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**A HERITAGE RECLAIMED:  
JOHN WESLEY ON HOLISTIC HEALTH AND HEALING**  
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For: Paul M. Bassett<sup>1</sup>

John Wesley's ecclesial descendants have long evidenced some ambivalence about honoring their founder. From the beginning there was a natural tendency toward hagiography, epitomized by most of the biographies published through the nineteenth century with their triumphalist panegyrics about "Wesley the Dynamic Evangelist," "Wesley the Tireless Church Founder," "Wesley the Pious Christian," and so on. However, this praise has almost always been mixed with some uneasiness about making Wesley's precedent the standard for later Methodism. Among Methodists in North America, this uneasiness was spawned by Wesley's rebuttal of their charges of the injustice of British colonial rule. After his death, as Methodists on both sides of the Atlantic pulled away from the Anglican context that shaped Wesley's theological activity, there was a growing embarrassment about his lack of fit with the model of "theologian" assumed by their new peers and competitors.<sup>2</sup> Thus began a diminishing of Wesley's significance for later Methodist theology that was accentuated by the spread of Enlightenment optimism. The impact of these forces can be illustrated by Randolph Sinks Foster, a Methodist Episcopal bishop and former professor of theology at Drew Theological Seminary, who began a multi-volume series of *Studies in Theology* in 1891 (the centennial of Wesley's death!) with a bold claim: "We know more today than our fathers a hundred years ago. We have truer beliefs than they had." It is little wonder that Foster seldom interacts with Wesley in his series!<sup>3</sup>

The twentieth century witnessed a growing professionalization of Wesley studies that was reflected in biographical works that brought to

their investigation increasing knowledge of Wesley's context and greater realism about his contribution. While some popular legends still abound in lay circles, current historical scholarship is rarely accused of hagiography. Meanwhile, interest in Wesley's relevance for current theological issues has grown among his descendants in recent decades, as they have questioned the privileging of present knowledge over all past beliefs and practices. As David Ford has felicitously put it, this enlightenment about the Enlightenment has created a situation in which "we are free in a new way to recognize what is of value in premodernity, modernity, and postmodernity."<sup>4</sup>

Ford's description suggests that we in the traditions descended from his ministry would do well to spend some time probing anew the life and writings of our founder, to see what of can be recognized. As a sample of what this probing might reveal, I offer here a test case: a consideration of John Wesley's emphasis on holistic health and healing.

### **WESLEY'S SERIOUS INTEREST IN HEALTH AND HEALING**

I chose this test case precisely because Wesley's emphasis on health and healing is not an aspect of his story that has been consistently recalled and celebrated by his heirs. Few in Wesleyan traditions today are aware that Wesley published a collection of advice for preserving health and treating diseases called *Primitive Physick*, even though it went through twenty-three editions in Wesley's lifetime—more than anything else that he published—and stayed in print (and use!) continuously into the 1880s. Moreover, those who are aware of this collection, and have glanced at a few of his prescriptions for ailments (see the samples in Appendix A), tend to dismiss it in bemusement. This is true even of many scholars. For example, a recent book on Wesley's ethics describes *Primitive Physick* as "a collection of folklore prescriptions for various ailments ... [revealing] his reliance on testimony and a sometime credulity in belief in what the folk tradition contained," while a new historical study of Wesley characterizes the work as "a strange mix of old wives' tales and recent insights."<sup>5</sup> Such evaluations, and the larger neglect of this dimension of Wesley's work, are called into question when one recognizes the seriousness of his interest in health and healing.

#### ***Life-long Study of Medical Works***

In considering Wesley's interest in health and healing, it is helpful to recall that study of basic medicine had become part of the training of Anglican clergy candidates in the seventeenth century, since it was

common—at least in smaller villages—for priests to offer medical care as part of their overall ministry.<sup>6</sup> This helps explain why so many clergy of this period who left parish settings took up medicine as an alternative career. A good example is Wesley’s great-grandfather Bartholomew Wes(t)ley, who consulted from time to time as a physician while rector of Charmouth in Dorset, and took up this career for his full livelihood when his refusal to sign the Act of Uniformity in the early 1660s led to ejection from his pastoral charge.

Following in this tradition, we know from the diary that Wesley began at Oxford, and from other sources, of several medical treatises by Robert Boyle and others that he purchased or read between 1724 and 1732.<sup>7</sup> To take another snapshot, diary entries for 1736, when Wesley was serving as a missionary priest in Georgia, show continued reading of medical texts, including one by John Tennent listing medicinal herbs that were available on that continent.<sup>8</sup> This reading continued more sporadically throughout Wesley’s life and included consultation of the *Philosophical Transactions* of the Royal Society and the *Medical Transactions* of the Royal College of Physicians. My working list of medical works that Wesley cites or mentions over the span of his life stands at nearly one hundred items.

### ***Publication of Health and Healing Advice***

It is also important to recognize that this reading stands behind Wesley’s publication of works offering medical advice. In particular, the *Primitive Physick* was based on much more than “folk lore” and “old wive’s tales.” Wesley’s own account traces its origins to remedies transcribed from the books of Robert Boyle and John Tennent, along with “a few more from books or conversation.”<sup>9</sup> In preparation for publishing a critical edition of Wesley’s medical writings, James Donat has been seeking to identify these various literary sources of Wesley’s prescriptions in *Primitive Physick*. So far he has traced nearly a third of the remedies back to texts of medical advice, including texts by such other authors as Hermann Boerhaave, Kenelm Digby, Thomas Dover, John Huxham, Richard Mead, Lazarus Riverius, Thomas Short, Thomas Sydenham, and Thomas Willis.<sup>10</sup>

The fact that Wesley drew heavily on his reading of medical works for the original text and later updates of *Primitive Physick* suggests that, far from being a tangential or idiosyncratic concern, publication of this resource should be seen as parallel to Wesley’s fifty-volume *Christian Library*. In both cases he distilled the fruits of his broad reading for the benefit of his Methodist people and a larger public. Because his ministry was larger than a single parish, he dispensed the spiritual and medical guidance expected of his priestly office in printed form.

