

**The Diseasing Healer: Francisco Delicado's
Infectious *La Lozana andaluza***

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The appearance of syphilis in the sixteenth century revealed the highly politicized notions of disease and health in Europe. The uncertainty of its origins and its rapid spread caused each nation to look outside for the source of this illness, called the *morbis Gallicus* by Spaniards and Italians and the “Spanish sickness” by the French, Dutch, and Flemish, displacing the stigma associated with it onto the body of the Other (Quétel 9-49). As a sexually transmitted disease, syphilis was not only associated with the political ills of neighboring States, but also with vice-ridden members of society like prostitutes, homosexuals, and other marginalized persons like subaltern women such as Native American women, Jews, Moors and recent converts (*conversas* and *moriscas*). In Spain, one of the most popular theories of its origin placed the blame on Native women of the New World; due to the sexual nature of the illness’s dissemination, both medical writers and contemporary historians in the New and Old Worlds, such as Fernando de Oviedo and Fray Bartolomé de Las Casas, postulated that Columbus’s men contracted the illness upon contact with local women and carried it with them back to Europe.¹ Medical writers such as Gaspar Torrella would also associate women with the spread of the disease and would advise his male patients to avoid licentious women (Arrizabalaga 1997, 122-26). Native American women, as well as the prostitutes that were thought to spread the disease throughout Europe, were viewed as a health threat to the “salubrious” Spanish society.

In the Spanish empire, the case of syphilis demonstrates how medical rhetoric was often used to mark subaltern women as not only medically ill, but also socially diseased in the Spanish body politic. These groups were either expelled or marginalized by the Spanish empire, in part, for their perceived physiological inferiority to “healthy” Old Christian members of Spanish society. The labeling of racial, cultural, female, and national Others as the diseased and diseasing carriers of syphilis thus served to symbolize their other potentially more hidden signs of racial alterity, such as their racial, religious, and national identity.

¹ For an analysis of Fray Bartolomé de las Casas and Gonzalo Fernandez de Oviedo’s writings that blame Native American women for the spread of syphilis see Deborah Hayden 15-16. To this day, there is considerable debate over the origin of this disease that some say Columbus brought back from the island of Hispaniola. Others claim that it either began in Europe or that it emerged simultaneously in the New and Old Worlds as evinced in the carbon dating of bones found in the English Port of Kingston Upon Hull. Hayden and Quétel note that recent research on the origin of the disease has proven more problematic than useful at this stage since archeologists have unearthed bones which show signs of syphilis in both the New and Old Worlds (Hayden 5; Quétel 33-49).

Francisco Delicado, medical scholar who not only suffered from syphilis but also wrote on the benefits of using gaiacum root to treat it, recognized the critical potential of using this disease and its medical, social, and political implications to challenge the Spanish imperial view of health and disease. In his 1528 *La Lozana andaluza*, Delicado confronts the Spanish State's view of alterity and disease through his comic yet critical portrayal of the protagonist, a syphilitic *conversa* prostitute who treats the disease from which she suffers. As a syphilitic *conversa*, Lozana is the living incarnation of the Spanish notion of disease and thus a very unlikely healer. However, her medical practice challenges the Spanish notion of health and healthy members of society. Through the paradoxical representation of the protagonist, Delicado confronts the Spanish stereotypes surrounding subalterns as diseased and diseasing beings from the external perspective of Rome.²

In my analysis, I investigate how Delicado undoes the Spanish view of the *conversa* Other as diseased and diseasing in society. I begin with a study of Lozana's agency in the determination of the signs of her identity and disease. I then examine how the protagonist challenges the view that subaltern female healers cause more disease than they heal by studying how she controls these same signs in her patients through her role as healer.

La Lozana

La Lozana is presented in the unusual format of a *retrato* (portrait) of the fictitious protagonist Lozana, a syphilitic *conversa* prostitute from Spain who is forced to abandon her Spanish lover Diomedes in Marseilles when her potential father-in-law tries to have her killed in order to halt her marriage to his son. When her executioner takes pity on her, Lozana manages to escape to Rome, where she continues to work as a prostitute and adds several other professions to her repertoire, including that of healer. It is in Rome where she meets the "Auctor," the narrator of her story who presents the work as his narrative *retrato* of the protagonist. The *retrato* documents her time in this city from the year of Leo X's canonization in 1513 up until the sack of the city by Spanish imperial troops in 1527.

Critics typically view *La Lozana* as a picaresque or proto-picaresque text for its humorous yet critical social commentary of the vice-ridden underworld of Rome. However, the format of a *retrato* allows the author to present and analyze his protagonist from a unique perspective. In fact, it has been suggested that the character of the Auctor is, in fact, the author himself: the two share Delicado's profession of doctor, his homeland of Spain, and his syphilis. Consequently, the Auctor's interventions and comments on the events that transpire have often been interpreted as

² For my textual quotes in the original Spanish I use Bruno Damiani's 1969 edition of the text. "The Diseasing Healer: Francisco Delicado's Infectious *La Lozana andaluza*" is a revised version of part of the material from the chapter "The Diseasing Healer: Infectious Women in Delicado's *Lozana andaluza* and Cervantes's *Trabajos de Persiles y Sigismunda*" in McInnis-Domínguez.

Delicado's perspective.³ These comments, along with Delicado's characterization of his infectious protagonist, give the reader insight into Delicado's treatment of syphilis, the medical profession, and race. The presentation of the protagonist not only inspires humor, but it also reflects Delicado's critical view of the Spanish notion of health and healthy members of society.

The Signs of Disease

In the first part of the text, Delicado explores the protagonist's visible and invisible signs of alterity and their relationship to Spanish notions of disease, health, and identity. The reader learns that before Lozana even arrives in Rome, she has a propensity for illicit behavior, disregarding her aunt's warnings against becoming Diomedes's lover. Lozana travels with Diomedes from Spain to Rhodes, Alexandria, Constantinople, Parnassus, and other sites in Barbary before returning to the West in Marseilles. For Manuel da Costa Fontes, these travels by sea with her lover are an allegory for the protagonist's prostitution, suggesting that she began practicing this profession during the trip (2005, 179-83). For him, it is likely as well that Lozana acquired the "French disease" (syphilis) in Marseilles, in accordance with the common Spanish belief that the illness originated in France (2005, 180-82). While it is probable that Lozana had the illness before she arrived in Rome, it is not until she arrives in the barrio of the Pozo Blanco that Lozana's identity markers become visible for the first time, both in the protagonist's reading of her own body and in the reading of her body by her new friends.

In the initial description of Lozana's adventures in Rome, her syphilis is recognized by her new friends Teresa and Beatriz, two fellow Spanish ex-patriots. When Beatriz sees Lozana for the first time she exclaims: "¡Si tuviese asiento para los antojos! Mas creo que, si se cura, que sanará" (50-51). As Beatriz's words demonstrate, Lozana's syphilis is so far advanced that her nose has decomposed. Teresa adds exact details of Lozana's disfiguration: "Súbele más de mitad de la frente: quedará señalada para cuanto viviere" (50-51).

