Investigaciones del Folklore Nacional of the Venezuelan Ministry of Education has given data on Venezuela.

Published sources on Latin America quoted or otherwise drawn upon are: Richard N. Adams, *Un análisis de las enfermedades y sus curaciones en una población indígena de Guatemala* (Instituto de Nutrición de Centro América y Panamá, Guatemala City, 1951); Ralph L. Beals, *Cherán: A Sierra Tarascan Village* (Smithsonian Institution, Institute of Social Anthropology, Publication 2, Washington, 1946); George M. Foster, *Empire's Children: the People of Tzintzuntzan* (Smithsonian Institution, Institute of Social Anthropology, Publication 6, Mexico City, 1948); John Gillin, *The Culture of Security in San Carlos* (The Tulane University of Louisiana, Middle American Research Institute, Publication 16, New Orleans, 1951); John Gillin, *Moche: A Peruvian Coastal Village* (Smithsonian Institution, Institute of Social Anthropology Publication 3, Washington, 1947); Elsie Clews Parsons, *Mitla: Town of the Souls* (University of Chicago, Ethnological Series, Chicago, 1936); Elsie Clews Parsons, *Peguiche: A Study of Andean Indians* (University of Chicago, Ethnological Series, Chicago, 1945); Hermilio Valdizán and Angel Maldonado, *La medicina popular peruana*, 3 vols. (Lima, 1922); Julio Vicuña Cifuentes, *Mitos y supersticiones: estudios del folklore chileno recogidos de la tradición oral*, 3d ed. (Santiago, 1947); Charles Wisdom, *The Chorti Indians of Guatemala* (University of Chicago, Ethnological Series, Chicago, 1940).

dry and hot, wet and cold, and hot and wet, the normal healthy body had an excess of heat and moisture. But this balance varied with individuals; hence the preponderantly hot, humid, cold, or dry complexion of any individual. Natural history classification was rooted in the concept that people, and even illnesses, medicines, foods, and most natural objects, had complexions. Thus, medical practice consisted largely in understanding the natural complexion of the patient, in determining the complexion of the illness or its cause, and in restoring the fundamental harmony which had been disturbed. This was accomplished by such devices as diet, internal medicines, purging, vomiting, bleeding, and cupping. For example, broth from chick peas, thought to be hot and wet, would be prescribed for epilepsy, thought to be caused by an excess of black bile, which was cold and dry. Barley, cold and dry, would be recommended for fever, caused by the hot and wet qualities of blood. An enormous pharmacopoeia, principally herbal but also including animal and inorganic substances, was drawn upon to treat illness.

Folk medicine existed side by side with formal medicine and undoubtedly overlapped it as many points. Though these beliefs and practices are not well described for that time, a fair idea of them may be deduced by subtracting the formal medicine of the sixteenth century from the folk medicine of today and by making allowance for New World influences. Sixteenth-century Spanish folk medicine represented the accretions of many centuries and many waves of invaders. It is difficult and perhaps impossible to separate these sources, but some of the more important can be named. The significance of fire and water, particularly in north-west Spain, testifies to the pre-Christian beliefs of the Celts and other early European populations. Pre-Arab Mediterranean traces appear in the continued use of votive offerings, which can be traced back to Greek and Roman temples. The universal hagiology and the use of religious prayers and invocations in curing practice represent Christian contributions. Moorish folk belief itself, quite apart from the classic system, has been an important source of Spanish folk medicine. Belief in the evil eye may be due to Arab contact, or it may represent an earlier Mediterranean influence.

New World Indian medicine varied from place to place, but certain general characteristics prevailed. Soul loss occasioned by fright, possession by evil spirits, and injury through witchcraft, often in the form of object intrusion, were believed to be basic causes of sickness. Probably emotional experiences which today are so commonly considered as causes of illness—shame, fear, disillusion, anger, envy, longing—have in considerable part persisted from pre-Conquest days. The shaman and medicineman used many curing techniques: herbal remedies, emetics, enemas, sucking, massage, calling upon spirits, and the like. Their understanding of the causes and cures of illness was probably not greatly inferior to that of Spanish physicians.

THE CONTACT SITUATION

Physicians were among the earliest travelers to the New World. They, and the geographer-natural historians of the time, were impressed with the different forms of flora and fauna of the newly discovered continents and classified each new discovery according to the system they knew and understood. By the end of the

sixteenth century a fair part of the indigenous pharmacopoeia had been recognized and the qualities of each item described according to prevailing notions of hot, cold, wet, and dry. A chair of medicine was established at the University of Mexico in 1580, though curing had been informally taught before that at the Colegio de Santa Cruz in Tlaltelolco. The first university medical training in Peru was at the University of San Marcos in 1638. Hippocrates, Galen, Avicena, and other authorities of the Classic and Arabic periods were the basic sources of this teaching. Few changes in medical concepts and practices were apparent until the end of the eighteenth century; the isolation of Spain and the Spanish colonies from European thought and scientific progress preserved the classical theories for a century or more after they were superseded in northern Europe.

The mechanisms whereby university medical beliefs and practices filtered down to the folk level can only be surmised. In view of the relative lack of doctors, priests and other educated individuals were called upon to help the sick to a degree probably not characteristic of Spain. The same shortage of doctors stimulated the publication of guides to home curing; one of the most interesting dates from 1771 and is reproduced by Valdizán and Maldonado.² Among Indians and mestizos the obvious material superiority and power of the Spaniards probably placed a premium on the learning of Spanish curing practices. (The opposite also was true; the Spaniards believed the native *curanderos* to be repositories of occult knowledge and curing magic.)

Whatever the mechanisms, a high proportion of the best medical practice of Spain at the time of the Conquest became incorporated into the folk practices of America. Simultaneously, and through informal channels, much of the contemporary folk medicine of the mother country was transferred to the New World. The result is a well-developed and flourishing body of folk belief about the nature of health, causes of illness, and curing techniques, made up of native American, Spanish folk, and classical medical elements.