Just as Wesley published more than the *Christian Library* offering spiritual guidance, his medical advice reached beyond the *Primitive Physick*. He published several other works related to maintaining or restoring health, including *A Letter to a Friend Concerning Tea* (1748); *The Desideratum, or Electricity Made Plain and Useful* (1760); *Thoughts on the Sin of Onan, chiefly extracted from [Tissot]* (1767); *Advices with Respect to Health, extracted from [Tissot]* (1769); “Extract from [William] Cadogan on the Gout” (in vol. 26 of his *Works*, 1774); and *An Estimate of the Manners of Present Times* (1782).<sup>11</sup>

### ***Holistic Understanding of Salvation: Healing for Body and Soul***

While Wesley’s practice of offering medical advice was in keeping with a traditional role of clergy, his life spanned a period when the Royal College of Physicians in London was increasingly seeking to professionalize the practice of medicine by restricting the ranks of those certified to offer treatment. These efforts classed clergy with barber-surgeons, apothecaries, and various “quacks” as groups to be inhibited from further practice of medicine.<sup>12</sup> Like many in the other groups, Wesley resisted the suggestion being made that he refrain from offering medical care and advice, leaving it to those now certified by the College.<sup>13</sup> Unlike most of these others, Wesley’s motive for resisting was not to protect a source of income. His resistance was grounded instead in his understanding of the holistic salvation his movement was called to spread.

One of Wesley’s deepest theological convictions was that the mediocrity of moral life and the ineffectiveness in social impact of Christians in eighteenth-century England could be traced to an inadequate understanding of salvation assumed broadly in the church. The root of this inadequacy, and the core of Wesley’s alternative understanding, can be seen in his own most pointed definition of salvation:

By salvation I mean, not barely (according to the vulgar notion) deliverance from hell, or going to heaven, but a present deliverance from sin, a restoration of the soul to its primitive health ... the renewal of our souls after the image of God in righteousness and true holiness, in justice, mercy, and truth.<sup>14</sup>

The notion that Wesley was rejecting here reduces salvation to forgiveness of our guilt as sinners, which frees us from future condemnation. Wesley consistently encouraged his followers and his broader contemporaries to seek the benefits of *truly holistic salvation*, where God’s forgiveness of sins is interwoven with God’s gracious healing of the damages that sin has wrought in our lives.<sup>15</sup> The scope of the healing that Wesley invited all to expect is captured well in pastoral letters, like his reminder to Alexander Knox: “It will be a double blessing if you give yourself up to the Great Physician, that He may heal soul and body

together. And unquestionably this is His design. He wants to give you ... both inward and outward health.”<sup>16</sup>

While most Christians shared the conviction that God would provide full healing of body and soul at the resurrection, Wesley’s emphasis on the degree to which both dimensions of divine healing can be experienced *in the present* is less common. On the spiritual side, this became clear in his debate with the Calvinist branch of the Methodist revival, which—reflecting a characteristic stress of the Augustinian strand of Western Christianity—insisted that we can hope for only limited transformation of our fallen spiritual nature in this life.<sup>17</sup> The assumption that we should expect only limited expression in this life of God’s promised salvation of our bodies was more widespread, but it is notable that resistance to suggestions of clergy including medical care as part of their ministry in the English church during the reign of James I (1603–25) also came from the most Calvinist voices in the church. These objectors urged that labor for the souls of their parishioners, by preaching and counseling, should fill the full time of the pastor. In contrast, the more Arminian “High Church” voices, which gained in strength after 1625, elevated a model where, in addition to reverent leadership in defined times of regular worship, clergy were expected to spend a significant part of their time in good works—like medical care—among the needy in their parish.<sup>18</sup>

Wesley’s ancestors, on both the paternal and maternal side, were among those who objected to the reinstatement of the Act of Uniformity governing Anglican worship in 1662 and eventually formed dissenting congregations. While most of these dissenters were moderate to strong Calvinists, they tended to be more willing than their predecessors to make some room for offering medical care in their understanding of the pastoral task. We have already noted how this is reflected in Wesley’s paternal great-grandfather. The library of Samuel Annesley, Wesley’s maternal grandfather, also suggests a broad understanding of the pastoral office in that it contained nearly twenty volumes of medical reference works.<sup>19</sup>

Wesley’s strong commitment to this holistic conception of the pastoral office is evident in his instructions to lay assistants about their ministry among the Methodist people. As they visited the various societies, Wesley charged them to leave behind books that could provide ongoing guidance, highlighting most often two works that should be in every house: 1) his excerpt of Thomas a Kempis’s *The Imitation of Christ*, which Wesley valued as a guide to spiritual health; and 2) the *Primitive Physick*, which Wesley had prepared as a guide to physical health.<sup>20</sup> Moreover, on analogy with his own training, when one compares lists of the readings that Wesley recommended for all lay persons to the list that he assigned to those who assisted in pastoring the movement, the one notable addition

to the latter list is the study of medical works.<sup>21</sup> Wesley clearly intended for the assistants to be capable of dispensing personal advice along with the books.<sup>22</sup>

This expectation of participation in God's ministry to body and soul was not limited to the itinerant lay assistants in early Methodism. As in many other areas of the movement, Wesley developed a layered structure that included a role for local lay women and men in day-to-day ministry. In this case, the office was the "visitor of the sick," lay leaders who were expected to visit sick members in their area three times a week, to inquire into the state of their souls and their bodies, and to offer or procure advice for them in both regards.<sup>23</sup>

As all of this reflects, while he allowed that it will be complete only in the resurrected state, Wesley resisted the tendency to minimize the physical dimension of God's healing work in the present world. He longed for Christians to see that participation in God's present saving work involves nurturing not only our souls but also our bodies, and addressing both of these dimensions in reaching out to others.<sup>24</sup>

## **WESLEY'S HOLISTIC APPROACH TO HEALTH AND HEALING**

Just as Wesley's commitment to care for the body was grounded in his conviction of the holistic nature of salvation, careful consideration reveals a concern for holistic balance in his emphases about how to care for the body. The goal of this section is to sketch the broad outlines of this balance, clarifying Wesley's emphases within the assumptions and debates of his time. An initial sense of some of the dimensions to be sketched can be gained from instructions that Wesley sent to Samuel Bradburn, one of his assistants, in 1788 when Bradburn was caring for John's brother Charles, who was in declining health:

With regard to my brother, I advise you: (1) Whether he will or no, carry Dr. Whitehead to him. (2) If he cannot go out, and yet must have exercise or die, persuade him to use [the wooden horse] twice or thrice a day, and procure one for him. (3) I earnestly advise him to be electrified.<sup>25</sup>

### ***Valued both Professional and Traditional Medical Treatment***

The first thing to notice in these instructions is the insistence on Charles consulting a physician. This makes clear that Wesley's opposition to the attempt of the London College of Physicians to restrict who could offer medical care did not lead him to pose traditional and self-help methods in polar relationship to professional medical treatment. Even in

*Primitive Physick*, which was devoted to self-help advice, there are instances where Wesley makes clear that the best advice is to consult a good—and honest!—physician.<sup>26</sup>

Wesley speaks respectfully of several physicians over the years, and he said particularly positive things about John Whitehead, his personal physician in later years.<sup>27</sup> Indeed, in the context of praising Whitehead, Wesley reminded readers of his *Journal* of the exhortation in Sir. 38:1–2: “Honor the Physician, for God hath appointed him.”<sup>28</sup> But Wesley was also convinced that many physicians unnecessarily protracted the cure of patients’ bodies in order to derive the maximum fee, which is why he stressed finding an *honest* physician.<sup>29</sup>

### ***Affirmed both Divine and Medical Healing***

There is an even broader implication evident in Wesley’s instructions for Charles to be checked by a physician: John’s rejection of sole reliance upon seeking divine healing. There was some debate in Wesley’s setting over whether Christians should seek medical treatment or rely on divine healing. A long standing strand of Christian tradition viewed specific cases of pain, disease, and death as part of God’s plan for the person affected. The corollary of this assumption was that the proper response to these events was submission to God’s will, though there was room within this submission to request divine healing. In some cases, the use of “natural” remedies that God had provided in herbs, roots, and the like were also allowed, but there was generally suspicion of specially concocted remedies. With the emergence of “scientific” medicine in the seventeenth century this earlier suspicion was called into question. Indeed, in some circles there developed the opposite deistic tendency to provide purely secular accounts of the origin of disease and to commend solely medical forms of healing, viewing appeals to miraculous healing as superstitious. Most eighteenth-century British Christians sought a median between the traditional view and this polar option.<sup>30</sup>

John Wesley shared this mediating conviction. On the one hand, he was convinced of the possibility of miraculous healing, often highlighting apparent instances in his publications—in part as a rebuttal of deism.<sup>31</sup> On the other hand, he refused to pose prayer for divine healing as a preferred alternative to use of traditional or professional medical treatments. On analogy with his basic “co-operant” model of God’s work in salvation, Wesley’s characteristic advice for treating physical ailments was “as God is the sovereign disposer of all things ... I earnestly advise every one, together with all [their] other medicines, to use the medicine of medicines—prayer.”<sup>32</sup> There is no polarizing of divine and medical means of healing in this advice!<sup>33</sup>

But what about the treatment of mental or emotional ailments? Puritan thought through the seventeenth century generally considered all such disorders as rooted in spiritual causes and prescribed repentance, faith, and prayers for deliverance. As the eighteenth century unfolded, many physicians began to explain mental afflictions instead in natural terms and to focus on medical treatments. While some Anglicans embraced this change, others reacted with vigorous defense of the traditional account. A few scholars have pointed to Wesley as exemplifying this reactionary stance on the cause and cure of mental and emotional disorders.<sup>34</sup>

In assessing this claim, it is important to remember the dynamics of the early Methodist revival. From the beginning of the revival, it was common for those who were not sympathetic to equate Methodist emotionalism with lunacy, and to seek medical treatment for family members who had been brought under conviction by Methodist preaching.<sup>35</sup> Understandably, Wesley's immediate response was to defend the emotional displays as genuine expressions of religious conviction, and to argue that the only therapy which could heal those under conviction was the pardoning touch of the Great Physician.<sup>36</sup> But in the ensuing debate he was soon allowing that at least a few cases of emotional display might be signs of the "natural distemper of madness" rather than the grief of religious conviction, with the clear recognition that the former would require more than simply a sense of God's reconciling love for their cure.<sup>37</sup> This proved to be more than a passing concession.

In fact, a growing openness to natural dimensions of many emotional disorders can be traced in Wesley's thought, making it difficult for people to equate his mature position with the traditional Puritan stance. Consider, in particular, the severe disorders known in his day as "lunacy" or "raving madness." Wesley's *Journal* account of the early years of the revival presents several instances of such afflictions solely in terms of demonic causation—and divine deliverance.<sup>38</sup> After reading a book by George Cheyne in 1742, which argued that true lunacy and madness are due to natural causes and require natural cures, Wesley's *Journal* comments began to reflect more nuance.<sup>39</sup> Soon thereafter he assessed a case of raving madness to be attributable simply to a fever.<sup>40</sup> He also began to record instances where prayer for deliverance was not sufficient for curing lunacy/madness.<sup>41</sup> Conversely, while he was initially sarcastic about the value of confining anyone in "Bedlam" (i.e., Bethlehem Hospital), the first public asylum in London, he came to believe that institutional care of lunatics could be beneficial, particularly at Saint Luke's Hospital, which William Battie established in 1751 with an emphasis on providing medical treatments for mental illnesses.<sup>42</sup> In this light, it should be no surprise that, from its appearance in 1747, the *Primitive Physick* included suggested

natural cures for lunacy (see Appendix A). While Wesley continued to remind readers in his later years that some physicians considered many cases of lunacy to be diabolical in origin,<sup>43</sup> on balance it appears that he came to consider most clear cases of insanity to be natural in origin, and assumed that—in addition to prayer—they should be treated by either professional or traditional medical means.<sup>44</sup>