I argue that these outward, physical signs of syphilis are a metaphor for the other sign of Lozana's alterity: her *conversa* identity. Her new friends discover soon after that Lozana is indeed a *conversa* when they trick her into revealing her culinary preferences for the preparation of Moorish turnovers (51). The association of Lozana's *conversa* identity which she is loath to reveal and her syphilis evinces the strong connection between medical metaphors and social disease in the early modern period.

³ The Auctor, a Spaniard whose medical comments suggest that he is a physician, has often been interpreted as Delicado himself because of the connections between the two. For a detailed study of the connections between the author and the auctor figure, see Louis Imperiale 1994a and 1994. For detailed descriptions of the interaction between the author, his text, and the protagonist see also Bruce Wardropper and Bruno M. Damiani 1974.

As Susan Sontag has recently argued, syphilis was a powerful metaphor for pollution in pre-modern times because of its association with certain “risk groups” or, as Sontag defines it, “that neutral sounding, bureaucratic category which also revives the archaic idea of a tainted community that illness has judged” (1989, 17, 46). For her, the metaphoric use of AIDS is similar to that of syphilis in that, as sexually transmitted diseases, they both carry strong social stigmas for the sufferer.⁴ As was mentioned earlier, in early modern Spain marginalized women such as Jews, Moors, *moriscas*, *conversas*, and Native Americans were blamed for spreading this illness. It was also linked to prostitutes who were viewed as a health threat to the “salubrious” Spanish society. Often, the syphilis they were thought to carry came to be viewed as a sign of their internal alterity or difference as racial Others within the Spanish empire.⁵

The view of the *converso* other as diseased was due, in part, to a perceived physiological difference between Old and New Christians. In the early modern period, it was thought that New Christians had a different “humoral” makeup than Old Christians. During this period, health was determined by the balance of the four humors (blood, phlegm, black and yellow bile). According to Galen, whose writings on Hippocratic medical theory in the second century A.D. would become the basis for medieval and early modern medicine, disease was often described in terms of an imbalance of temperature or moisture. These factors could be identified by the individual’s geographic location and climate, or by his or her genetic ancestors. In early modern Spain, Jews, Moors, and even converts were viewed as humorally deficient by virtue of their “feminine” constitution. Like women, subaltern males were often depicted as having a moist and cold physiognomy, while “healthy” (Old Christian) men were thought to be hot and dry. In this epoch, the grouping of subaltern men with women was not unusual for, as George Mariscal has shown, femininity was coterminous with alterity; in an effort to mark male Others as deficient, they were often described in feminine terms, and were even thought to menstruate like women, in the case of Jewish males.⁶

By appropriating the medical notion of humoral difference and contagion to mark the Other, reason-of-state and religious authors such as Archbishop Siliceo and Fray Agustín Salucio were able to justify the view that Old Christian men were the ideal members of society, not only for their faith and gender, but also for their perceived

⁴ Susan Sontag argues that syphilis was a limited social metaphor because its causes were known (sexual promiscuity), and hence it is not as “mysterious” as other illnesses such as tuberculosis (1978, 59-60). In Sontag 1989 she revises her earlier conclusion. She notes that syphilis, while not mysterious, was still used as a powerful social metaphor (1989, 46).

⁵ For more on the relationship between syphilis and other infectious diseases and the marginalization of the Other in early modern Spain, see McInnis-Domínguez.

⁶ George Mariscal cites Juan de Quiñones’s memorial to Philip IV’s confessor, Fray Antonio de Sotomayor, as one to claim that Jewish males menstruated like women: “que todos los meses muchos dellos padecen flujo de sangre por las partes posteriores, en señal perpetua de ignomia y oprobio” (qtd. in Mariscal 43). He notes that Quiñones conflated this “sign” of their alterity with their other corporal marking through circumcision (44).

physiological superiority.⁷ Both *conversos* and *conversas* were considered to be tainted by the Jewish blood that they inherited from their ancestors, causing them to be both socially and professionally marginalized through the state's vigilance.

In *La Lozana*, Delicado addresses this common association of *conversas* with infectious diseases. As Jean Dangler notes: "Allusions to her status as a convert also appear throughout the work, and signs (señales) in the text refer as much to the signs of syphilis as they do to the signs of Jewish ethnicity" (149). One such sign is the star-shaped scar on Lozana's forehead that was noticed by a woman known as the 'Sevillana.' Earlier in the text this woman commented that Lozana's scar "parece una estrellica" (49). As da Costa Fontes notes, the term "estrella" was used as a "euphemism for a scar or a syphilitic lesion" (2005, 186). Similarly, he observes that this "star" also represents her ancestors' Judaism (2001, 156-57 and 2001, 200). Carolyn Wolfenzon adds that Lozana's missing nose also evokes a stereotypical sign of this Jewish ancestry (112). For Wolfenzon, however, Lozana's syphilis is more symbolic than real: "El único síntoma real por el que atraviesan algunos personajes es el de la pérdida del cabello" (114). She disagrees with María Luisa García-Verdugo's reading that the signs of the illness in the text were real (114).⁸ Instead, Wolfenzon argues that Delicado endeavors to show how the Spanish notion of disease is nothing more than a representation, like Lozana's syphilis, exemplifying the author's criticism of the Spanish view of the *converso* Other as diseased (114-15). While I agree that the author challenges the Spanish view of *conversos* as "diseased," I do not agree with Wolfenzon's claim that Delicado does not present Lozana's syphilis as a real illness, but rather as a mere representation.⁹ The descriptions of Lozana's syphilis are similar to Delicado's description of his own ulcerous sores in his 1529 medical text on the use of guaiacum root to alleviate the symptoms of syphilis, *El modo de adoperare el legno de India (The Method of Using the Wood from the Indies)*. He explains that he wrote his medical treatment so that others would not suffer as he has from this illness:

⁷ For a complete study on the use of medical terminology to marginalize Jews and Moors by Siliceo and Salucio, see D. Gracia Guillén's "Judaism, Medicine, and the Inquisitorial Mind in 16th-Century Spain." I argue that by marginalizing these figures through medical means, Archbishop Siliceo and Fray Agustín Salucio present the Old-Christian Spaniard as the ideal member of the Spanish body politic.

⁸ García-Verdugo contends that syphilis is not only experienced by many of the inhabitants of the city as a real illness, but it also serves as a metaphor for the city's corrupt reality as home to prostitutes and other marginalized persons like Lozana (21-27). For her, the author offers a realistic portrayal of both syphilis and the "sins" of Rome's inhabitants leading up to the 1527 sack of the city by Spanish imperial forces (21-70).

⁹ Carolyn Wolfenzon's conclusion that Delicado criticizes the Spanish view of the *converso* Other as "diseased" is similar to a conclusion that I had reached in "The Diseasing Healer: Infectious Women in Delicado's *La Lozana andaluza* and Cervantes's *Trabajos de Persiles y Sigismunda*" (in McInnis-Domínguez) prior to the publication of her article. However, Wolfenzon focuses on the implications of this claim in relation to her reading of the text as a testimonial of the exiled *converso* experience in Rome, and not on its implications in relation to the Spanish medical field through Lozana's role as healer.