CLASSICAL CONCEPTS IN SPANISH-AMERICAN FOLK MEDICINE

Spanish-American folk medicine is by no means identical in all countries, but nonetheless there is surprising homogeneity from Mexico to Chile. The same basic attitudes toward health and sickness occur, the same underlying causes of disease are believed in, a high proportion of "folk" illnesses have the same names, and much the same curing techniques and medicaments are found in all places. Much of this homogeneity stems from the nearly universal belief in the Hippocratic concept of hot and cold qualities inherent in nature and the less pronounced concept of humors associated with illness. Most herb remedies and foods are believed to be characterized by one of these two qualities, though in many places a third, "temperate," is found. Curiously, the corresponding classical concept of wet and dry seems to have entirely disappeared, as has the formal grading of degrees of intensity (from 1 to 4) of each quality. Illnesses, with perhaps less frequency, are thought to be hot or cold or to stem from hot or cold causes. The Hippocratician

² Valdizán and Maldonado, 1922, III, 109-316.

“principle of opposites” commonly but not always prevails in curing—for a cold illness, a hot remedy, and vice versa. Not infrequently a specific illness may have either a hot or a cold cause, and treatment will therefore vary.

In Chimbote, Peru, diarrhea may be either hot or cold in nature, depending on its cause. It is generally believed that when the body is warm cold in the form of air, water, or food, is dangerous. One therefore avoids such things as going into the cold precipitously, bathing except under favorable circumstances, drinking iced beverages, and eating cold foods when the stomach is hot.³ Maintenance of health depends on a judicious combination of foods. In Lima, for example, it is popularly believed that water should not be drunk with pork because both being cold, might overtax the stomach's strength, though either can be safely taken alone. Wine, which is hot, tempers the pork and is therefore the preferred beverage with this meat. An informant from Chimbote described malaria, colds, pneumonia, other bronchial ailments, and warts as cold; he listed colic, smallpox, measles, typhoid, diarrhea, meningitis, and kidney and liver complaints as hot.

The classifications vary from country to country and place to place, and general agreement among all people even in a single town is not the rule. Nevertheless, certain general rules seem to prevail; the most marked is that (following classical theory which believed a preponderance of heat to be the normal state of the healthy body and undue cold as the condition most frequently needing remedy) a majority of medicinal herbs are classified as hot. Actually, in most of America there is a surprisingly high correspondence between the herb classification of classical authorities and those popularly ascribed today. This correspondence is somewhat less marked with respect to foods. Many people who do not classify illnesses and their causes as hot or cold nevertheless reveal the underlying presence of classical concepts in their beliefs that foods should be combined according to their hot or cold qualities or that sudden heat or cold may cause one to fall ill.

Formal concepts of humors are much less marked than those of hot and cold, though the term is often used in popular speech in discussing illness. Available data suggest that ideas are most strongly developed in Colombia.

In that country “bad” humors are often associated with the blood and are believed transmissible through sexual intercourse, inhaling the breath of infected persons, or through bodily contact. Some believe that only sick people have humors, while others say that everyone has humors, either good or bad. Bad breath, fetid body odors, boils, and similar skin eruptions are among nature's ways of expelling humors from the body. Humors of adults are thought to be stronger than those of children, and children should therefore sleep apart from their parents to avoid possible sickness. Men with naturally strong humors are dangerous to wives with weak humors; through close association, particularly through sexual intercourse, such women may become thin and emaciated. Persons with strong humors are said to be especially susceptible to smallpox.

In Ecuador *mal humor*, bad humor, is reflected in boils or susceptibility to illness. In El Salvador a man who comes in from the street perspiring or after recent sexual contact is thought to have a “strong humor.” If any children are in the room he must

³ Unless otherwise indicated the words “hot” and “cold” as applied to illness, remedies, medicines, and food are used in the Hippocratic sense of qualities, and do not refer to actual temperatures.

pick them up to neutralize his humor and to prevent their falling ill of *pujo*, which in boys manifests itself in swollen testicles. In Mexico persons of irregular sex life are said to have strong humors, and their presence is thought to affect adversely sufferers from measles. Belief in humors undoubtedly was at one time much more strongly developed in Colonial America than today. A Peruvian home-remedy book of the late eighteenth century points out, for example, that caraway seeds, being hot, and dry to the third degree, drive out "cold humors," while lemon juice is good for deafness arising from them.⁴

Several other classical Spanish beliefs with American counterparts follow:

Lobera⁵ cautions against wearing catskin clothing or smelling catskins. Today in Colombia, Peru and doubtless other countries, cat hair is believed to cause asthma. There is also some belief in Spain that cat hair is dangerous and that sleeping in contact with cats causes scrofula.

Both Sorapán⁶ and Lobera⁷ warn against the danger of bad smells; Lobera specifies that latrines should for this reason be located a considerable distance from the house. Particularly in Colombia bad smells are today believed to be an important source of danger. Much resistance to sanitation programs which require the building of latrines stems from the belief that the smells which emanate produce typhoid and to a lesser extent smallpox, pneumonia, bronchitis, tumors, and other ills.

The need to maintain a clean stomach or to "clean" it, if necessary, with purges, a basic classic Spanish doctrine, is generally reflected in Spanish America today in the belief that one must periodically take a strong purge to clean out the intestinal tract. Particularly in Peru the belief in a "dirty" stomach as a cause of illness is well defined. Patent medicines known as *estomacales* (sold in all drug stores) and various combinations of herbs are taken to clean the stomach.

For wounds a classical treatment, still found in the folk medicine of Spain, is the use of spider webs to congeal blood. This appears to be general in Spanish America today; my data mention it for Chile, Peru, Ecuador, Venezuela, and Guatemala.

Cupping, known in Spanish as *la ventosa*, was basic to classical authors and was praised by Galen. *La ventosa* is widely used in Spain today for pneumonia, bruises, swelling, acute pains of all types, "cold," *paletilla* (the ailment, discussed later, caused by the displacement of organs), and other disorders. Its use in Spanish America is general for pneumonia, general pains, "air," and other ills.