### ***Appreciated the Interconnection of Physical and Emotional/Spiritual Health***

The influence of George Cheyne upon Wesley’s approach to health and healing was broader than just sparking awareness of the natural dimensions of serious mental disorders. Cheyne’s writings played a major role in nurturing Wesley’s mature emphasis on the broad interconnection of physical health with emotional and spiritual health. Recognition of the importance of this connection had been central to Cheyne’s own journey. He started his career seeking to provide a “Newtonian revolution” in medicine—to explain health and disease solely in mechanical terms of the movement of fluids through the various bodily canals. After a physical and spiritual crisis (in 1705), his work shifted to stress more clearly the integrity of the human spirit and the interactive influence of body and spirit upon health.<sup>45</sup>

In 1724 Cheyne published a summary of his new approach in *An Essay of Health and Long Life*. The book offered a series of recommendations for diet, exercise, living conditions, and the like, that Cheyne contended were ideally suited for helping British citizens to preserve health. As noted earlier, Wesley read the *Essay* shortly after its publication.<sup>46</sup> The passing years convinced Wesley of the wisdom of Cheyne’s advice, so much so that when he published *Primitive Physick* in 1747 Wesley chose to conclude the Preface with an abstract of Cheyne’s recommendations in *Essay* (see Appendix B). We will explore the range of this appropriated advice a little later; the relevant point at the moment is Cheyne’s specific emphasis on the impact of the emotions upon physical health.

### **Emotional and Spiritual Dimensions of Physical Health**

Cheyne devoted Chapter VI of his *Essay* to the “passions,” the current umbrella term for emotional states that arise naturally in response to events and agents external to the self—such as joy, grief, fear, and love. Wesley’s abstract of Cheyne’s summary captures well his main points:

1. The passions have a greater influence on health than most people are aware of.
2. Violent and sudden passions dispose to, or actually throw people into, acute diseases.

3. Slow and lasting passions, such as grief and hopeless love, bring on chronical diseases.
4. Till the passion which caused the disease is calmed, medicine is applied in vain.
5. The love of God, as it is the sovereign remedy of all miseries, so in particular it effectually prevents all the bodily disorders the passions introduce, by keeping the passions themselves within due bounds. And by the unspeakable joy, and perfect calm, serenity, and tranquility it gives the mind, it becomes the most powerful of all the means of health and long life.<sup>47</sup>

One sees in this summary not only the stress that passions affect physical health but also Cheyne's refusal to reduce the passions to mere epiphenomena of physical states, reflected in his insistence that inordinate passions cannot be cured by medicine alone. Turning this around, Cheyne equally avoided a construal of the passions as mere psychological dynamics, assuming instead the integrity of their spiritual dimension; thus, his model of proper care for the passions, and thereby for physical health, necessarily included attention to one's spiritual life.

There is no better evidence that Wesley appropriated the conviction of the need for such a holistic approach to physical healing than the following sharp comment in his *Journal*:

Reflecting today on the case of a poor woman who had a continual pain in her stomach, I could not but remark the inexcusable negligence of most physicians in cases of this nature. They prescribe drug upon drug, without knowing a jot of the matter concerning the root of the disorder. And without knowing this they cannot cure, though they can murder the patient. Whence came this woman's pain? (Which she would never have told, had she never been questioned about it.) From fretting from the death of her son. And what availed medicines while that fretting continued? Why then do not all physicians consider how far bodily disorders are caused or influenced by the mind? And in those cases which are utterly out of their sphere, call in the assistance of a minister—as ministers, when they find the mind disordered by the body, call in the assistance of a physician?<sup>48</sup>

### **Physical Dimensions of Emotional and Spiritual Health**

This pointed 1759 comment also introduces an emphasis on balance in Wesley's holistic approach to health and healing. It mentions the need not only for physicians to consider possible spiritual dimensions of physical health but also for ministers to consider physical dimensions in the cause and cure of mental or spiritual disorders. Wesley did not derive this balancing note from Cheyne's *Essay of Health*. In this early work, Cheyne

limited consideration of emotional life to the passions, and he approached the passions not as disorders to be cured, but as essential mental faculties that need to be regulated. Most importantly, he insisted that this regulation “is the business, not of physick, but of virtue and religion.”<sup>49</sup> The fact that Wesley omitted this line in his abstract of Cheyne for the *Primitive Physick* may reflect his awareness that Cheyne subsequently came to emphasize the contribution of physick to certain forms of emotional well-being.

The early eighteenth century witnessed a growing interest among physicians in England in a set of disorders that they termed “nervous diseases,” which spanned the range from mild “lowness of spirits” to hysteria. In the years following publication of *Essay*, Cheyne devoted attention to these disorders, and in 1733 he published *The English Malady; or, a Treatise of Nervous Diseases of all Kinds*.<sup>50</sup> His focus in this book shifted from “passions” as mental faculties to “nerves” as the point of connection between the body and the mind or spirit. His main emphasis was that these disorders should be traced not to spiritual causes, like sorcery or demonic possession, but to physical causes—specifically, they result from defective connection between body and spirit when the nerves are clogged or atrophying. The corollary was that Cheyne assigned treatment of nervous diseases to physick rather than religion (i.e., the inverse of his stance on the passions). His own prescription for treating nervous disorders included some medicines but placed primary emphasis on diet and exercise.

Wesley appears to have read this Cheyne volume as well shortly after it was released, and to have placed a copy in the library of his school at Kingswood.<sup>51</sup> But he did not fully embrace Cheyne’s one-sided assessment of the cause and cure of nervous diseases. His own, more balanced, assessment can be best summarized by a set of “Thoughts on Nervous Disorders” that Wesley published in the *Arminian Magazine* in 1786:

When physicians meet with disorders which they do not understand, they commonly term them *nervous*; a word that ... is a good cover for learned ignorance. But these are often no natural disorder of the body, but the hand of God upon the soul, being a dull consciousness of the want of God .... It is no wonder that those who are strangers to religion should not know what to make of this; and that, consequently, all their prescriptions should be useless, seeing they quite mistake the case. But undoubtedly there are nervous disorders which are purely natural. ... One cause is the use of spiritous liquors. ... Another more extensive cause is use of tea; particularly where it is taken either in large quantities, or strong, or without cream or sugar. ... But the principle causes are, as Dr. Cadogan justly observes, indolence, intemperance, and irregular passions.<sup>52</sup>