Non vt gloriam aliquam mihi ex hoc opusculo compararem, quam semper ex christianis institutis parui faciendam existimaui, sed vt amissam crudeli morbo, quem gallicum vocant, sanitatem quisquis hec legere non apernatus fuerit aliorum exemplo recuperaret, multorum calumnijs obicere me non dubitaui: nam cum per viginti et tres annos partim atrocissimis doloribus, partim seuissimis vlceribus confectus sim, inhumanum mihi visum est et ab ea quam poene ab ineunte aetate suscepi personam maxime alienum qua via que ve ingenio ad pristinam sanitatem redierim caeteris non commonstrare.¹⁰ (Delicado and Damiani 251)

Furthermore, the descriptions of syphilis in *La Lozana* are not only consistent with the author's own signs of disease but they are also consistent with modern descriptions of the illness. in medical texts. Here I summarize the symptoms of the disease as described in *Harrison's Principles of Internal Medicine* (2005):

The signs of syphilis are quite obvious: after an incubation period of two to six weeks the first lesion will appear on the site of infection. Following this phase more mucocutaneous lesions appear, either localized or diffuse that can become necrotic lesions resembling pustules on the face, head, or soles of the hands and feet. If left untreated these pustules can eat away at the skin of the affected area. This phase is typically followed by a latency period potentially lasting years or the rest of the patient's life. In a third of the cases, a third stage is manifested resulting in neurological deterioration (meningeal syphilis), cardiovascular syphilis, or late benign syphilis, in which the skin or internal organs are infected by gummas or lesions that can either heal spontaneously producing considerable scarring, or can fester, producing results similar to those of leprosy and deep fungal infections. (1044-52)

As evinced by this summary, Lozana's scarring and the eating away of her nose are real signs of syphilis. They correspond to both the initial phases of the disease in which pustules can appear on the face and can eat away at the skin, as occurred with her nose, and with later phases of syphilis when these pustules result in scarring, like that on her forehead. In the text, Lozana's illness is very real, like the illness of the author himself. Delicado's familiarity with the signs of syphilis are transferred to his

¹⁰ Translation for the Latin: "Not with the intent to achieve fame, that according to Christian principles you would not hold in great esteem, but so that anyone who reads this will recover, following the examples of others, their lost health due to the cruel disease that they call French, I have not objected to expose myself to the calumny of others; in fact, being myself afflicted for twenty-three years by atrocious pains and by extremely cruel ulcers, it seemed to me inhumane and completely strange to the type person that I have always been not to show others the means and intelligence (rational methods) by which I have been able to recover my earlier health."

depiction of Lozana, who also suffered from “cruel ulcers” that were visible upon her body.

In his work, Delicado endeavors to show how outside of the empire, the interpretation of the metaphors of disease are subject to *reinterpretation*, thus giving *conversos* agency in the determination of the social meaning of the signs of their own identity and health. From the first moment that Lozana’s signs of identity are contemplated by the inhabitants of the Pozo, they are inscribed with new metaphoric meaning by both her and her new friends. When Beatriz comments on the signs of Lozana’s syphilis, she also notes the protagonist’s beauty: “¿Vistes tal hermosura de cara y tez?” (50). This paradoxical observation has confounded critics like Dangler who interpret Beatriz’s remark as ironic or humorous, similar to the irony of the protagonist’s nickname of “Lozana,” meaning “beautiful,” for the noseless protagonist (135, 148-49). However, I argue that it reveals an alternative notion of beauty, health, and disease in the Pozo Blanco neighborhood of Rome. While this neighborhood was known as the Spanish *barrio* in Rome, it was hardly representative of the value system of the Spanish empire as it became home to many of Spain’s exiled members. The Pozo was known throughout Europe as the depository of people of illicit professions such as prostitutes, courtesans, artisans, and laundry women (García-Verdugo 65). It would not be difficult to see how the *barrio* would be perceived to be a “cesspool” of illicit figures from Spain, as the Pozo became home to many of Spain’s unwanted expatriates (Jews, Moors, converts) who were either expelled from the empire or left willingly to escape persecution, like Lozana herself.

Soon after meeting the protagonist, her new friends Teresa and Beatriz reveal that they too are *conversas* who have been in Rome “desde el año que se puso la Inquisición” (55). Like many real *conversos*, these fictional women abandoned Spain potentially because of the social repression they faced despite their conversion to Christianity. In Spain, the purity of blood statutes marginalized *conversos* from many professions because of their perceived “corrupt blood” inherited from their Jewish ancestors. In Rome, they are less repressed, yet they are not afforded many opportunities for social advancement.¹¹ Here they are also hesitant to reveal their

¹¹ The initial episodes that take place in the Pozo serve to introduce the critical undertones of the text in relation to Spanish identity politics as found in the Spanish *barrio* in Rome. In this city, Jews and *conversos* experienced fewer social and professional limitations while the Inquisition and royal decrees of Spain strove to cleanse the Spanish body politic of the potentially corrupting influence of these groups. However, while Rome did accept Jews and *conversos*, there, too, existed a strong anti-Semitic sentiment. Renée Melammed notes that even before 1492, the term *marrano* was used for both converts and Jews, thus demonstrating the strong social connection and repression shared by the two (110). She explains: “The *converso* who declared his Jewishness had fewer options, was socially segregated, and was often limited to residing in the ghetto [...]. Thus, all the *conversos* who arrived in various Italian cities did not openly embrace Judaism; although they seemed to have been in the minority, these individuals were tempted by the prospect of the social advantages available to them in the Christian world” (111). Hiding their Jewish heritage became necessary for the survival of many of the Jews and *conversos* in the Italian Peninsula. Jews, if recognized, would be forced to live in separate ghettos and wear badges to identify themselves (116).

Jewish heritage to those who are not also converso or Jewish.¹² Like many of those who left, women like Teresa and Beatriz were forced into illicit professions such as prostitution in order to earn enough money to feed their families.¹³

Delicado's treatment of these women's reaction to Lozana's identity is not casual. He, like they, may have left Spain because of the social repression he experienced as a *converso*. In the prologue to his edition of *La Lozana*, Antonio Vilanova has observed that it is very likely that Delicado originated from a family of converted Jews due to the date of his arrival shortly after the expulsion of the Jews from Spain in 1492 (xiii). Bruno Damiani adds that the numerous allusions to the *converso* plight in Rome further confirm this hypothesis (1969, 11). As *conversos*, it is very possible that Delicado and/or his family decided to leave Spain voluntarily to escape persecution after the expulsion of the Jews in 1492, as Vilanova has suggested (xiii). Delicado does not mention the exact date of his arrival in Rome so it is difficult to know if he had traveled alone or had come to the city as a child.¹⁴ The choice to immigrate to Rome would not have been unusual, since this city became home to many Jews and *conversos* around the time of the expulsion. As a clergyman, Delicado would have experienced less repression in Rome than in Spain.¹⁵ The connections between Delicado's own life experiences and the presentation of identity in *La Lozana* has led Da Costa Fontes to assert that the text can be treated as an allegory of the *converso* experience of exile, evincing Delicado's critical view of Spanish imperialism (2001, 145-60). I argue that Delicado not only critiques Spanish imperialism, but the notion of *converso* Others and more precisely, *conversas*, as diseased and diseasing members of European society.