Chirino⁸ describes a cure for sties—rub the lids with flies. One of the most common sty cures in Spain today, it also occurs in the New World, at least in Chile and Peru.

A poultice made by opening a freshly killed small animal or bird and applying the bloody interior to the body, to treat fever or a variety of other ailments, is described by Sorapán⁹ and of course goes back to classical antiquity. A poultice utilizing toads, doves, pigeons, frogs, sheep, chickens, and other living creatures is one of the most widely used folk cures in Spain today for fever, headache, wounds, meningitis, snake bite, madness, throat upsets, and other disorders. Today in Guatemala fever is treated with a poultice made of a chicken, vulture, or dog. In Colombia a pigeon is used for an illness called *mal de madre* and to ease the suffering of a dying person. In Peru a frog or a toad is used for erysipelas and for swellings and inflammations in general, and a pigeon or a vulture for meningitis. In El Salvador the meat from a freshly killed black cock is

⁴ Valdizán and Maldonado, 1922, III, 485, 455.

⁵ Lobera, 1923, p. 68.

⁶ Sorapán, 1949, p. 156.

⁷ Lobera, 1923, p. 58.

⁸ Chirino, 1944, p. 285.

⁹ Sorapán, 1949, p. 214.

placed on the soles of the feet, under the knees, on the inner side of the armpits, and on the nape of the neck to draw out fever.

The Spaniards were intensely interested in finding new supplies of bezoar, a calcareous concretion from the stomach of certain ruminants, which they believed to be efficacious against poisonous bites and poisons in general. However, despite the world-wide fame early acquired by the bezoar of the vicuña, American deer, guanaco, and llama, surprisingly little trace of this belief remains. In Tzintzuntzan, Mexico, the *pedra de la vaca* is used against epilepsy. In Chile contact with the stone from a guanaco is thought to cure pains from *aire* and to alleviate melancholy and intestinal upsets.

The ancient belief in the therapeutic virtues of unicorn horn was twice noted. In Chile powders popularly thought to be scrapings from a unicorn horn are used to treat dysentery. In Venezuela the corruption *olicornio* is applied to archeological beads which are found in the western part of the country and are worn as a bracelet amulet against the evil eye. To be effective they must be excavated on Maundy Thursday.

Probably about half the herbs recommended by Spanish authorities of five hundred years ago are cultivated and used in Spanish America today. If frequency of use of individual herbs rather than mere presence in the pharmacopoeia is the gauge, then classical Spanish herb lore predominates today in Spanish America. As in Spain, garlic is possibly the single most important herb and figures in innumerable cures. Appearing in a wide variety of cures are other Old World herbs; among the "hot" are balm gentle (*toronjil*), aloe (*sábila*), rue (*ruda*), rosemary (*romero*), oregano, pennyroyal (*poleo*), sweet marjoram (*mejorana*), mallow (*malva*), dill (*eneldo*), lavender (*alhucema*), and artemisa (*altamisa*); among the "cold" are plantain (*llantén*), sorrell (*acedera*), and verbena. In view of the many and efficacious native American herbs, this predominance of the Spanish testifies to the force of the impact of Spanish medicine in the New World.

NONCLASSICAL RELATIONSHIPS

Many other generic relationships fall more nearly in the field of popular medicine, and the transfer of these practices and beliefs from mother to daughter countries must have been largely through informal channels. These relationships will be considered in four categories: (1) ideas of causation based on magical, supernatural or physiologically untrue, and emotional concepts; (2) specific curing techniques applicable to many different treatments; (3) specific illnesses, and (4) their special cures.

Belief in the evil eye (ojo, mal de ojo) is the most widespread of illnesses identified in terms of magical causation. Throughout Spain and Spanish America it is thought that certain individuals, sometimes voluntarily but more often involuntarily, can injure others, especially children, by looking at them. Admiring a child is particularly apt to subject him to the "eye." Unintentional eyeing can be guarded against by the cautious admirer adding "God bless you," or some such phrase, and slapping or touching the child.

The child who is thought to suffer from the evil eye normally shows rather general symptoms, such as fever, vomiting, diarrhea, crying, and loss of appetite and weight. In South America it is also often imagined that one eye becomes smaller than the other. In Andalucia and at least in Chile and Peru one explanation of what happens is that the force of the "eyeing" breaks the gall of the victim (*se revienta la hiel*).

Because the evil eye is magically induced, magical amulets help protect one.

In Spain they include coral, jet (*azabache*), a small carved fist, usually of jet, with the thumb protruding between the index and middle fingers (*higa*), small booklets with a part of the books of St. John and the other apostles (*evangelios*), scapularies, a silver-mounted seed (*castaña de Indias*), and tiny bags of salt or garlic around the neck or wrist. In Spanish America amulets include coral, *evangelios*, seeds (e.g., the Mexican "deer's eye"), occasionally jet, and a bit of red color, usually in the form of a ribbon. The *higa*, the single most important charm in Spain, is common in Venezuela, but I have little information on its modern use in other Spanish-American countries. Valdizán and Maldonado quote a French source of 1732 to the effect that ladies in Lima wore an *higa* as a protective amulet,¹⁰ and John Rowe tells me he has seen a few in Peru in recent years. It is interesting that the *higa* is ubiquitous in Brazil today.

The most widespread curing and divinatory technique in Spain for the evil eye is to drop olive oil in water.

The exact method varies from place to place, but the principle is the same. The diviner places the middle finger of his or her right hand in the oil reservoir of a small lamp and allows one or more drops to fall in a glass of water. If the drops remain in the water, or if they break into smaller but distinct drops, the usual interpretation is either that the child is not suffering from the evil eye or that he is suffering but can be cured. If the oil disappears, sinks, or forms a cap over the water the child is believed to be afflicted, perhaps fatally so. Sometimes it is thought that the act of dropping the oil is therapeutic in itself. More often a curing ceremony follows. In south-central Spain this most commonly takes the form of weighing the child in a balance with an equal amount of *torvisco* (*Daphne Gnidium L.*). Then the plant is thrown on the roof, and as it dries the child recovers.