The first thing to note in these reflections is Wesley's continuing objection to accounting for all instances of emotional dis-ease in purely natural terms. While he had come to accept the physical dimension of serious cases, he remained convinced that many milder instances were authentic responses to spiritual realities. As he put it ten years earlier: "We know there are such things as nervous disorders. But we know likewise that what is commonly called *nervous lowness* is a secret reproof from God, a kind of consciousness that we are not ... as God would have us to be, we are unhinged from our proper centre."<sup>53</sup> Because the cause of such disorders was not purely natural, Wesley insisted that medical treatment alone would not be sufficient to restore well-being in these cases. Their healing also requires the touch of the Great Physician.<sup>54</sup>

But it is also crucial to note Wesley's mature recognition that there *are* physical causes or contributors to many instances of emotional or spiritual dis-ease. This was a particularly important concession in light of his emphasis on a sense of assurance and joy as authentic Christian responses to God's grace. While Wesley never backed away from this standard as the ideal, he came to stress as well in pastoral sermons the potential impact of physical realities on our spiritual or emotional state. In particular, he reminded his followers that spiritual heaviness should not always be attributed to spiritual causes; it often reflects instead the impact of bodily disorders, acute diseases, calamities, poverty, and the like.<sup>55</sup>

The creative tension between these two tendencies is reflected in the balance of Wesley's advice about dealing with nervous disorders.<sup>56</sup> He was ever ready to affirm the value of prayer. But he was also quick to caution against the assumption that prayer alone will cure every type of nervous disorder. As he once put it, "faith does not overturn the course of nature. Natural causes still produce natural effects. Faith no more hinders the *sinking of the Spirits* (as it is called) in a hysteric illness than the rising of the pulse in a fever."<sup>57</sup> Thus we must address physical factors as well in seeking emotional and spiritual health. Like Cadogan and Cheyne, Wesley's main emphasis in this regard was on proper diet, sufficient exercise, and appropriate rest, though he also advised electrifying (see Appendix A, #502)—a topic to which we shall return.

### ***Emphasized Preventative Care/Promoting Well-Being: The "Cool Regimen"***

This emphasis on diet, exercise, and rest needs to be appreciated in its historical context. Through the nineteenth and twentieth centuries, medical care in the North Atlantic context came to be equated largely with surgical interventions and administered medications. Against this backdrop, the

recent emphasis on diet and exercise for promoting wellness, which could appear to be a modern insight, is better seen as a recovered balance. From early medieval times, Western approaches to health care reflected a distinction between 1) administering therapies to the sick, and 2) counseling people how to live in accordance with nature by proper diet and exercise, both to restore health and to retain it. The first concern was typically associated with the term “medicine,” while the second was more commonly associated with “physic[k]” through the early modern period. These concerns were often the focus of different practitioners, and frequently posed against one another as alternatives. At their best, they were seen as complimentary.<sup>58</sup> The dramatic explosion in new knowledge and skills related to “medicine” in the past two centuries tended for some time to eclipse the concern for “physick.” The recent emphasis on wellness and preventative medicine is a recovery from this eclipse.

Eighteenth-century Britain bears the marks of a transition stage in these developments. While those most involved in promoting “scientific medicine” emphasized mainly surgical and chemical therapies, popular health-advice manuals continued to devote attention to lifestyle advice for promoting health—the writings of Cheyne are a prime example. This made it natural for Wesley to include an abstract of Cheyne’s advice for retaining health in the preface to his collection of medical therapies. At the same time, his title for the collection shows that the traditional distinction between “medicine” and “physick” was breaking down. Perhaps because the term “medicine” was increasingly displacing “physick,” Wesley chose to label his collection of *primitive* therapies a book of *physick*.<sup>59</sup>

His apparent failure to appreciate the traditional distinctive meaning of “physick” should not suggest a lack of appreciation for the range of the traditional concern of physick. A long tradition assigned to physick the six “non-naturals” in Galenic medicine. These were items that, while not constitutive parts of our bodily nature, have a profound impact upon bodily health—namely: 1) air, 2) food and drink, 3) motion and rest, 4) sleeping and waking, 5) retentions and evacuations, and 6) passions of the soul.<sup>60</sup> A quick check of Wesley’s abstract of Cheyne’s *Essay of Health* (Appendix B) will confirm that each of these items is addressed.<sup>61</sup>

What might be less clear is that there is a distinctive eighteenth-century British stamp to the advice given on several items. This approach came to be known as the “cool regimen,” and gained near consensus status in eighteenth-century British health advice manuals. The basic assumption of this regimen was that the key to promoting health was to harden the body by exercise and moderate diet, and to bring it into harmony with its environment. Since the environment in England was cool, this meant that it was important to get plenty of fresh cool air, drink plenty of cool water, take cold baths, favor cool vegetables in one’s diet, and so on.<sup>62</sup>

A brief survey of Wesley's health advice can demonstrate his embrace of this "cool regimen."<sup>63</sup>

### **Proper Diet, stressing "Cool" Vegetables and Water**

The longest section of Cheyne's advice in *Essay of Health* focused on issues of diet (cf. Appendix B, §II). The overall tone of his advice is a call for temperance, avoiding in particular overly spicy dishes and excessive consumption of meat, and favoring the drinking of water. In essence, as Cheyne admitted later, he was advising his patients and readers—most of whom were from the upper class—to eat the diet and embrace the lifestyle of the middle to lower-middle classes. In repeating Cheyne's advice, Wesley likely reinforced the wisdom of this diet among those lower classes.<sup>64</sup>

Cheyne actually held up as ideal a vegetarian diet, as well as total abstinence from alcohol. Wesley committed himself to this ideal diet on two different occasions, though in each case he returned to moderate consumption of meat and wine after a couple of years.<sup>65</sup> His own advice to readers in later years echoed Cheyne's less idealistic goal of temperance, even now protesting suggestions of abstinence from wine.<sup>66</sup> But he clearly understood this moderate approach to remain within the guidelines of a "soft, cool, open diet."<sup>67</sup>

### **Regular Exercise, particularly in the Fresh Air**

The second longest section of Cheyne's advice in *Essay of Health* focused on exercise (cf. Appendix B, §IV). His basic theme was that a due degree of regular exercise is indispensably necessary for health and long life. He also suggested that the value of exercise is enhanced when it is done outdoors in the fresh air.<sup>68</sup> The same points emerge frequently in Wesley's advice to his followers. Consider a few examples:

Exercise, especially as the spring comes on, will be of greater service to your health than an hundred medicines.<sup>69</sup>

Not that any one particular kind of exercise is necessary for all persons. Indeed Dr. Cheyne supposes the natural exercise of walking, where the strength suffices, to be preferable to any other. But it should be used every day, not less than an hour before dinner, or after supper. Where the strength will not admit of this, the want of it may be supplied by riding two hours at least on horseback every day before dinner or supper. If neither of these can be borne, the end of both may be answered by riding in a carriage. ... Those who cannot afford this, may use a chamber-horse, which will suit every constitution.<sup>70</sup>

Every day of your life take at least an hour's exercise, between breakfast and dinner. If you will, take another hour before supper, or before you sleep. If you can, take it in the open air; otherwise, in the house. If you cannot ride or walk abroad, use within a dumb-bell or a wooden horse. If you have not

strength to do this for an hour at a time, do it at twice or thrice. Let nothing hinder you. Your life is at stake. Make everything yield to this.<sup>71</sup>

These quotations leave no doubt as to the importance Wesley placed on exercise. They may raise some questions about the types of exercise commended. The first point to note is that Cheyne was not the only one to favor walking. When Wesley was leaving home for school, his father distilled his health advice into one maxim: “Fail not, on any account whatever, to walk an hour every day.”<sup>72</sup> Moving to a second point, riding was broadly recommended in Wesley’s day, even referred to as “Dr. Horse,” due to the belief that the bouncing action helped to clear the lungs, improve circulation, and raise a healthy sweat.<sup>73</sup> The potential loss of this benefit in bad weather, or because of advancing age, is what led to development of an aerobic alternative that could be used indoors—what Wesley refers to as a “wooden horse” or “chamber horse.” Actually, a “wooden horse” was the inexpensive version, “a double plank nine or ten feet long, properly placed upon two tressels.”<sup>74</sup> The “chamber horse” was a permanent piece of furniture, a chair with high arms on both sides and a seat that would rise on springs, allowing the person to bounce up and down. Wesley attributed this design to Bishop George Berkeley.<sup>75</sup> He purchased one for his London house in his later years, and as he neared death he encouraged his niece Sarah to borrow it and use it at least a half-hour daily.<sup>76</sup> This was also, of course, the equipment that John charged Samuel Bradburn to procure for Charles Wesley (Sarah’s father) when he was in declining health. The other exercise equipment Wesley mentions is a “dumb-bell.” This was not the set of weights we think of today, but a form of upper-body aerobic exercise developed in the seventeenth century. A rope was run into the attic of a house, where it wrapped around a cylinder with weights attached. As one pulled down on the rope, unwrapping it and spinning the cylinder, the weights gave the cylinder sufficient momentum to wrap the rope back up in the opposite direction (like a yo-yo), ready to be pulled down again.<sup>77</sup>

### **Appropriate Rest and Sleep**

When Cheyne makes a point of suggesting a standard of seven to eight hours of sleep a night (cf. Appendix B, §III), his concern was that people may be sleeping *too much*, not too little. This reveals again that the lower classes were not his main audience. They are the ones least likely to have the luxury of sleeping late! But there are persons in every economic class who withdraw from life in depression, often lingering in bed, and these can be seen as the ultimate focus of Cheyne’s concern.

Wesley made this connection explicit in his own health advice about sleep. He actually set a standard shorter than Cheyne, and explained it by direct reference to depression:

I would allow between six and seven hours [of sleep], at an average, to a healthy man; or an hour more, between seven and eight hours, to an unhealthy man. And I do not remember that in threescore years I have known either man or woman who laid longer in bed than this, (whether they slept or no), but in some years they complained of lowness of spirits. The plain reason of which seems to be, while we sleep all the springs of nature are unbent. And if we sleep longer than is sufficient, they are relaxed more than is sufficient, and of course grow weaker and weaker.<sup>78</sup>

In a related sermon he charged that sleeping too much was not only the chief cause of all nervous diseases but also the chief cause for the recent increase in nervous disorders in Britain.<sup>79</sup>

### **Cold-bathing and Cleanliness**

One other theme worth highlighting in Cheyne's advice in *Essay of Health* is his call for greater cleanliness and his specific advocacy of cold-bathing (cf. Appendix B, §I.3, §IV.5, §IV.10). In both of these areas Wesley not only echoed, but amplified his mentor. Wesley's emphasis on cleanliness is legendary, drawing the attention of all who study the topic. Indeed, he is often credited with inventing the proverb "cleanliness is next to godliness."<sup>80</sup> While he definitely did not invent this rabbinical proverb, he did cite it often to his people as he exhorted them to seek diligently to be clean in their person, clothing, and housing.<sup>81</sup> The health benefits of this advice are clear today, though Wesley was likely concerned as much, if not more, with the public perception of Methodists.

By contrast, Wesley's emphasis on cold-bathing was primarily for the assumed health benefits, with any sanitary effect or contribution to tidiness being an incidental extra. While Cheyne focused such health benefits in terms of hardening and acclimating the person, Wesley became convinced that cold-bathing could not only cure several disorders, it could also inhibit many hereditary diseases.<sup>82</sup> Because he believed these benefits were underappreciated, he advocated cold-bathing as a suggested remedy for many specific disorders in *Primitive Physick* and appended to the collection a list of the various disorders supposedly cured or prevented.<sup>83</sup> His major source for this list was a book by two physicians, John Floyer and Edward Baynard.<sup>84</sup> But his appropriation has been credited, much more than their book, with the popularity of cold-water therapy by the end of the eighteenth century.<sup>85</sup>

### *Favored God's "Natural" Cures over Emerging "Chemical" Medicines*

Wesley's interest in cold-bathing straddled the line between preventative regimen and prescribed therapy for healing specific disorders. When one begins to focus on the collection of prescribed remedies in *Primitive Physick*, the characteristic that stands out most is his strong preference for simple, natural remedies. By one count, Wesley refers to 225 distinct treatments in his prescriptions, of which 184 are made from plants, 17 are derived from animals, and 24 are minerals.<sup>86</sup> While one could quibble about the details of this count, Wesley makes clear in his preface that he is giving preference to plants and roots over all "chemical, or exotic, or compound medicine."<sup>87</sup> In this preference he was swimming against the stream of emerging professional medicine, as well as the current practice of many apothecaries.<sup>88</sup>