As low-class and marginalized members of society, Lozana's and her friends' oblique views of the visible markers of disease point toward the problematization of

¹² While Lozana endeavors to hide her ethnicity, her new friends Beatriz and Teresa wish nothing more than to determine her status in an effort to better "read" the body of their new friend to determine if they can reveal their own identities without fear that Lozana will judge them for their ethnic alterity as Spain has. Beatriz, fearing that Lozana's obvious control over the physical and rhetorical presentation of her own identity would cause both Beatriz and Teresa to misinterpret Lozana's ethnicity, states: "No veis qué labia y qué osadía que tiene y qué dezir? Ella se hará a la usanza de la tierra, que verá lo que le cumple. No querría sino saber della si es confesa, porque hablaríamos sin miedo" (51). Interestingly, this fear of revealing their identity is linked in the text to the impending sack of Rome by the mercenaries of Carlos V's imperial army in 1527. Even outside of Spain, these exiled members fear imperial retribution. For a discussion of the relationship between exiled *conversos* and the allusions to the sack of Rome in *La Lozana* see my "Diseasing Healer: Infectious Women in Delicado's *Lozana andaluza* and Cervantes's *Persiles y Segismunda*" (McInnis-Domínguez 33-37).

¹³ Olwen Hufton discusses the limited employment opportunities for exiled *conversas* which led to the common choice to become a prostitute.

¹⁴ Manuel da Costa Fontes argues that Delicado's poor Italian suggests that he studied to become a priest in Spain and came to Rome as an adult (2005, 43).

¹⁵ Anna Foa notes that many *conversos* who went to Rome to escape religious repression were either *marranos* or *newly* devout Catholics who hoped to achieve absolution from the Pope by proving their Catholic faith (111). The latter group hoped to overcome the stereotype that all *conversos* secretly practiced the faith of their ancestors by receiving the blessing of the Pope.

the Spanish imperial value system in Rome. While in Spain, Lozana's syphilis would be read as the external marker of her lascivious lifestyle as a prostitute and her more hidden alterity (her *conversa* identity); in the Pozo Blanco, the signs of her alterity are subject to reinterpretation. Instead of finding her marks to be ugly, these women invert the Spanish reading of the *conversa* Other as diseased by paradoxically calling the protagonist "beautiful." For them, Lozana's missing nose, symbolic of both her sexual transgressions and her Jewish ancestry, is actually a sign of her beauty. Delicado thus presents the Pozo Blanco as a counter-Spain where the empire's unwanted members can reinterpret and reassess the Spanish notions of disease and alterity.

Like Mikhail Bakhtin's concept of the carnivalesque in which societal norms are inverted during the festivities before Lent, Delicado uses the Pozo Blanco as a foil for the Spanish empire's identity politics. In Bakhtin's concept of the carnival, traditional social hierarchies are abolished: "People who in life are separated by impenetrable hierarchical barriers enter into free and familiar contact on the carnival square" (123). The use of disguise erases social distinctions and the village idiot emerges as king. Excess, the grotesque, and the ludic replace the traditional values of restraint, order, and decorum. In *La Lozana*, the Pozo Blanco is presented as a carnivalesque reality in opposition to the Spanish empire. Here identities that are deemed as corrupt, diseased, and socially ill in Spain are inverted, thereby becoming healthy and beautiful. Lozana and the Pozo itself come to represent an anti-Spanish notion of health and identity.

In the new carnivalesque reality of the Pozo Blanco, Lozana, like her friends, is also able to reinterpret the signs of her own physiological alterity. Rather than admit that the scars on her body are the result of her libidinous behavior in Spain, Lozana explains her mark as the result of "las cabezadas que me he dado yo misma, de un enojo que he habido, que me maravillo cómo soy viva" (48). Earlier in the text, the narrator had explained that Lozana gave herself these marks in a fit of anger over the attempt on her life by the assassin sent by her potential father-in-law (45). In Lozana's interpretation, her father-in-law's bad behavior and not her own causes her to mark herself. Lozana's reinterpretation of her scar reverses the association of her illness with her syphilis (and thus her illicit lifestyle) as well as any connection of the disease with her more hidden *conversa* alterity. Her suffering, rather than her misdeeds, are the source of her deformation. Lozana blames her father-in-law, whose behavior equates him with the Spanish state and its repressive policies toward subalterns. Rather than accept Lozana, a *conversa* who, as a Christian, should be accepted into his family as a member of the Spanish body politic, he endeavors to keep her from returning to Spain by threatening her life. Consequently, she scars herself as an external indication of the pain she feels.

Lozana's mark is similar to the acts of self-flagellation of female mystics (such as Catherine of Siena and Santa Teresa de la Cruz), who would self-flagellate in order to achieve a more profound union with Christ. The pain they experienced was a punishment of the flesh and cleansing experience for the soul. Unlike these women, however, Lozana does not punish herself for her past unchristian behavior, but for the

loss of her homeland and her wanton lifestyle as the illegitimate lover of a wealthy businessman. Her self-flagellation is at best a parody of the Christian practice. In this sense, as with the star of David in relationship to the Jewish religion, any religious symbolism is denied or ridiculed by Lozana.

It is Lozana's subversive ability to reinterpret the signs of disease and alterity that earns her the respect of her new friends and many others in the Pozo Blanco and beyond in Rome. As Teresa observes: "Antes de ocho días sabrá toda Roma, que ésta en son la veo yo que con los cristianos será cristiana, y con los jodíos, jodía, y con los turcos, turca, y con los hidalgos, hidalga, y con los ginoveses, ginovesa, y con los franceses, francesa, que para todos tiene salida" (56). Because the others rely on cultural, racial, and medical identification to accept or reject the protagonist, Lozana has a chameleon-like ability to blend in and be accepted by those whom she encounters, both within the Pozo and in Rome's other neighborhoods as well. In the various barrios of Rome, Lozana "treats" patients and clients such as the character known as "Jodio" who calls her "pariente" and the Jew Trujillo, both of whom she offers sexual healing. She also offers her medical and sexual remedies to Spaniards, Italians, Turks, and Greeks, among others; people in the upper and lower classes; Christians; and recent converts such as the clerics for whom she prescribes remedies to treat their syphilis (while also serving their sexual needs) as well as their courtesans. Her ability to deal with patients of all races and classes contributes to her considerable success as prostitute, healer, and beautician. In fact, Lozana quickly becomes famous in Rome for her trades. As the "Compañero" of the Auctor notes: "A todos da remedio de cualquier enfermedad que sea" (114).

In the text, Lozana controls the signs of her identity: her syphilis and her more hidden racial identity. Lozana's friends such as Teresa recognize Lozana's changing interpretation of her disease, origin, and history as a self-defining act. Lozana's reinterpretation of her identity and her ability to be accepted by clients of different races and nationalities throughout Rome serves as a counterexample to the Spanish state's desire to be the agent to label its members and to not allow for self-identification or movement between identities.