Oil divination appears to be rare in Spanish America. It is, however, briefly mentioned by Valdizán and Maldonado as occurring in the province of Tarma, department of Junín, Peru, and by Rosemberg in Argentina.¹¹ A second correspondence in divining occurs between Galicia and Ecuador.

In the former region the distance between the outstretched hands is measured with a string, and the distance compared with that from the feet to the head. If the measures are unequal it is proof that the child suffers from the evil eye. In Esmeraldas, Ecuador, a red ribbon is used to measure the circumference of the child's thorax. It is then doubled and redoubled and used to touch several points on the child's body, while prayers are said. Always holding the measure on the ribbon, the diviner again measures the thorax, and if the distance appears to be unequal, the child is thought to have been "eyed."

Still another parallel between Spain and Spanish America is the tendency to cure the evil eye on Tuesdays and Fridays—days in both areas, which are generally recognized as having superior virtues for many types of cures.

The most completely described form of divining and curing the evil eye in America involves the use of a chicken egg.

In Mexico, Guatemala, and Peru the egg is rubbed over the patient's nude body and then broken open for inspection. Any spots on the yolk are interpreted as "eyes,"

¹⁰ Valdizán and Maldonado, 1922, I, 114.

¹¹ *Ibid.*, p. 112.

which proves the diagnosis correct. Like the Spanish divination, this is often thought to have therapeutic value—the egg draws out the “eye” from the patient. In Peru the egg is usually broken in water and beaten with the child’s right hand and left foot, and often with his left hand and right foot as well, in the form of a cross. Next a cross is smeared on the victim’s forehead with the mixture to complete the cure. In El Salvador the child is placed in a hammock, with a raw egg on a plate underneath. The egg is subsequently opened; if it appears “cooked” it is because the heat of the presumed evil eye has been drawn from the child, who is thereby cured. In Colombia a cure is accomplished by herbs taken internally or applied externally, accompanied by prayers. In addition a dove egg may be broken on the back of the child’s head; thereby the guilty person’s offending eye loses its sight. But as the guilty person does not “eye” intentionally this is thought to be unsportsmanlike.

The origin of the egg cure in the New World is one of the mysteries of folk medicine. The only Spanish cure in any way related has to do with defective vision, for which one passes a freshly laid, warm egg across the eyes *para limpiar la vista* (“to clean one’s sight”). This practice, common in El Salvador, Colombia, Ecuador, Peru, and Chile, is probably known in Mexico and Guatemala too. Because chicken eggs were absent in the New World before the Conquest, the egg cure is almost certainly Old World. Linguistic confusion is perhaps the explanation. The commonest term for evil eye in America, *mal de ojo*, means “something wrong with the eye.” Because in Spain a warm egg rub is and was used for many forms of *mal de ojo*, in the clinical sense, the magical *mal de ojo* perhaps came to be cured in the same way in the New World.

“Air” or “bad air” (*aire* or *mal aire*) is perhaps the most frequent Spanish-American explanation for illness. Though mentioned in almost all descriptions of illness, its exact nature has an elusive quality which makes discussion difficult. Some forms of *aire* must certainly be pre-Conquest in origin, but other aspects of modern belief appear to stem from the Hippocratic concept of hot and cold.

Thus, the most frequent explanation of the cause of the affliction is that the patient went from a closed room into fresh air or was struck by a current of air, a breeze, or wind. Other explanations, as in Mexico, are that *aire* is an evil spirit which takes possession of a person, or, as in Guatemala, it is something usable in witchcraft. Though almost any illness may be ascribed to *aire*, various forms of paralysis, particularly of the face, seem to be the most common.

Air as a cause of illness has the same elusive quality in Spain as in the New World. Unfortunately, except for Galicia, it is less completely described than in America. Facial paralysis is one of the most common manifestations, but many other ailments also are ascribed to air. In Galicia air is particularly thought of as emanations from animals, individuals, corpses, occasionally places, and even heavenly bodies. Especially feared is a *gata parida* (cat which has just given birth) or a menstruating or pregnant woman who steps over a child. A menstruating woman also is dangerous to children in some, and perhaps all, Spanish-American countries. In El Salvador she should not pick up a child lest “the gall break” (*se revienta la hiel*); in Peru she may cause an umbilical hernia (*pujo*).

In many Hispanic-American countries, a coldness or illness-causing quality is believed to emanate from a corpse; therefore all persons who have contact with it must bathe or otherwise purify themselves. Children are particularly susceptible to this

danger. In Guatemala the emanation and resulting illness are called *hijillo* (from Spanish *hielo*, "ice"?), in Puerto Rico *frio de muerto* ("cold of the dead"), in Colombia *hielo de muerto* ("ice of the dead"), and in Peru *mano de la muerte*, ("the hand of death"), or *viento de la muerte* ("wind of death").

The Spanish form of this belief, *aire de los muertos* ("air of the dead"), is found particularly in Galicia, where as in the New World children are thought to be especially susceptible. As the dead person is said to have taken the life of the living to the tomb, the standard cure is to go to the graveyard to pray and urge the corpse to return life to the afflicted child. The wide distribution of this belief in the New World, the use of Spanish names to identify it, and the basic similarity with the Galician form suggest that whatever pre-Conquest ideas about the dead existed, the modern beliefs follow a Spanish pattern.

Fear of the moon is in Spain the most widely held belief in supernatural (as contrasted to magical) threats to health. Belief in the moon's power to influence men's lives and to affect the growth of plants and animals goes back to classical antiquity. Today in Spain such beliefs are still associated with agriculture, wood-cutting, meat-curing, treatment of wounds, and children's health. The cold rays of moonlight are thought to exercise noxious effects on clothing or bandages left out at night. Such bandages, if not warmed by ironing, will cause wounds to fester. Swaddling clothes of children must likewise be ironed and sometimes washed as well, if the cold of the moon is not to enter the child. Moonlight may also directly enter a child. In western Spain children sometimes wear metal moon amulets to prevent their being *alumado* ("possessed by the moon").

