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978-1-107-65996-4 - Melancholy, Medicine and Religion in Early Modern England:
Reading the Anatomy of Melancholy

Mary Ann Lund

Excerpt

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INTRODUCTION

Zisca's Drum: Reading and Cure

And as that great captaine *Zisca* would have a drumme made of his skinne when he was dead, because he thought the very noise of it would put his enimies to flight, I doubt not, but that these following lines, when they shall be recited, or hereafter read, will drive away Melancholy (though I be gone) as much as *Zisca's* drumme could terrify his foes. (I, 24)

In the preface to *The Anatomy of Melancholy*, Robert Burton imagines his text as a tool to combat melancholy in fearsome fashion. Like the drum of Zisca (Jan Žižka), the famous fourteenth-century Hussite military commander, his 'lines' take on power when they are activated, by being spoken aloud or read silently. Burton probably found the example of Zisca in John Florio's translation of Michel de Montaigne's *Essays* (1603), among a collection of stories about leaders whose bodies were used as talismans in battle, and his choice of this story creates an apt parallel with the act of writing. The skin stretched across the drum recalls the animal hides tightened across frames to make parchment for manuscripts. The comparison points to the status of the written word as a material object. Zisca took literally the idea that his presence would confound his enemies, wishing to make himself into an object that would retain the power he had when living. Even in his absence, he thought, the drum would continue to embody him, broadcasting his fierce reputation to his foes. In a similar form of presence-in-absence, Burton imagines his book acting as a charm to 'drive away Melancholy', even after the author's death.

The allusion to Zisca's drum illuminates one facet of Burton's complex construction of the reading process within his book, a subject which will form the focus of this study. The tone of the quoted passage, which first appears in the fourth edition (1632) of the *Anatomy*, is playful and even flippant: the scholarly author who insists on the effectiveness of his book dares to compare himself to the great general, who presumes that even

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the relics of his body will scare away an army. Readers have often been struck by the force of authorial personality in the *Anatomy*, particularly the preface 'Democritus Junior to the Reader', and here that forcefulness is presented with a sense of fun. Burton suggests that the recital or reading of his 'lines' will have incantatory effects against melancholy, as if they were a spell, an idea which goes beyond the normal functions of rhetoric as persuasive utterance. The early moderns, like the ancients, believed that the power of language was irrational, even magical.¹ Burton does not represent his text as convincing the reader out of the excessive passions of melancholy through reason; instead, he imagines a more direct curative effect. In terms of the ancient Greek understanding of therapeutic language, he pictures his writing acting as *epôdê* (a charm or conjuration) rather than *logos pithanos* (persuasive speech or argument).²

This study is about the relationship between reading and cure in the *Anatomy*. It investigates Burton's claim that his work is designed as a means to ward off the melancholy of its readers, and puts this in the context of early modern ideas about the activity of reading and its perceived effects. Melancholy was seen in the period as a disease of body and soul, and Burton's text presents a whole range of medical, religious and philosophical therapies for this affliction. As this book will argue, he draws on various forms of writing from the popular English religious treatises on the cure of the afflicted conscience to the continental medical *practica*, which survey the causes, symptoms and cures of disease. In doing so, he faces the question of how general cures can be offered through the medium of the printed page to readers with varied personal circumstances. Part of his response is to focus not on their lives beyond the text but rather on their experience of reading the *Anatomy*, subsuming individual differences into a greater sense of essential likeness, and also treating his readers as unknown and invisible to him. His interest in the experience of reading takes his text beyond the normal scope of medical writing on disease, since it aims to perform a cure through its pages.

As a university man of the early seventeenth century (he spent his career at Christ Church, Oxford), Robert Burton (1577–1640) would have

¹ Neil Rhodes, *The Power of Eloquence and English Renaissance Literature* (Hemel Hempstead: Harvester Wheatsheaf, 1992), p. 7, cf. pp. 8–12, 29–30. Kenneth Burke explores links between rhetoric and magic, arguing that the latter can be seen as 'primitive rhetoric', *A Rhetoric of Motives* (Berkeley: University of California Press, 1969), pp. 40–44.