Lozana's agency in controlling the meaning of her signs of health and illness reflect Delicado's problematization of the Spanish notion of *conversos*, and more particularly, *conversas*, as diseased. Delicado uses his protagonist's syphilis to take issue with the popular socio-political interpretation of her internal and external markers of "illness," through Lozana's manipulation of the signs of her own alterity. I contend that it is precisely this identification of *conversas* as physically deficient that Delicado complicates through Lozana's ability to change depending on her social context. Rather than showing that illness is nothing more than a representation, as Wolfenzon argues, Delicado empowers his *conversa* protagonist, who, when away from the confines of Spain, *reinterprets* the meaning of the signs of both her illness and her *conversa* identity. Delicado gives his protagonist the power to determine the

signs of her own identity and its health in Rome as a model for other *conversos* to follow.

In the remaining *mamotretos* of the text, Delicado further problematizes the imperial interpretation of alterity through the Auctor's commentaries on other signs of Lozana's identity, all relating to her various professions. However, the paradoxical presentation of Lozana's body combined with her dual practice of prostitution (as an agent of disease) and healing (as an agent of health) have been interpreted by critics as Delicado's humorous criticism of the illicit women who infected him, or as a criticism of female healers as agents of disease rather than health. Damiani and Wardropper contend that the author criticizes his protagonist as representative of the itinerant prostitutes who infected him with the illness (Damiani 1974, 89, 114; Wardropper 476). Dangler takes this assessment a step further by reading the text as a warning for men to avoid prostitutes and female healers like Lozana, linking the text to a medieval tradition of misogynistic depictions of women as the cause of male health problems.¹⁶ In his descriptions of Lozana, Delicado follows a tradition established by earlier male physicians such as Jaume Roig who condemned female healers for their power to manipulate the signs of disease and health as well as to subvert the social order. Dangler argues that the author's ironic presentation of the protagonist as a diseasing healer reflects his criticism of the protagonist in "a comic effort to discredit the woman healer" (138).

While it is true that, as a university-trained physician, it would seem that Delicado should present Lozana's subaltern female medicine as subversive and dangerous, I submit that there is another way to read Lozana's healing in this text: as a critical reinterpretation of the Spanish notions of disease and health according to the medical establishment and the state.

The Diseased Healer

In Part Three of the text, Delicado uses the protagonist's medicine as yet another example of Lozana's ability to subvert the norm through her powerful control of signs.¹⁷ By addressing Lozana's success as healer despite some of her "illegitimate"

¹⁶ Jean Dangler argues that Delicado warns men of the dangers of women as the source of disease. This theme was already established by the medieval Spanish author, Jaume Roig's and Fernando de Rojas in the *Spill* and the *Celestina*. For Dangler, Delicado's presentation of Lozana, both as protagonist and text, is highly ironic, complicating any straightforward reading of either. However, she also contends that "the pejorative representation of Lozana is thinly guised, if it is hidden at all, since the connection between disease, *medianeras*, and sex is not unproblematic in *La Lozana*. The supposed sexual pleasure that men experience with women actually produces bodily disfigurement, pain, and disease" (134-35, 173).

¹⁷ After the initial presentation of the protagonist's identity and her manipulation of the signs of her alterity, the author turns to her various professions, including those of prostitute, cosmetician, and healer, among others. While Part Two of the text primarily presents Lozana's prostitution, she never is shown to spread illness to her clients. Instead, her prostitution is often joked of as "sexual healing" that

methods such as the use of magical or “superstitious” medicine, her lack of formal training, and her low status in the Spanish hierarchy of practitioners, Delicado continues to question the Spanish view of disease and its relationship to marginalized Others.¹⁸

Early on, the Auctor describes Lozana’s various professions. He claims that Lozana is unrivaled in the art of prostitution as well as in the production of cosmetics. In Part Two of the book, he asks Lozana to describe the details of her medical practice so he can create a more accurate portrayal of the heroine. She explains:

Yo sé ensalmar y encomendar y santiguar cuando alguno está aojado, que una vieja me vezó, que era saludadera y buena como yo. Sé quitar ahitos, sé para lombrizes, sé encantar la terciana, sé remedio para la cuartana y para el mal de la madre. Sé cortar frenillos de bobos y no bobos, sé hacer que no duelan los riñones y sanar las renes, y sé medicar la natura de la muger y la del hombre; sé sanar la sordera y sé ensolver sueños; sé conocer en la frente la fisionomía y la quiromancia en la mano, y prenosticar. (176)

uplifts her solicitors. Part Three of the text focuses on her healing activities as a female empiric. Regarding the notion of “sexual healing,” both literary and medical texts promoted the notion of coitus as necessary for health from the earliest works forward. The classical medical authors Hippocrates (ca. 460 BC - 377 BC), Galen (131-201), and Nemesius (ca. 390) and their early medieval translators Constantine the African (ca. 1015-87) and Avicenna (981-1037) warned their readers of both overindulgence as well as the lack of sexual activity as causes of the illness melancholy (Cadden 273). In the late middle ages and early modern period, medical authors such as Bernardo de Gordonio (ca. 1258-1318), the anonymous author of the *Speculum al foderi* (ca. fifteenth century), and Francisco López de Villalobos (1474-1549) approved of coitus as part of a healthy lifestyle. It must be noted, however, that they often specified that coitus should only occur between a man and his wife, and that excessive coitus with prostitutes could be harmful (Gordonio 1411). The *Speculum* was one of the few texts to recommend coitus without the stipulation that it should only occur in marriage. In literary texts, Ovid’s *Remedia Amoris* was one of the first works to promote coitus as beneficial to a healthy relationship. In the medieval and early modern periods, some sentimental novels would follow the trend established by Ovid’s work and promote coitus. Please see Antonio Cortijo Ocaña’s *La evolución genérica de la ficción sentimental* for a treatment of sex as beneficial to relationships in the evolution of the courtly love genre.

¹⁸ Lozana’s use of superstitious or magical medicine, while ridiculed by legitimate healers such as the Auctor, was very popular in this period. As Nancy P. Nenno reminds us, in the medieval and early modern periods, the distinction between medicine and magic was not so clear: “It has been suggested that medieval conceptions of magic, medicine, and science were not separate fields of knowledge, so that often the borders among them become blurred and uncertain. The dynamic of this model is especially jarring to late twentieth-century readers, accustomed to viewing medicine as discrete from magic, as ‘scientific,’ rather than ‘magical’ practice. And yet precisely this lack of distinction during the High Middle Ages meant that magical and medical practices often appeared to overlap –particularly when healers, both men and women, were not licensed by the state and also employed treatments and remedies based upon superstition” (79-92). On the subject of the cross-over between magic and medicine in Medieval Europe, see also Valerie Flint 329-92.

This list of her medical talents is complemented by her other practices evinced in the text such as the restoration of lost virginites, the treatment of *morbis Gallicus* (the “French disease,” otherwise known as syphilis) and other sexual diseases of men and women, and feminine problems like the “suffocation of the womb.”¹⁹ Lozana mixes both empirical and “superstitious” medicine in her diverse practice that mimics that of real female healers, particularly subaltern female healers of the day, who often held numerous professions in order to make a living. It was precisely this mix and their lack of theoretic training that caused all female healers, regardless of ethnicity, to be marginalized from “legitimate” medicine.