In the New World these exact beliefs appear not to exist, though the moon is felt to play an important part in agricultural practices and a minor part in curing. In many places, for example, cures for intestinal worms are given during the waning moon because the worms are believed to be head-up then, and the remedies more easily enter their mouths and kill them. In Colombia it is believed that hernia worsens when the moon is *brava* (apparently meaning full) and that any change of phase of the moon aggravates erysipelas. A parallel in Conil de la Frontera, Cádiz, is that any sore that festers during a waxing moon is called *irisipela*.

In Colombia and Ecuador the rainbow is to some extent the functional equivalent of the moon in Spain. In Colombia it is believed that the coldness inherent in the rainbow is transmitted to a child's clothing inadvertently left outside to dry and that the child will be chilled if the clothing is not ironed before being worn. Mange is the illness most frequently resulting from the rainbow's chill. In Ecuador clothing exposed to the rainbow must be disinfected by passing it over a fire.

Displacement of organs. In parts of both Spain and America it is believed that illness results when real or imaginary parts of the body move from their normal positions. Restoration of the organ effects the cure. In Galicia the *espiñela* and *paletilla*, thought to be bones located respectively in the pit of the stomach and between the shoulder blades, may "fall" as a result of violent exercise or a coughing fit. The stomach also may "fall," producing a condition known as *calleiro*.

These conditions are diagnosed by palpation, by measuring the length of the patient's arms or legs, or by measuring with a string the distance from the pit of the stomach to the backbone around both sides. If the measures are unequal the suspected cause is

verified. Cures are based on the principle of equalizing the measures; this is accomplished by massage and by pulling fingers, arms, and legs. Cupping and the application of poultices also are common. Fallen stomach, most common among children, is cured by holding the child upside down by its ankles and slapping the soles of its feet.

New World equivalents are "fallen *paletilla*" (*caída de la paletilla*, northern Argentina), "fallen fontanelle" (*caída de la mollera*, Mexico, Guatemala, El Salvador), "stretched veins" (*estiramiento de las venas*, Guatemala), and a condition suggesting fallen stomach (*descuajamiento*, Colombia). These are principally childhood afflictions, usually resulting from a fall or a blow.

Fallen *paletilla* is diagnosed, as in Spain, by comparing the length of arms and legs. It is cured by suction (mouth, cupping), with poultices, or—in extreme cases—by placing the child in the still-warm stomach of a recently slaughtered beef. The last-named is an old Spanish cure, though it is not mentioned among common *paletilla* cures. For fallen fontanelle the patient is held upside down by the ankles, the soles are slapped, the hard palate is pressed with the thumb, and the fontanelle is sucked. For stretched veins the patient is held upside down by the ankles and the body is massaged to force the veins toward the stomach. *Descuajamiento*, diagnosed by palpation and by unequal length of the legs, is cured by holding the child by its ankles and massaging its body from bottom to top to force the stomach into place.

Strong emotional experiences which produce physiological results characterize Hispanic America much more than Spain. Fright, commonly cited in Spain as a cause of minor disturbances such as pain in the region of the appendix, fits, fainting, and boils, is particularly thought to disturb menstruation; it is not associated with soul loss. Sibling jealousy is given, but only occasionally, as the explanation of certain childhood disorders. In Navarra it is treated by surreptitiously placing a hair of the younger child in the chocolate of the older. In the New World the most important emotional experiences include fright (*susto*, *espanto*, in all countries, usually associated with soul loss), anger (e.g., *colerina* in Peru), shame or embarrassment (e.g., *pispelo* in El Salvador, *chucaque* in Peru), disillusion (e.g., *tiricia* in Peru), imagined rejection (in the form of sibling jealousy, e.g., *sipe* in Mexico, *peche* in El Salvador, *caisa* in Peru), desire (e.g., unsatisfied food cravings of children causing the gall to break—*se revienta la hiel*—in Chile), or sadness (e.g., *pensión* in Chile).

Several general curing techniques, used for various illnesses, are common to Spain and the New World. Some of the more important follow.

Nine-day treatment. In Spain, treatments for disease of any gravity are usually repeated several times, usually nine times, for nine has great virtue through association with church ritual. In most of the New World many treatments are repeated nine times, or the number nine enters the formula in some other way. In Colombia, for example, to purify the blood nine piles of sarsaparilla are made. The sufferer makes a tea from each pile on succeeding days, drinks it, and keeps the herbs. Then he starts over, this time with the ninth pile, and works back through the first.

Al sereno. In Spain many remedies are left *al sereno*, in the open air at night to gather the night's cold. This is almost equally true of the New World. In Chile carrot juice *al sereno* is used to treat jaundice, and squash seeds *al sereno* for intestinal worms. In Colombia herbs to treat conjunctivitis are left *al sereno*, as is the key rubbed over a

sty in Peru. In Mexico remedies for both eyes and rheumatism are likewise *serenado*.

En Ayunas, before breakfast, is perhaps when a majority of Spanish remedies are taken. This practice, although apparently less common in the New World, is nonetheless frequent.

Silence is required in many Spanish curing acts, as is occasionally the case in the New World.

Crossroads, particularly in Galicia, have special curative virtues; curing acts are often performed there. For example, *aire* may be cured by tying a child's feet together and taking him to a crossroads where the first passerby silently cuts the rope. In Cherán, Michoacán, Mexico, children suffering from the evil eye are taken to a crossroads by their mother, who asks all passersby to "clean" the child by ceremonially passing one of their garments over his body.

Black chicken blood or flesh figures commonly in Spanish witchcraft and curing. In Mexico the blood of a black chicken is drunk to drive out spirits due to witchcraft. In El Salvador for certain types of fever the meat poultice must come from a black fowl. In Chile sore eyes are treated with poultices made of the crests of black cocks.

