Middle ages assignment

History



Middle ages assignment – Paper Example

Relations Period: 04 Health and medicine in the Middle ages (Dark ages) were very important aspe cts of life. For many peasants in Medieval England, disease and poor health were part Of their daily lives. Medicines were both basic and often useless. Towns and cities wer e filthy and knowledge of hygiene was nonexistent. The black death being a major complication of that era killed 2/3rds or England's population between 1 348 a nd 1350. No one knew what caused diseases then. There was no knowledge of ge rms.

Peasants had been taught by the church that any illness was a punishment fr om the God for sinful behavior. Therefore, any illness was selfimposed. Other theorie s put forward for diseases included " humours". It was believed that the body had fo humours (fluids in our bodies) and if these became unbalanced you became il I. Doctors studied a patient's urine to determine if there was any unbalance. Physicians were viewed as skilled people, but their work was based on a very poor knowledge of the human anatomy. Experiments on dead bodies were u nheard and trictly forbidden.

They charged for their services and only wealthy people co uld afford them. Their cures were bizarre, including bleeding and the use of herbs. It ha d some logic to them even if ti was a very "hitormiss" approach. One of the most famo physicians was John Arderne who wrote "The Art of Medicine' and who treate d royalty. He was considered a master in his field. His cure for kidney stones was a hot plaster smeared with honey and pigeon poop. Health -ream R Operations were carried out by ' surgeons'. In fact these men were unskill ed and ad other jobs such as butchers and barbers.

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The traditional red and white p ole outside of a barbers shop today is a throwback to the days in Medieval England when barbers did operations. The red stood for blood and the white stood for the bandages used at the end of the operation. Operations could end in death as postoperative infections were common. Instruments used in an operation were not sterilised as there was no knowledge of germs, there was no need to clean instruments used in operati ons. Patients might recover from small operations, such as a tooth extraction (tho ugh this ould not be guaranteed), but operations that included a deep cut through th e skin were very dangerous.

Some monasteries had cottage hospitals attached to them. The monks w ho worked in these hospitals had basic medical knowledge but they were probab ly the best qualified people in the country to help the poor and those who could not affo rd their own physician.