In early modern Spain, female healers performed on the borders of legitimate medicine for their supposed deficiencies as women and for performing services that challenged the official view of medicine promoted by the Spanish Royal *Protomedicato*, the institution in charge of regulating its practice. During this time, the medical field was dominated by male university-trained physicians.²⁰ In the medical hierarchy, the male physician occupied the highest rank, while female empirics and faith healers were deemed the least legitimate practitioners, in part because their medicine was based on apprenticeship and practical training rather than the study and application of the humoral theory that dominated academic medicine.²¹ Social tradition, reinforced by exclusionary legislation in the fifteenth century, prohibited women’s access to universities. Consequently, women were known for their empirical practices, such as midwifery, blood letting, and the couching of cataracts (a procedure to loosen the clouded lens, repositioning it to promote greater vision). They were also sought out for their herbal remedies and “magical” or “superstitious” medicine that, while deemed illegitimate by the state-controlled medical institution, was very popular. Women often combined their medical practices with other jobs: they sold cosmetics, worked as intermediaries, and interpreted astrological events.²²

¹⁹ “Suffocation of the womb” was a commonly diagnosed illness in women in the medieval and early modern periods. According to the medical theorist Bernardo de Gordonio, the illness entailed a relocation of the uterus toward the diaphragm because of venomous or corrupt vapors. These vapors could be caused by retained sperm (it was thought that women possessed sperm) due to lack of sexual release, the retention of menses, or the corruption of the humors in the uterus. He recommends that women suffering from the illness use old female healers like Lozana to remedy this ill (1470-71).

²⁰ For a discussion of the medical hierarchy in early modern Europe, see Nancy Siraisi 17-47.

²¹ In the early modern period, physicians often claimed superiority over empirics because of the latter’s lack of theoretic training. A “legitimate” university-trained physician combined both medical theory and practical experience for a balanced practice. Consequently, the medical establishment looked down upon empirically trained practitioners that primarily based their knowledge on apprenticeship and practical training. On the difference between academic and empiric medicine and its relationship to the medical practice of practitioners in Spain, see Luis García-Ballester 1985 and 1994.

²² As the medical historian Monica Green has argued, there has been very little documentation of female medical practices in pre-modern Europe due, in part, to the view held by historians that most female healers were midwives exercising an “illegitimate” medical profession. She notes that the lack of documentation was likely compounded by the fact that women often changed professions many times in their lifetime. When women did practice medicine, they often included this craft alongside

Consequently, while these female healers were popular among their clients for their low cost and accessibility, they were often criticized by “legitimate” male physicians who warned their clients of the dangers of female practitioners. Their difference, and lack of formal university training, led female healers to be marginalized from legitimate medicine. As Michael Solomon has noted, medieval and early modern Spanish male physicians such as Alfonso Martínez (ca.1398-ca.1466) and Jaume Roig (late fourteenth century-1478) used their treatises as a means to marginalize women healers from practicing medicine by arguing that they used subversive power to manipulate the signs of disease and health for their own benefit. For example, Solomon notes that Roig warns his male readers that “there are not enough words to express the types of poisons [women] offer men” (qtd. in Solomon 83).

While all women were marginalized from legitimate medicine, subaltern female healers, such as *conversas* were further criticized as “diseased” and potentially “diseasing” members of society for their racial difference from Old Christians. Their supposedly corrupt blood caused them to be considered a physiological threat to the health of the empire through their ability to spread their humoral corruption through reproduction or even breast feeding. Julio Caro Baroja has commented on the Spanish Inquisition’s use of medical terminology to condemn Jewish women as well as *conversas*, as both groups were thought to spread the remnants of their “Jewish disease” to their children through their corrupt blood and breast milk. Jewish and *conversa* nursemaids were considered to be public health risks because, through the act of breastfeeding, they could also spread their disease to Old Christian children (Caro Baroja 306).

Consequently, in the medical field, for example, laws were enacted to protect Old Christians from potential harm from the medical practice of subalterns beginning with a 1415 *pragmática* stating that, “no Jew, male or female, shall practice medicine amongst the Christians” (qtd. in Kate Campbell Hurd-Mead 276). This prohibition was revisited several times in the fifteenth century and in the 1501-02 “limpieza de sangre” statutes in which *conversos* and *conversas* were banned from the practice of state-authorized medicine.²³ While the demand for practitioners and the fame of university-trained *converso* healers allowed them to continue to practice, the empirical remedies

other trades, and it is difficult to determine what type of training they received; for example, if they had access to the same guilds as male empirics or if they mainly received their training through family members or other non-regulated sources. They often aided their husbands in the practice of medicine, sometimes continuing after the death of the husbands (331-37).

²³ Under the blood purity statutes, *conversos* and *moriscos* were marginalized as physiologically inferior to “purer” Old Christians because their blood was thought to be corrupted by their Jewish or Moorish ancestors. These New Christians were prohibited from holding many professions such as public office as well as medical, military, and ecclesiastic positions in order to protect Old Christians from the possible corruption (both figurative and literal) of “impure” new Christians. For more details on the Spanish obsession with blood purity and its relation to the purity of blood statutes that marginalized recent converts in many professions see Albert A. Sicoff.

of *conversas* were criticized as potentially doing more harm than help to their patients.²⁴

In the *Lozana*, the Auctor initially appears to confirm the official Spanish view of female healers. Responding to Lozana's list of medical practices, the Auctor notes:

Señora Lozana, a todo quiero callar, mas a esto de los sueños ni mirar en abusiones, no lo quiero comportar [...] También decís que hay aojados; esto quiero que os quitéis de la fantasía, porque no hay ojo malo [...] A lo que de los agüeros y de las suertes decís, digo que si tal vos miráis, que hacéis mal, vos y quien tal cree [...]. Y por eso tú debes creer en el tu Criador, que es omnipotente, y da la potencia y la virtud, y no a su criatura. (176-77)

This criticism is mainly of the supposedly heretical basis for her healing, that is, her supernatural or superstitious medicine: the Auctor ignores her other practices. This type of criticism would appear, at first glance, to mimic the view of university-trained physicians, like Delicado himself. However, he does not have the Auctor reject all of Lozana's practices: Delicado portrays his protagonist as having considerable success in the treatment of several illnesses. The Auctor is witness to Lozana's popularity when he decides to interview her patients as they enter her home in Part Three of the *La Lozana*. Among the numerous clients with whom he speaks is Vitoria, who is being treated for suffocation of the womb and Penacho, who comes to pick up a remedy for his master's hemorrhoids, both of whom are happy with Lozana's services. Upon seeing the parade of satisfied clients the Auctor jokes: "Pues voto a Dios, que no hay letrado en Valladolid que tantos cliéntulos tenga" (179). While the Auctor criticizes some of Lozana's methods, such as her use of superstitious medicine and non-Christian remedies and her treatment of illnesses that he considers suspect such as the "evil eye," he cannot deny her fame in the Pozo as evinced by her success in treating these patients and others for illnesses ranging from sexual problems to syphilis. In fact, Lozana's servant Rampín offers to give the Auctor Lozana's remedy for the treatment of syphilis, an illness about which she possesses considerable medical knowledge. Later in the text Lozana criticizes academic practitioners who claim they can cure the disease without the one proven remedy of the day, guaiacum root. She