Snakes, in Spain, are used for innumerable ills. The grease from fried snakes benefits almost any pain, the skins are useful for headache and toothache, and the heads are placed on snake bites. In Spanish America the snake is generally thought to be endowed with therapeutic virtues. In Mitla, Mexico, a snakeskin around the waist is thought good for rheumatism. In Ecuador snake grease is applied to boils. In Peru snake grease is used for almost any ailment.

Drying scorpions or lizards. In Spain for some illnesses, and particularly for a lachrymal condition of the eyes known as *rijas*, a lizard, or less often a scorpion, is carried in a metal tube by the sufferer, who recovers as the animal dies and dries. The same treatment occasionally crops up in the New World. In Peru a child suffering from *irijua*, a form of sibling jealousy, wears around his neck a reed containing a scorpion, and as the insect dries the jealousy disappears. In Chile a live lizard encased in a red bag is placed over a hernia, which is cured when the lizard is dead.

Coins, which figure in a wide variety of Spanish cures, are occasionally used in the New World; in Tzintzuntzan, Mexico, they are associated with cures for diarrhea, and in Peru for nosebleed.

Cockroach broth, in Spain, is the classic treatment for a throat condition known as *anginas*. In Peru it is used for colic, cardiac conditions, pneumonia, and epilepsy.

Burro milk, in Galicia, is drunk for colds and jaundice; in Chile, for respiratory ailments.

Potatoes, especially in Chile and Peru, are used for such diverse things as warts, diarrhea, headache, liver conditions, erysipelas, and rheumatism. This New World medication has diffused to Spain, though its use there is less frequent. In Navarra, as in Chile, potatoes in the pocket are an amulet against rheumatism. Potato *parches*, discs of potato on the temples, are used to cure headache, especially in Galicia, as in Chile. In Spain potatoes are also used for chilblains and other illnesses.

Human and animal waste and milk. The widespread use in Spain and America of human urine, human milk, and human and animal excrement doubtless represents parallel development rather than diffusion. As these remedies are worldwide they have probably been invented independently innumerable times. Human milk is used for earache and eye troubles in Spain and the New World. Snails, particularly snail mucus, are reported in Spain for the eyes, for warts, and for erysipelas; in Colombia and Peru for whooping cough, and in Chile for hernia and asthma. The lack of direct correspondence in illnesses suggests the independent invention of the use.

Hagiolotry. The worship of the patron saints of various illnesses and parts of the body, and of the Virgin and local images who are thought to have special powers, is very important in many Spanish curing practices. Saints particularly worshiped include San Blas (throat), Santa Agueda (breasts), Santa Apolonia (teeth), Santa Lucía (eyes), San Roque (plague), San Ramón Nonato (birth), San Pantaleón, San Cosme and San Damián (physicians), and San Benito. The day of San Juan (June 24) is thought to be potent; herbs gathered this day are especially powerful, and treatments involving application of water are best done at this time. A common treatment for mange, for example, is to roll nude in the early morning dew.

Hagiolotry is poorly reported in the New World. In Chile, San Blas, Santa Lucía, and Santa Apolonia are appealed to, and it is believed that plants collected on the day of San Juan have special medicinal properties. In Peru among the saints appealed to are Santa Lucía, Santa Apolonia, and San Ramón Nonato. Medals of San Benito are common in both countries. Equally good data from the other Hispanic-American countries would probably show a similar picture. Nevertheless, hagiolotry seems much less a part of the general curing pattern in the New World than in Spain. One exception, however, has to do with votive offerings, *ex votos*, a practice apparently more widespread today in Hispanic America than in the mother country.

Prayers and spells, though commonly used on both sides of the Atlantic, are relatively more important in Spain, according to my impression. Certainly the number of recorded cases in Spain far exceeds that of the New World; the many treatments in which nothing else is done testifies to their greater importance in Spain. Nevertheless, many American prayers and spells are clearly of Spanish origin.

Folk curers in both Spain and Hispanic America play important roles. In Spain the most important class of curer is that of the *saludador*, who has a special gift, a grace (*gracia*), which characterizes individuals around whose birth special circumstances prevailed: (1) those who cried while yet unborn, provided the mother told no one; (2) those born on certain days, especially Maundy Thursday, Good Friday, and occasionally Christmas; (3) the seventh consecutive son, and less often the fifth or sixth (occasionally daughter), by the same mother. Individuals born under any of these circumstances are usually thought to have a cross on their hard palate, or less frequently a St. Catherine's wheel. Persons not born on these days, but with the distinguishing marks, also have grace. Twins generally are thought to have curing powers, particularly for stomach troubles, which they treat by the laying on of hands.

The Chilean *perspicaz* is clearly a lineal descendant of the Spanish *saludador*, for he cries in his mother's womb, he loses the power if she tells anyone before his birth, and he has a cross on his hard palate.¹² Curers with these qualifications are not known to me in the other countries under consideration. In Spanish America, as in Spain, twins are generally thought to have grace for curing. For the most part, however, New World *curanderos* have little in common with their Spanish counterparts as regards origin of knowledge or power. They are rather shamans, herb specialists, or individuals trained in some other way for their work.

A number of specific illnesses in Spain and the New World use similar or identical treatment. In most cases this appears to be due to diffusion.

Throat inflammations known as *anginas* are treated in Galicia and Peru with poultices made of a frog or a toad prepared by opening the animal and applying its inner side to the sores. In at least Andalucía and Mexico toothache is explained as due to a worm inside the tooth; cloves and a child's excrement are common toothache treatments in

¹² Vicuña, 1947, p. 91.