² See Pedro Laín Entralgo, *The Therapy of the Word in Classical Literature*, ed. and trans. L. J. Rather and John M. Sharp (New Haven: Yale University Press, 1970), pp. 32, 158.

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been well versed in the active methods of interpreting texts propounded by humanist educators and would have thus been accustomed to think of reading as a dynamic activity, not merely the passive absorption of material. From an early age, he would have learned to select extracts from the texts he read and collect them under subject-headings in a commonplace book. None of his own survives, but one assumes that he used them when he prepared his book 'out of a confused company of notes' (I, 17) from the hundreds of authors he consulted. We know from his surviving library that he tended to mark the margins of his books with lines and occasional notes, a practice encouraged by Erasmus as a good method of study; Burton would have expected his readers to do the same to his own text, as indeed they did.³ In the very first sentence of 'Democritus Junior', Burton imagines the reader being 'very inquisitive' (I, 1) about the author's identity, and the design of the whole work is underpinned by the belief that readers are and should be active in their encounter with texts. By suggesting that the *Anatomy* may have transformative effects on the melancholic reader, Burton draws on and develops this pervasive humanist notion of reading as a lively process.

In telling the story of Zisca's drum, Burton suggests that the act of reading can have direct power in dispersing melancholy. In the very next sentence, however, he throws his bold claim into relief:

Yet one Caution let mee give by the way to my present or future Reader, who is actually Melancholy, that hee read not the Symptomes or prognostickes in this following Tract, least by applying that which he reads to himselfe, aggravating, appropriating things generally spoken, to his owne person (as Melancholy men for the most part doe) hee trouble or hurt himselfe, and get in conclusion more harme than good. (I, 24)

If reading has transformative effects, here Burton shows the negative implications of that process. Instead of having magical properties to cure melancholy, now his 'Tract' may be harmful to the melancholic, feeding hypochondriac impulses. Burton mentions a specific Section which might exacerbate their condition, and identifies it in a footnote; he is not suggesting that melancholics should avoid reading his work as a whole.⁴

³ Erasmus, *On the Method of Study*, trans. Brian McGregor, in *Collected Works of Erasmus*, Vol. 24 (University of Toronto Press, 1978), p. 670. On training in active reading methods, see William H. Sherman, *Used Books: Marking Readers in Renaissance England* (Philadelphia: University of Pennsylvania Press, 2008), esp. pp. 3–4, 47. Readers' markings in the *Anatomy* will be considered in the Conclusion.

⁴ As Sharon Cadman Seelig wrongly suggests, *Generating Texts: The Progeny of Seventeenth-Century Prose* (Charlottesville: University Press of Virginia, 1996), p. 109.

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They can benefit from the Partition on cures. One should not exaggerate his warning, then, but nonetheless it is significant that his therapeutic claim is complicated by the recognition that reading can have other, dangerous consequences.

This book contends that Burton's stated aim to write for the 'common good' (I, 23) plays an important part in the design of the book and should be taken seriously. Such a contention does not mean, however, that the *Anatomy* is organised around a single scheme. Terence Cave rightly warns against a critical approach to early modern texts which either 'succumbs to the fear of unresolved problems and forces the text to yield a reassuringly univocal meaning' or is too 'permissive', taking no account of historical data.⁵ Burton makes explicit statements about the intended healing effects of the *Anatomy*, but the text does not offer a simple pattern of cure, and his own challenge to his 'Zisca's drum' model of reading, provided by his ensuing 'Caution', acknowledges exactly that. The work's genesis was as a form of self-therapy for the author (I, 6) and it is also a product of his melancholy in a more symptomatic sense: 'one must needs scratch where it itcheth' (I, 7). For all Burton's attempts to help the reader, he also chides, mocks, insults and complains to him or her, disturbing any sense of a straightforward therapeutic programme. A study of curative writing in the *Anatomy* must acknowledge these counter-impulses as well as Burton's varied approaches to cure.