²⁴ While the blood purity statutes prohibited *conversos* from practicing medicine, these laws were often not enforced due to the great demand for practitioners and the fame of *converso* practitioners as the best in the peninsula. They inherited this recognition from their Jewish ancestors who were regarded as some of the best doctors in the peninsula, often serving as the kings' personal doctors. In fact, Ferdinand himself used a *converso* practitioner, Lorenzo Badoç, who also helped Isabel successfully deliver Prince Juan (Roth 86). However, *conversas* did not enjoy the fame of *conversos* and were doubly marginalized as women with "inferior" blood who were not allowed to obtain a university education. For a complete discussion on the relationship between medicine, medical rhetoric, the notions of disease, and the marginalization of subaltern healers in early modern Spain, see my "Diseasing Empire" (McInnis-Domínguez 18-80).

argues: “Di que sanarás el mal francés, y te judicarán por loco del todo, que ésta es la mayor locura que uno puede decir, salvo qu’el leño salutífero” (215). The use of guaiacum root, while originally an empirical remedy, was appropriated by university-trained practitioners as one of the only remedies that could effectively treat the disease.²⁵ Delicado himself advocates the use of this remedy in his book on the subject: *El modo de adoperare el legno de India* (1529).

Dangler argues that Delicado’s approach of condemning some of Lozana’s practices while showing her to be an effective, popular healer with some real medical knowledge problematizes the determination of his view of female healers. For her, Delicado’s sometimes favorable portrayal of his female protagonist can be explained by his use of irony in the text. Dangler contends that the overall message of *La Lozana* is that female healers disease more than they heal, since Lozana’s healing practice is undermined by her other profession as a syphilitic prostitute. As a diseased prostitute Lozana should infect more people than she could cure as a healer (154-73). However, there is no evidence that Lozana actually infects anyone with her syphilis, while there are numerous allusions to her success as a healer and her popularity with her clients in the text.²⁶ Instead of both embodying the notion of this disease and spreading it to others, she helps treat its symptoms in many patients. By focusing on Lozana’s ability to cure above her capacity to disease, Delicado does not condemn his female healer but instead takes issue with the association of *conversas* as the supposed agents of disease in Spanish society.

Delicado makes this criticism apparent by contrasting Lozana’s medicine and medical theory with that of male university-trained practitioners. As university-trained practitioners, they would be considered the most legitimate and successful healers in the medical hierarchy. Lozana, conversely, as a *conversa* empiric, represents the least legitimate medical practitioner from the Spanish perspective. In the Pozo, however,

²⁵ Roger French and Jon Arrizabalaga have noted that while university-trained physicians of the sixteenth century were loath to use the remedies of lowly empirics, they had great difficulty in identifying an academic cure for the disease when it first appeared in Europe in the late-fifteenth century. They note that physicians had two primary concerns in treating syphilis: they had to treat the disease as best they could while also maintaining the “status quo,” which indicated that academic medicine was superior to that of empirics. Because of the difficulty in treating the illness, many physicians were initially reluctant to treat the disease, thereby allowing unlicensed practitioners to become virtual specialists in this illness in the first two decades of the sixteenth century through their use of natural products such as mercury, and later, guaiacum wood. The fear that unlicensed practitioners would take over the treatment of this disease led physicians to put aside their reservations in regard to empirical remedies, they used both mercury and guaiacum root to treat the illness, claiming that their greater knowledge of how the body functioned would lead to greater success for their own remedies over similar techniques used by empirics (252-57). Of course, while guaiacum root was often prescribed by physicians to treat syphilis in the sixteenth century, the disease could not be cured until the twentieth century with the discovery of penicillin.

²⁶ Besides treating the clients that visit her home, Lozana also treats numerous courtesans and clerics in the text for suffocation of the womb and sexual illnesses like those of the “courtesana” and “mayordomo” in *Mamotreto XXIII* (Sketch 23 [Delicado 108-11]).

the university-trained practitioners are admired far less than Lozana, who is esteemed for the effectiveness of her remedies.

Delicado suggests that the secret to Lozana's success lies in her ability to read and manipulate the signs of disease of her patients and convince them that they are well, a similar technique to her manipulation of the signs of her own identity and alterity in the first part of the text. She is able to win her patients' trust by convincing them that she is knowledgeable and is the best "reader" of these signs, and can then offer them the best remedy for their conditions. Lozana makes this point clear by explaining that it is her rhetorical abilities above all that win her patients' trust: "la melecina ha de estar en la lengua, y aunque no sepáis nada, habéis de fingir que sabéis y conocéis para que ganéis algo, como hago yo" (124). Furthermore, in countering the Auctor's criticism of her practices, Lozana admits that she is aware that some of her medicine is based on lies, "es que, para ganar de comer, tengo que dezir que sé mucho más que no sé," by observing her patients and putting together a story from their past encounters (178).

In Lozana's medical theory, she admits to saying more than she actually knows in order to make a living. She initially uses this deceit to earn her patients' trust by convincing them that she is knowledgeable and can cure them. After gaining their confidence, these lies allow the protagonist to "bring forth the truth" of their illnesses by creating a narrative of their disease by relating their present sickness to Lozana's past encounters with these patients or with others who had similar diseases.

Lozana's choice to use lies to best serve her patients corresponds to a popular trend in medicine during this period by both academic and empirical practitioners. Winfried Schleiner examines the case of Rodrigo de Castro (a Portuguese Jew who lived in Hamburg) and his view on the subject in his text *Medicus-Politicus* (1614), one of the only texts to theorize the importance of lying in the medical profession:

The sick, Castro says (following traditional thinking), are by nature suspicious and fearful, not only intently listening to each word of the physician, but in their concern also screening the physician's face for clues. Therefore the prudent physician (*medicus prudens*) will try to cover or conceal by simulation (*simulatione tegere*) whatever might add to the patients' fears or perturb their mind. Since (as he says with Celsus) one needs to make the sick secure, so that they suffer only physically and not mentally, it is best to withhold from them what might upset them. (9)

For Castro, lies were acceptable only if they contributed to the physical health of the patient, and not to the financial gain of the practitioner "like a medication or a condiment" (qtd. in Schleiner 11). The well-known medieval medical scholar Arnaldus of Villanova (1235-1311) takes an even more extreme view by arguing that the practitioner should lie about his patient's death to the the patient's family members if he dies quickly (31). It is this type of lie that caused the general medieval public to

mistrust practitioners. The use of deceit took on another dimension with female healers, who were not given access to university training in most countries. They had to lie to practice and often performed other professions based on changing the appearance of their patients (and thus deceiving others who would encounter them) such as the sale of make-up or the repairing of lost virginities. Lozana's manipulation of the truth thus places her in direct competition with practitioners of all types: rather than declare that she uses deceit in her practice to reinforce its illegitimacy, Lozana indicates that she is successful in manipulating the signs of health and disease –a “lie” that cures her patients. She reveals here that while her medicine may be based on a falsehood, she has considerable medical knowledge and experience with her patients, which she often uses to make accurate diagnoses.