Spain and the New World. In both areas human or animal excrement is a standard remedy for colic. The commonest treatment for erysipelas in Spain is a black cock's blood, often taken from the crest. In Peru cock's crest blood, not necessarily from a black fowl, is used. Sties in Spain, Chile, and Peru are rubbed with a key, ring, flies, or wheat grains. The commonest remedy for headaches in the New World is the plaster (*parche*) of potatoes or other substances placed on the temples. Plasters of potato, cucumber, or squash occur in Spain, though less common than other remedies. In Spain cutting the nails on Monday, and in Chile cutting them on Friday, is thought to prevent headache. In parts of Venezuela they are cut on Monday to prevent toothache. Jaundice has three principal cures in Spain: drinking water containing lice, watching flowing water, and urinating on the *marrubio* herb (*Marrubium vulgare*). In Peru and Chile the louse treatment is known, and in Peru urination on verbena is listed. In Chile one urinates on bread and throws it in the street; if a dog eats the bread he catches the jaundice, curing the sufferer.

A common treatment for intestinal worms in Spain and Chile is to eat squash seeds. In Chile, Peru, and Spain dog bites, especially those of rabid dogs, are treated by burning hairs from the guilty animal and applying them to the wound. Rheumatism is treated with bee stings in Chile, with applications of human urine in Colombia, and by wearing copper wire bracelets in most American countries. All these remedies are known in Spain. Urine is a standard treatment for chilblains in both Chile and Spain.

Whooping cough remedies in Spanish America include rat broth in Colombia and the fruit of the prickly pear cactus (any one of several varieties of the genus *Opuntia*) in Peru and Chile. The former is the most widespread Spanish cure. In the Ribera del Ebro, Navarra, the juice of the leaves of the prickly pear is utilized. In Cataluña the juice or poultices of the leaves are used for bronchial ailments, including whooping cough. Nosebleed is treated in Spain and America by applying a key to the nape of the neck. Parsley nose-stoppers are reported from Peru and Madrid.

In Spain it is generally believed that pointing at stars and counting them causes warts. In Spanish America the rainbow is more frequently given as the cause, but in Chile the stars also are responsible. Peruvian and Chilean cures are obviously connected with those of Galicia and the Basque provinces. In all these places the wart is cut, causing it to bleed; grains of salt are rubbed in the blood, and then thrown on the fire. The sufferer flees, hoping to be far enough away not to hear the salt snap. In Chile and the Basque provinces the wart is rubbed with a coin which is thrown in the street. He who picks up the coin acquires the warts and thereby frees the original sufferer. The Basques rub warts with wheat which is then buried. In Chile the wheat grains are not buried but are given to dogs or chickens, who, however, do not acquire the warts. In Peru the wheat, like the salt, is thrown on the fire. Wart cures in the New World appear not to include rubbing them with garlic, the most frequent Spanish technique.

The nearly universal Spanish folk treatment for hernia in children is carried out on the mystic eve of San Juan. The child is taken to a willow thicket where two small trees are split longitudinally and tied to form an arch. A man named Juan stands on one side and a woman named María on the other. At the first stroke of midnight the woman passes the child through the arch to the man saying, "Juan, I give you a *niño quebrado* and want you to return him to me cured." Juan returns the child with the same words. The operation is repeated three times or until the last stroke of the clock is heard. Then the willows are bound up and if they again grow together it is a sign that the hernia will heal. Oaks and other trees may be used instead of willow.

A similar but not identical idea is found in Chile. One takes a button to a green tree and cuts a piece of bark the same size. The bark is then tied over the hernia. It

is believed that as new bark grows and closes the cut on the tree the hernia will heal. In Chile and Colombia bark is otherwise associated with hernia treatment. The afflicted child's foot is placed against the tree—often a *Ficus*—and a piece of bark the same size and shape is cut out and hung in the smoke of the fireplace or over the door. As the bark dries the hernia heals.

CONCLUSIONS

The data suggest several tentative conclusions and raise a number of questions requiring additional study. It seems quite apparent that the medical practices of classical antiquity and Conquest Spain survive to a much greater extent in the New World than in the mother country, and are perhaps stronger than they ever were in Spanish folk medicine (as contrasted to that of the educated class). The scant traces of beliefs in humors and in the concepts of hot and cold in Spain today suggest that these ideas never were basic parts of folk belief. Superstition is so tenacious in Spain that if these ideas had been folk domain within the last several centuries they would show up in field research today. This is not the case. Intensive field questioning failed to elicit any but the most tenuous concepts of hot and cold. Leading Spanish folklorists and anthropologists (Julio Caro Baroja, Luis Hoyos Sainz, C. Cabal, José García Matos), whom I questioned, reported that such ideas were, to the best of their knowledge, completely lacking.¹³ Apparently the contact situation in the New World favored widespread dissemination of much classical medical practice among the folk, a condition which never prevailed to the same extent in Spain.

A second conclusion concerns those areas in the Old and New Worlds which appear to have had greatest contact. The evidence presented here suggests that more Spanish folk medicine exists in Peru and Chile than in the other American countries considered. The remarkably complete work of Valdizán and Maldonado may contribute in part to this impression. However, other research has also led me to conclude that Peru has relatively more Spanish folklore and popular practices than, for example, Mexico; so it is not unlikely that the same would be true for folk medicine. The data also suggest that Galicia has had considerably greater contact than other parts of Spain with the New World. To American anthropologists who have been inclined to think of basic Spanish contacts as centering in Andalucía and Extremadura this may seem strange. Actually, during the past hundred and fifty years or so Galicia has been that part of Spain with most extensive contact with America; it is the only major area to which a very significant number of migrants to the New World have returned after many years of residence abroad. A special term, *Indiano*, is applied to these repatriates. They, obviously, would be important introducers of American traits, including medicine, into Spain. Lis, the most important authority on Galician folk medicine, tantalizingly mentions the "great number of *curanderos* who have come from America";¹⁴ and again, apropos of the *paletilla*, he speaks of "*curanderos* who were

¹³ José Crucent, however, remembers that in his childhood in Cataluña certain foods were thought to be hot and others cold. Iribarren (1948), writing of the Ribera del Ebro, Navarra, says "with respect to chilling the folk follow the Hippocratic doctrine which speaks of wetness, dryness, of heat, cold and temperatures" (p. 77). In his rather complete discussion of folk medicine he does not elaborate this point.