But he was not swimming alone. For example, on the preference for simple medicines over compound, Wesley cited the authority of Hermann Boerhaave.<sup>89</sup> He could as easily have cited Robert Boyle, for in his early Oxford years he read Boyle's discourse touting the advantages of simple medicines.<sup>90</sup> The reasons Boyle offers are largely "scientific," stressing how simple medicines make it easier for medical observers to determine which ones have the desired effect or undesired side-effect. He also mentions that they are easier to procure and use. This final benefit is what most motivated Boyle to publish his collection of simple remedies, in hopes of improving self-care among the poor.<sup>91</sup> Wesley appropriated several of Boyle's simple remedies for *Primitive Physick* because he shared the same concern. As he explained in a 1755 postscript to the original Preface, his aim in making his collection was "to set down cheap, safe, and easy medicines; easy to be known, easy to be procured, and easy to be applied by plain, unlettered men."<sup>92</sup>

If this explains Wesley's preference for simple medicines, what was his objection to exotic cures—which are often simple in nature? For many in his setting, the objection reflected the continuing influence of a traditional notion that the diseases native to a country were best cured by remedies to be found in that country.<sup>93</sup> This may have influenced Wesley to consult the health guide by Tennent when he was in Georgia. But Wesley did not seem to assume that cures were strictly geographically specific. For example, while he chastised those who treated it as a panacea for all fevers, he readily recommended "Peruvian bark" to his British readers for certain ailments (cf. Appendix A, #211).<sup>94</sup> But he made sure to include other native treatments as well, as more accessible alternatives. It appears that his main objection to an emphasis on exotic cures was that their foreign

origin again imposed limits on their availability, affordability, and familiarity among the poor and uneducated.<sup>95</sup>

This leaves the question of why Wesley favored natural organic cures over their purified chemical ingredients. The issues of availability and cost surely played a strong role again—roots might be dug in the forest for free, while chemicals must be purchased from the apothecary. But in his Preface to the *Primitive Physick*, Wesley hints at two other theological assumptions that reinforced this practical concern. The first is his Anglican-bred primitivism. Just as Anglican apologists assumed that Christian life and doctrine were purest at the origin of the Christian church, and sought to emulate these times, Wesley privileges the primitive origins of physick and praises the native Americans for most closely preserving the pristine practice.<sup>96</sup> Closely related to this is the second apparent assumption, which concerns theodicy. Wesley refers to the “Author of nature,” who teaches humanity the medicinal value of plants after our sin had introduced sickness and death into creation.<sup>97</sup> This calls to mind Sir. 38:4 “The Lord hath created medicines out of the earth.” It also echoes Wesley’s frequent insistence that God would not have allowed the potential damages of human sin if God had not already prepared gracious ways to heal these damages.<sup>98</sup> These connections suggest that Wesley may have viewed the modern privileging of chemical medicines over plants as a failure to trust in God’s long-standing provisions for dealing with the effects of sin.

### ***Explored God’s Most Ubiquitous Natural Cure – Electricity!***

This possibility has to be balanced by the recognition that, in the late 1750s, Wesley became an enthusiastic supporter of exploring the most recent potential alternative to traditional therapies— electrical shock.<sup>99</sup> He read the groundbreaking books describing electricity and its potential uses as they were published.<sup>100</sup> Moved in particular by the claims of Richard Lovett about the healing benefits of electricity, he procured in 1756 an “electric machine” that delivered very low-voltage shocks through a probe and began to test its effects for a range of disorders on himself and others. His confidence in the positive results led him to procure other machines and to publicize this near “panacea.”<sup>101</sup> Along with inserting “electrify” among his suggestions for several disorders in *Primitive Physick*, starting with the 8th edition in 1759, he added to his appended summary of benefits from cold-bathing a similar summary for electrifying. A year later he published *The Desideratum: Or, Electricity made plain and useful* to defend the healing benefits of electrification against skeptics and scoffers in the medical profession.<sup>102</sup>

How do we account for Wesley’s enthusiasm about electrical shock therapy? By his own admission, the evidence of its effectiveness was

often ambiguous. I suggest that two other factors intensified his interest. First, it could be considered part of God's creational provision, like other "natural" cures. Indeed, in the opening of the *Desideratum* Wesley speaks of electricity as the "soul of the universe," the created power permeating all other things.<sup>103</sup> Second, electric shock therapy (as Wesley was practicing it) shared two important characteristics of cold-water bathing, his other favored cure—both were potentially ubiquitous and free.

### ***Extended Care to the Whole Community***

In the midst of extolling the promise of electrical treatment for health disorders, Wesley noted Richard Lovett's suggestion that this method can only be perfected if it is "administered and applied by the gentlemen of the faculty." His response was sharp:

Nay, then ... all my hopes are at an end. For when will it be administered and applied by them? ... Not till the gentlemen of the faculty have more regard to the interest of their neighbours than their own; at least, not till there are no apothecaries in the land, or till physicians are independent of them.<sup>104</sup>

This passage is reminiscent of Wesley's negative depiction of the recent professionalizing of health care in the preface to *Primitive Physick*:

Physicians now began to be had in admiration, as persons who were something more than human. And profit attended their employ, as well as honour; so that they had now two weighty reasons for keeping the bulk of [humanity] at a distance, that they might not pry into the mysteries of the profession. ... Those who understood only how to restore the sick to health, they branded with the name of empirics. They introduced into practice abundance of compound medicines, consisting of so many ingredients, that it was scarce possible for common people to know which it was that wrought the cure; abundance of exotics, neither the nature nor names of which their own countrymen understood; of chemicals, such as they neither had skill, nor fortune, nor time, to prepare; yea, and of dangerous ones, such as they could not use, without hazarding life, but by the advice of a physician.<sup>105</sup>

There is surely room to debate the accuracy or appropriateness of Wesley's suggestions about the actual motivations of apothecaries and physicians in his day.<sup>106</sup> But there is little doubt that the moves to professionalize medical care in Britain in the eighteenth century served for some time to increase the disparity of access between the rich and the poor, and between those in the major cities and those in the scattered villages.<sup>107</sup> I suggest that the passion reflected in the Wesleyan quotations was aimed less at physicians and apothecaries per se than at this social disparity.