It is this medical theory about the manipulation of the signs of disease in her patients that both contributes to Lozana's success (as evinced by her large clientele of repeat customers) and separates her from the jealous and less-successful university-trained male practitioners. They, too, use lies and deceit when dealing with patients. However, they have far less success than the protagonist, in part, because they do not share her desire to actually cure patients. Delicado exemplifies the difference between Lozana's medical philosophy and that of the academic practitioners when she is approached by a surgeon and a doctor who wish to go into business with her in the hopes of profiting from her reputation. They are unhappy that Lozana has taken away some of their clients, as the surgeon notes:

Digo que me habéis llevado de las manos más de seis personas que yo curaba que, como no les duelen las plagas, con lo que vos les habéis dicho no vienen a nosotros, y nosotros, si no duelen las heridas, metemos con que duelan y escuezgan, porque vean que sabemos algo cuando les quitamos aquel dolor. (225)

While he complains that Lozana has robbed him of six patients, he admits to causing his patients pain in order to convince them that they need his services. The physician further explains that if he and other university-trained practitioners were to actually cure their patients of their maladies like Lozana: “no tornarán los pacientes, y así es menester que huyamos de vos porque no concuerda vuestra medicación con nuestra cúpida intención” (225). In other words, if they were to cure their patients as Lozana does, these practitioners would not be able to draw out their cure for greater financial reward. While the two openly reveal that, like Lozana, they mislead their patients, she is the only one to actually cure her clients in the text.

For Dangler, this episode cannot be interpreted as casting Lozana's practice in a favorable light due to the irony that the protagonist is also a syphilitic prostitute whose medical practices can sometimes be read as allusions to this more illicit profession. Dangler does not agree with Claude Allaire's reading of this episode as a criticism of physicians of the day (164). However, Dangler does not take into account the

relationship between Lozana's medicine and Delicado's criticism of the Spanish view of the *conversa* Other as diseased and diseasing. By presenting Lozana's effective medicine in contrast to that of the greedy physician and surgeon, Delicado demonstrates the power and success of subaltern female medicine in Rome. Here, Lozana uses her ability to reinterpret the signs of disease in her patients to convince them that they are well by exploiting the bond between patient and healer in the diagnosis of the latter's ills. Conversely, the "legitimate" healers are shown to be ineffective because they simply do not cure their patients. They are not interested in reading their patients' real signs of disease; instead, they create false new "signs" of illness to drag out their cure. Rather than reflect an ironic reversal that criticizes female healers like Lozana for appearing effective while actually spreading disease, Delicado inverts the Spanish hierarchy to show how the supposedly legitimate and "healthy" practitioners are actually agents of disease while illegitimate *conversa* practitioners emerge as agents of health.

Lozana's *limpieza*

The inversion of the Spanish medical hierarchy in the Pozo and in the rest of Rome reveals Delicado's critical view of blood purity as a determining factor in the ability of healers to cure. While in Spain, Lozana's medicine would be suspect as that of a potentially "diseasing" *conversa*, but blood has no bearing on success in Rome. The relationship between Lozana's medicine and the author's problematization of ethnicity as a determining factor of social health and healing ability becomes even clearer at the end of the text when Lozana jokes about the importance of *limpieza de sangre* in the determination of who is the best healer in Rome. Lozana makes fun of this Spanish obsession when Sagueso, a vagabond, reveals that Lozana is less successful than Celedonia, another healer and prostitute like Lozana. When Celedonia's house is "visited" more than hers, the protagonist responds: "¿Sabes con qué me consuelo? Con lo que dijo Rampín, mi criado: que en dinero y en riquezas me pueden llevar, mas no en linaje ni en sangre" (200). Lozana's joking reference to her blood as her "consolation" for not being as successful as Celidonia evokes the Spanish obsession with lineage over practical ability as the "true" determining factor of one's social worth. Of course, as a *conversa*, her blood would naturally delegitimize her practice. Nevertheless, Sagueso plays along with her joke by suggesting that to determine who is best, both women must be bled to see who has the better blood: "Voto a mí que tenéis razón, mas para saberlo cierto, será menester sangrar a las dos, para ver cuál es mejor sangre" (200).

By evoking the common medical practice of bleeding patients to rid them of any corrupt blood, Sagueso jokingly refers to the Spanish obsession with blood purity as the basis for one's honor as well as the "creation" of ethnic difference. Here the author critically inverts the Spanish practice of determining blood purity to judge the best healer. The symbolism of *limpieza* is no longer associated with the Spanish notion of

religious and corporal purity (i.e. the purity of one's Christian lineage) but rather with practical success determining one's status. In Rome, the Spanish notion of legitimacy through one's bloodline does not determine one's success as a healer. Here, the Spanish signs of visible and hidden alterity and their ties to the notion of the *converso* Other as diseased are diminished by distance from the empire, replaced by ingenuity and the clever interpretation of patients' needs as the true indicators of "professional" success.

By negating blood purity as the determinant of health in Rome, Delicado concludes his criticism of the Spanish association of New Christian *conversos* as diseased. In *La Lozana*, *conversos* have agency in determining the signs of their identity, erasing the association of their bodies with both medical and social disease. They also emerge as agents of health by curing the signs of disease in others while the representatives of the Spanish notion of health –be it ethnic (Lozana's potential father-in-law) or medical (the university-trained physicians)– are portrayed as the agents of disease.

Diagnosing the Spanish State

In the *Lozana*, Delicado uses the subaltern perspective of his illicit protagonist to "diagnose" the Spanish Empire from the Diaspora. Through her multilayered manipulation of the signs of identity and alterity, sickness and health she problematizes the Spanish ideal of genealogical purity and the achievement of a "pure" Old-Christian society through the expulsion of its "corrupt" members. Similarly, Lozana's supposedly "illegitimate" medical profession allows Delicado to not only investigate new perspectives on the empire, but also to invert the imperial notions of disease and health by presenting a "diseased" woman as the voice of political health.

In the *Lozana*, Delicado shows how the protagonist's alternative medicine and corrupt blood and body empower her to challenge the Spanish view of alterity and disease in the early modern period. Lozana emerges as healthy and health-promoting despite her low place in the medical hierarchy and her status as subaltern. The protagonist's remedies and her questioning of the empire's views place her in the position of health in relation to the decadent and corrupt Spanish Empire. By inverting the Spanish notions of health and healthy practitioners, Delicado presents an alternative model of health in Rome as a critical reinterpretation of the monolithic view of the *converso* Other as a diseased and diseasing entity within the Spanish body politic.

Thus the text itself can be read not only as a psychological remedy for syphilitic sufferers, uplifting their spirits through the humor of the work, but also as a socio-political criticism of the connection between the notions of alterity as social illness and disease as its medical counterpart in this period. Both text and protagonist offer the reader counterexamples to the Spanish view of alterity and the power that these held in the diagnosis of the Spanish State as a diseased entity.

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