¹⁴ Lis, 1949a, p. 16.

in America where they learned mixtures of scientific and popular (medicine)."¹⁵ Though this is not the place for such a discussion, any consideration of the time factor in diffusion between America and Spain must place great emphasis on the part played by Galicia.

The extent to which American folk medicine has actually influenced Spain is difficult to determine. The few certain leads are through American plants and herbs. Of these, the most important is the potato, which today rather generally is recognized to have medicinal uses. Perhaps next in importance is the prickly pear cactus, which was early naturalized in Spain where it today looks as much at home as in America. Monardes¹⁶ lists several dozen New World plants or substances of real or imagined medicinal uses which, by 1569, had reached Spain. These included *copal* gum (from the tree *Elaphrium jorullense*), *guayacan* (*Guaia-cum sanctum*), the American sarsaparilla (*Smilax medica*), an American *caña-fístula* (*Cassia fistula*), tobacco, sassafras, and the famous *jalapa* root (*Ipomoea purga*). At one time the *jalapa* root (including a variety known as *raíz de Mechoacán*) was widely sought not only in Spain but in all western Europe for its cathartic qualities. Today these herbs appear to play little part in folk medicine. American bezoar stones, especially those from the vicuña, guanaco, llama, and deer, were much sought during Colonial times, but these also are of slight importance today in Spain. The same is true of the *uña de la Gran Bestia*, purported to be a moose hoof. Everything considered, there appears to be less American influence in the folk medicine of Spain than might reasonably be expected.

In another place I have expressed the admittedly impressionistic opinion that there are significant differences between the basic personality types of the Spaniard and the Hispano-American.¹⁷ The Spaniard has impressed me as being an essentially stable, well-integrated individual, with few inner doubts and fears and with unlimited self-confidence. The Hispano-American, on the other hand, has struck me as resembling his North American counterpart in that an air of assurance and self confidence often masks inner doubts, uncertainties, worries, and apprehensions. Some of the data on folk medicine presented here appear to substantiate this impression. I have mentioned the relative unimportance of emotionally defined illnesses in Spain. The Spaniard falls ill because of natural and supernatural causes, because of witchcraft, or because of bad luck. But he does not tend to fall ill from psychosomatic causes, nor does his culture provide him with an easy out—in the form of emotionally based folk illnesses—whereby he can take refuge from the realities of life. This is not to say that there are no neurotic Spaniards, or that emotional unbalance does not occur. But in the popular mind life's common psychological experiences do not regularly produce adverse physiological reactions.

Contrariwise, one of the most striking characteristics of Spanish-American folk medicine is the prevalence of recognized and named illnesses or conditions which are not due to natural or supernatural causes or to witchcraft but to a series of emotional experiences which anyone can undergo and which can seriously incapacitate an individual. Anger, sorrow, sadness, shame, embarrassment, disillusion, rejection, desire, fear—all are recognized as potentially dangerous—and as leading (depending on the country) to *susto*, *espanto*, *colerina*, *pispelo*, *chucaque*, *tiricia*, *sipe*, *peche*, *caisa*, *pensión*, and so on.

¹⁵ *Ibid.*, p. 168.

¹⁶ Monardes, 1574.

¹⁷ Foster, 1951, pp. 315, 324.

Many of these "illnesses" are but the formal expressions of several distinct psychological phenomena. In the first place it is undeniably true that emotional experiences may be the direct causes of physiological malfunctioning, in a purely clinical sense. In other cases, however, they are manifestations of cultural definition and culturally patterned behavior. The frightened individual realizes that his fright will probably lead to illness, and he will seize upon any general and slight symptoms of discomfort which he may have had for a long time as evidence that he has indeed been frightened, and will build them up to a degree where he and his family believe that medical treatment is necessary. The mere existence of a culturally recognized condition believed to result from fright produces patients who would never be produced in a culture without such definitions and expected patterns of reactions. Finally, the functional value of emotionally defined illness as an escape mechanism is apparent. The individual who has been through an embarrassing experience, by taking refuge in a culturally acceptable illness, receives the sympathy rather than the ridicule of his fellows. Or the individual who has lost his temper may escape punishment or retribution by seeking immunity in an illness which his culture recognizes as a common result of his action.

It is impossible to say to what extent the emotional needs of the people have influenced the conceptualization of folk medicine in Hispanic America, and to what extent pre-existing cultural patterns of folk belief have influenced personality types. But it is apparent that today there is an intimate relationship between the two. Popular definition of a major category of folk disease plays an extremely important role in carrying the individual through emotionally upsetting experiences and thereby continually reinforces common aspects of personality types.

Spanish-American folk medicine appears to be marked by a strongly eclectic nature which has permitted it to pick and choose almost at random the concepts and practices which it has incorporated. In some cases entire complexes—in the sense of popular conceptualizations of causes of illnesses linked to specific symptoms and treatment—have diffused from Spain with relatively few changes. Ideas of hot and cold causes of illness and corresponding treatments, of the egg, key and fly cures for eyes, and of lice for jaundice, illustrate this type of selection. In other cases concepts of causes of disease have diffused from Spain, but not the Spanish treatments. Beliefs about the evil eye illustrate this point. And in still other cases Spanish treatments, such as a drying lizard or scorpion in a tube for sore eyes, have reached the New World but are no longer linked to those illnesses with which they are associated in the mother country. Patterning may be assumed to underlie the apparently haphazard acceptance and rejection of Spanish medical belief and practices in the New World, but available data do not permit definition of this order. Whatever the processes and reasons involved, in Spanish America native indigenous, Spanish folk, and ancient and medieval formal medical concepts have combined to form a vigorous body of folk medicine which plays a functional part in the everyday lives of the people and which will resist the inroads of modern medical science for many generations.

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