The grand variety of the *Anatomy* is a characteristic that continues to keep readers interested up to the present day. It is a work of serious scholarship, reflecting a lifetime's reading in new as well as old material. Much of it is informative rather than persuasive or polemical: Burton documents the views and theories of all his authorities on melancholy, aiming towards comprehensive coverage rather than neat synthesis. He does not aspire to provide a 'harmony' of melancholic theory, in the way that harmonies of the Bible attempted to reconcile seeming discrepancies between passages in the Old and New Testaments. Nor is he writing a key to all mythologies (however much George Eliot's Casaubon resembled Burton's description of the melancholic scholar).⁶ The *Anatomy* is not characteristically smooth in its presentation of arguments any more than in its style. A. D. Nuttall has described it as a 'synthesis which won't syncretize', a highly apt summary of a work which retains the heterogeneous

⁵ Terence Cave, 'Reading Rabelais: Variations on the Rock of Virtue', in Patricia Parker and David Quint (eds.), *Literary Theory / Renaissance Texts* (Baltimore: Johns Hopkins University Press, 1986), pp. 78–95 (91).

⁶ Eliot quotes from the *Anatomy*, I, 304 as the headnote to Chapter 5 of *Middlemarch*.

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qualities of its sources and influences.⁷ Yet to acknowledge its roughness and occasional contradictions does not mean one must accept that the work deliberately and continually undermines itself by heaping up conflicting ideas and authorities, a critical attitude that has hampered serious study of the *Anatomy* over the thirty-five years since Stanley Fish labelled the book a 'self-consuming artifact'.⁸ For example, when Burton discusses music as a cure for melancholy over the course of a Subsection (II, 112–16) but adds at the end that it may also cause it, being 'most pernicious' to 'some light *inamorato*, some idle phantasticke' (II, 116), he is not undercutting but qualifying what has gone before. Burton acknowledges that treatments such as music have 'diverse effects' (II, 116), depending on one's humoral disposition, character and habits. The current study acknowledges that there are disruptions in the *Anatomy* – that, indeed, disruptions play an important role within it, challenging any univocal reading of the work as a whole – but resists the view made popular by Fish that contradiction and undercutting are the governing principles of Burton's text.

Another misguided critical response to the *Anatomy's* multifaceted nature has been a series of attempts to fit it into an established mode or genre: it has been seen as a medical treatise or a sermon in disguise, a Menippean satire or an encyclopedia.⁹ These categorisations may each have much textual and contextual evidence to recommend them, but not one of them provides a fully convincing reading of the work's shifting meanings and styles. Burton's first biographer, Thomas Fuller, provided a more helpful – because more broad – assessment of the *Anatomy* than the various generic approaches of modern critics, when he commented of the work's popularity that 'Scarce any book of *Philology* in our Land hath in so short a time passed so many *Impressions*.'¹⁰ Fuller himself defined philology as '*Terse and Polite Learning ... being that Florid skill, containing onely the Roses of learning, without the prickles thereof,*' and as being 'inclusive of all *human liberal Studies, and preposed to Divinity, as the*

⁷ A. D. Nuttall, Review of *The Anatomy of Melancholy: Vol. I*, ed. Thomas C. Faulkner, Nicolas K. Kiessling and Rhonda L. Blair, *London Review of Books*, 23 November 1989 (XI: 22), 18–19 (19).

⁸ Stanley E. Fish, *Self-Consuming Artifacts: The Experience of Seventeenth-Century Literature* (Berkeley: University of California Press, 1972), pp. 303–53.

⁹ Respectively by Sir William Osler, 'Robert Burton: The Man, His Book, His Library', *Oxford Bibliographic Society: Proceedings and Papers* 1 (1927), 163–90 (183); E. Patricia Vicari, *The View from Minerva's Tower: Learning and Imagination in 'The Anatomy of Melancholy'* (University of Toronto Press, 1989), p. 144; Northrop Frye, *Anatomy of Criticism: Four Essays* (Princeton University Press, 1967), p. 311; Samuel G. Wong, 'Encyclopedism in *Anatomy of Melancholy*', *Renaissance and Reformation / Renaissance et Réforme* 22 (1998), 5–22.

¹⁰ Thomas Fuller, *The History of the Worthies of England* (London, 1662), p. 134.

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Porch to the Palace.¹¹ Fuller's words point to the process of gathering and selection which is central to the early modern commonplace tradition and a notable feature of Burton's '*Cento*' (I, 11), and are also suggestive of the relationship between Burton's writing and his religious vocation. This book aims to steer criticism of the *Anatomy* away from the tendency to make limiting generic categorisations, and suggests that a more illuminating approach to the work is found in a sustained attention to Burton's treatment of the reader and the reading process. At the same time, it argues that Burton's construction of reading should be understood in the context of early modern ideas and perceptions of reading, not misleading modern understandings of the activity. It hence views the *Anatomy* in the light of other works of the period – some of them key sources for Burton – which are concerned with questions of therapy, and investigates to what extent he draws on other approaches to treatment and to reading. The fields of religion and medicine receive particular emphasis in this study since Burton himself suggests the important association between them and describes himself as 'by my profession a Divine, and by mine inclination a Physitian' (I, 23). Moreover, he aims his text directly at the layperson afflicted with melancholy, a move that links him with contemporary vernacular writers of medical regimens and of religious guidance. Such writers, like Burton, address themselves to a non-specialist audience and, if they do not promote self-treatment, nonetheless encourage readers towards healing.

There is no single and well-delineated tradition of therapeutic writing, and hence it is worth outlining here the various influences on Burton's own version. The idea of healing words or 'logotherapy' is, in Pedro Laín Entralgo's words, 'as ancient as Western culture itself', but from antiquity onwards has taken different forms.¹² We have seen Burton playfully suggest that his work will banish melancholy in the fashion of a spell, a notion that recalls various traditions of healing through magical means. Although incantations were rejected as a legitimate treatment by most learned medical writers in the early modern period, who were resistant to performative aspects of language, they were used in folk and occult medical practice, and even by highly reputed physicians such as the English astrological doctor Richard Napier (1559–1634).¹³ Meanwhile

¹¹ *Ibid.*, p. 26. ¹² Laín Entralgo, *Therapy of the Word*, p. 32.

¹³ Ian Maclean, *Logic, Signs and Nature in the Renaissance: The Case of Learned Medicine* (Cambridge University Press, 2002), p. 232; Michael MacDonald, *Mystical Bedlam: Madness, Anxiety, and Healing in Seventeenth-Century England* (Cambridge University Press, 1980), pp. 213–16.

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Burton's 'Consolatory Digression' is motivated by the belief that 'good counsell, comfortable speeches, perswasion' may help in 'the cure of a discontented or troubled minde' (II, 125). Here there is a greater role for reason in cure. Burton's main sources in this Section are classical moral philosophers (Seneca and Plutarch feature prominently), the Bible and the Church Fathers, particularly Augustine, Chrysostom and Bernard. An acknowledged set of precedents for the digression, and for the work more widely, is *consolatio* writing. These works provide a pattern for Burton's dual perception of his work's audience because they were written, he claims, 'as well to helpe themselves, as others' (II, 126).

Writing as self-therapy and as therapy for the reader are hence overlapping categories, although in Burton's handling they do not always neatly coincide. He frequently brings personal preoccupations to the surface, such as the inadequate remuneration of scholars and the failures of patrons, and these at times seem to eclipse other concerns.¹⁴ In his persona as Democritean melancholic, Burton often exhibits his symptoms by oscillating between moods of aggression and submission, mocking laughter and anxious sorrow, most spectacularly at the end of 'Democritus Junior to the Reader'. At the same time, the satirical mode he adopts represents a less obvious form of therapeutic writing and draws together the many conflicting impulses I have described. According to classical and Christian theory, satire has a reformative purpose to heal the errors of its age by dissecting its corruptions and abuses, but the satirist typically overshoots himself (to use a Burtonian word, I, 110), showing his splenetic excesses and implicating himself in the satire. The satirist's expressed desire to reform and cure comes up against the urge to vent spleen.¹⁵ Laughter is a symptom of the disorder, just as it is a well-known cure for it in the early modern period: a pill to purge melancholy.

Satire is commonly concerned with mores and social institutions, and Burton follows in this tradition by relating personal melancholy to larger disruptions in the body politic. As a result he absorbs into his writing modes of political counsel and commentary, such as the utopia he imagines in the preface (I, 85–97). Angus Gowland has recently provided a thoroughgoing analysis of the political vision of the *Anatomy*, a task

¹⁴ This aspect has been thoroughly explored by Douglas Trevor, *The Poetics of Melancholy in Early Modern England* (Cambridge University Press, 2004) pp. 116–49, and Angus Gowland, *The Worlds of Renaissance Melancholy: Robert Burton in Context* (Cambridge University Press, 2006), pp. 246–94.

¹⁵ Dustin Griffin, 'Venting Spleen', *Essays in Criticism* 40 (1990), 124–35.

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that has long been overdue in Burton scholarship.¹⁶ He has characterised Burton's attitude as increasingly pessimistic over the course of the six editions (1621–51), drawing attention to the negative representations of contemporary governance in various parts of the work. The digression on the misery of scholars and the 'Consolatory Digression' provide the author with 'the opportunity to vent his personal discontent' at a degenerate system of patronage and a corrupt aristocracy.¹⁷ Gowland's persuasive reading shows another way in which Burton's claim that his work is designed to console and help the reader is compromised at certain points in the text. The *consolatio* mode is used to relieve the excessive passions that moral philosophy aims to control and quell, calling into doubt Burton's authority as a writer advising others. A full discussion of the political dimension of the *Anatomy* is beyond the scope of this study, which focuses on Burton's treatment of melancholy at a personal level. However, in the second chapter I will consider certain religio-political questions which relate to the cure of spiritual affliction and despair in the last Subsection.

Religious and, to a lesser extent, medical writing endorsed the benefits of reading to ameliorate physical, emotional and spiritual distress. In Burton's time a large number of religious treatises purported to advise the patient on how to behave piously during illness and how to understand affliction in a spiritual sense, as a just punishment for one's sins and as a trial sent by God to those he loves. They also laid out a pattern of comforts for those suffering from a wounded conscience, and these spiritual consolations proved very popular, often reaching multiple editions. The market for works of religious guidance which offered a form of therapy was clearly large. The positive effects of reading were also recognised in medical writing. Medieval and early modern regimens (guides to preserving health) advised a good mental outlook as beneficial for staving off illness, and one of the activities which they recommended was reading, which was deemed to help people to achieve an ideal state of moderate cheerfulness.¹⁸ This gives a fresh perspective on Burton's presentation of some parts of his work as recreation, such as the 'pleasing aspersion of love matters' (III, 4) in the third Partition. Reading with pleasure may play a role in the prevention and cure of melancholy by cheering the mind. He draws on religious and medical ideas about curative reading in the

¹⁶ Gowland, *Worlds of Renaissance Melancholy*, pp. 205–94. ¹⁷ *Ibid.*, p. 266.

¹⁸ Glending Olson, *Literature as Recreation in the Later Middle Ages* (Ithaca, NY: Cornell University Press, 1982), pp. 48–64.

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construction of his own work, an influence that strengthens his adopted position as a 'spiritual physician' to his readers.

MELANCHOLY: SUBJECT AND FORM

Burton frequently describes melancholy as a suitable subject for him to write about because of its generality: it is a disease 'grievous' and 'common', and hence he can do no 'more generall service' than to 'prescribe means how to prevent and cure so universall a malady, an Epidemicall disease, that so often, so much crucifies the body and minde' (I, 110). There is no reason to doubt the seriousness either of Burton's assessment or of his aim to provide a service through writing. There was a widespread concern in early modern Europe that melancholy was becoming increasingly prevalent.¹⁹ Burton characterises melancholy as an infinitely varying condition, with different permutations in every case. The 'common definition', however, is that it is '*a kinde of dotage without a feaver, having for his ordinary companions, feare, and sadnesse, without any apparent occasion*' (I, 162). The last clause is important, as it differentiates the pathological condition from ordinary occurrences of emotions or passions. The origin of melancholy can be an excess of the humour of the same name – black bile – or an effect of other humours when corrupt or 'adust' (burnt): either all four humours, according to some medical writers, or only black bile, blood, and choler, according to Galen (I, 166–8).²⁰ Burton follows the traditional division of the disease into melancholy of the head, hypochondrium (an area of the abdomen and the organs within it) and the whole body. Melancholy is not the same as madness since mental functions are 'depraved' but not altogether 'abolished' (I, 163), although in the preface Burton freely collapses the distinction between the two conditions as part of his rhetorical effort to demonstrate 'that all the world is mad, that it is melancholy, dotes' (I, 24). One might be tempted to see a separation in his treatment of melancholy between 'Democritus Junior to the Reader' and the three Partitions, regarding him as acting in a much more systematic and scientific fashion in the work proper than the preface. Such a view has some value: at the end of the preface Burton resolves 'to say no more of such as are improperly melancholy, or metaphorically mad, lightly mad, or in disposition' (I, 109–10) and in the first

¹⁹ See Angus Gowland, 'The Problem of Early Modern Melancholy', *P&P* 191 (2006), 77–120.

²⁰ My account is a basic one; for a thorough discussion, see Stanley W. Jackson, *Melancholia and Depression: From Hippocratic Times to Modern Times* (New Haven: Yale University Press, 1986).

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Partition distinguishes between melancholy in disposition – ‘that transitory Melancholy’ (I, 136) – and in habit – ‘a Chronicke or continueate disease’ (I, 139) – claiming that his text is concerned with the latter only. Yet the distinction is not as clear-cut as he implies, and it becomes apparent during the rest of the work that he does not adhere totally to this self-imposed limitation of subject-matter. Much of the advice about lifestyle in the second Partition is generally designed to promote health, while the ‘Consolatory Digression’ is explicitly directed at ‘such as are happy, to bring them to a moderation’ as well as ‘such as are distressed’ (II, 125). Burton treats melancholy not only as a chronic disease but also as ‘the Character of Mortalitie’ (I, 136). Gowland has argued that melancholy was perceived to be epidemic in the early modern period partly because it was understood to be primarily an emotional condition, which ‘carried spiritual and ethical as well as medical significance, and assumed a prominent place within religious, moral-philosophical and political discourses on the passions of the soul’.²¹ The treatment Burton offers is therefore complex and has a broad application. He does not simply recommend medicines to alleviate or banish symptoms, but also offers what we might describe as psychological and spiritual counsel. Moral philosophy forms one important aspect of this therapy, as has been mentioned: Stoic and Epicurean writers are key sources of Burton’s writing, particularly for the Partition on cure.²² A recurrent theme of the *Anatomy* is that harmful passions should be moderated through the exercise of reason. The fields of religion, medicine and ethics provide Burton with a composite approach to melancholy; the overlapping nature of this approach reflects the shared ground of these disciplines during the early modern period.

Burton structures his material carefully, mapping it out graphically in synoptic tables (branching diagrams or Ramist charts) to each Partition.²³ The elaborate nature of this structure has been the cause of much consternation for modern readers: some have questioned whether it is deliberately designed to confuse rather than elucidate;²⁴ others have concluded that the whole work is ‘incredibly messy’.²⁵ We might find it

²¹ Gowland, ‘The Problem’, 84.

²² On Burton and Epicureanism, and more generally on the reception of Hellenistic ethics in the period, see Reid Barbour, *English Epicures and Stoics: Ancient Legacies in Early Stuart Culture* (Amherst: University of Massachusetts Press, 1998).

²³ See David Renaker, ‘Robert Burton and Ramist Method’, *RQ* 24 (1971), 210–20.

²⁴ Ruth A. Fox, *The Tangled Chain: The Structure of Disorder in the ‘Anatomy of Melancholy’* (Berkeley: University of California Press, 1976), pp. 22–7; Jean Robert Simon, *Robert Burton (1577–1640) et L’Anatomie de la Mélancolie* (Paris: Didier, 1964), p. 422.

²⁵ Seelig, *Generating Texts*, p. 110.