Wesley believed that, just as God's mercy is over *all* God's creatures, our works of mercy—for both body and soul—should be offered to all.

Early in the Methodist revival, as his ministry brought him into daily contact with the lower classes, Wesley set up the first free public dispensary in London. As he described this decision later:

I was still in pain for many of the poor that were sick: there was so great expense, and so little profit. ... I saw the poor people pining away, and several families ruined, and that without remedy. At length I thought of a kind of desperate expedient. "I will prepare, and give them physic myself." ... I took into my assistance an apothecary, and an experienced surgeon; resolving at the same time not to go out of my depth, but to leave all difficult and complicated cases to such physicians as the patients should choose. I gave notice of this to the society; telling them that all who were ill of *chronical* distempers (for I did not care to venture upon *acute*) might, if they pleased, come to me at such a time; and I would give them the best advice I could, and the best medicines I had.<sup>108</sup>

Many of the poor did come to this clinic, both those who were part of the Methodist society and those who were not. Wesley was pleased with the results that he observed, though he noted that the most common obstacle to cures was that while they might take their medicine regularly, people were less likely to follow the regimen he advised.<sup>109</sup> Without this holistic care, they were less likely to regain full health.

Within a few years Wesley found the expenses of running this clinic too great for his limited resources and closed it. This decision is best seen not as a retreat from his concern to provide "physic for the poor" but as a refocusing of this effort. By then he had published the *Primitive Physick* and was distributing it at little or no cost across the English countryside. In this way he was drawing upon his gifts, and the resources of his movement, to offer seasoned advice on medicine and regimen not only to the poor in London but also to the range of persons in many cities and villages in the land. In short, he was extending his concern for holistic health and healing to the whole community.

## **SOME INSIGHTS ABOUT "HONORING A HERITAGE"**

There are many more details that could be offered about Wesley's concern for health and healing; however, the presentation here should be sufficient to reflect on insights that this test case sheds upon the question of how present descendants of Wesley's ministry can most appropriately honor the heritage that he bequeathed to us.

The first point that I hope the preceding discussion made clear is the importance, when evaluating any aspect of Wesley's thought and practice,

of approaching it with an awareness of Wesley's cultural and historical context. Without this awareness something like his emphasis on cold-bathing, for example, can appear purely idiosyncratic. But when one is aware that the "cool regimen" was a broadly shared model among health manuals of the day, this emphasis is less like to be taken as a sign of his "credulity for folk tradition."<sup>110</sup> Likewise, Wesley's pointed comments about physicians are less likely to be taken as implying his disdain for the profession when the socio-economic impact of the new efforts in professionalizing medical care are appreciated.

It is also important that this contextual evaluation be comparative in its own setting. A good example is Wesley's suggestion of bleeding for certain disorders, such as fever. Readers who are aware of the role of bleeding in traditional Galenic medicine will likely take Wesley as characteristic of his age in this advice. But a careful comparative study will show that Wesley recommended bleeding (and related practices of enemas and blisters) far less often than did most standard medical texts of his time.<sup>111</sup> This is one of the places where his *Primitive Physick* was actually more on the leading edge of changes in medical care.

The call for contextual evaluation is not an attempt to exempt Wesley's teachings or practice from criticism, just from anachronistic criticism. There will still be many areas where we can raise questions about the adequacy of his stance or the precedent he sets. As one example, while I appreciate the economic reasons for Wesley's defending "natural" remedies over "chemical" remedies, his implied claim that the human attempt to extract and purify the chemical medicines represents a lack of gratitude for and trust in God's provision is not convincing. Among other things, this suggestion stands at odds with Wesley's general emphasis elsewhere on our human duty to *co-operate* in God's providential care for creation.

To illustrate some other appropriate questions that we might raise to Wesley's precedent, consider the prescription he offers for venereal disease (Lues Venerea):

467. Take an ounce of quicksilver every morning, and a spoonful of aqua sulphurata in a glass of water, at five in the afternoon. I have known a person cured by this, when supposed to be at the point of death, who had been infected by a foul nurse, before she was a year old.

»»I insert this for the sake of such innocent sufferers.<sup>112</sup>

While we would be tempted today to begin with questions about the wisdom of prescribing a poison (mercury) as a medicine, this was commonly prescribed in Wesley's day and he was actually aware of its dangers, rarely prescribing it.<sup>113</sup> The more appropriate questions begin when we

note that Wesley did not even include a treatment for venereal disease in *Primitive Physick* initially and that, when he added this one in the 5th edition (1755), it was with the qualifier that he was inserting it for the sake of “innocent sufferers.” This suggests first that Wesley may not be the best guide for incorporating issues of human sexuality into a truly holistic model of health and healing. More importantly, in this case Wesley seems to have forgotten a truth that he drove home to a correspondent who had protested that he did not “deserve” good health: “Does [God] give us no more blessings than we deserve ... Not so; but mercy rejoices over judgement! Therefore expect from Him, not what you deserve, but what you want—health of soul and health of body.”<sup>114</sup> Surely those who minister in the name of the God whose “mercy is over all his works” cannot restrict their care only to innocent sufferers!

We do not truly “honor our heritage” if we do not challenge the adequacy of Wesley’s precedents. But we equally fail in this task if we allow awareness of the limits of Wesley’s thought and practice to distract us from seeking to embody faithfully today his valuable insights into the holistic scope of salvation and holistic means to health and healing.<sup>115</sup> The last point that I would make is that simple repetition is not a sufficient model for this embodiment. Just as Wesley had a context, so do we, and our context differs from his on many counts. This means that our goal must be a *dynamic* continuity. For example, we can affirm his insight about the importance of regimen, making this a focus of our lives and ministries, while recognizing the inadequacy of the “cold regimen.” Likewise, as we seek to honor the precedent his concern to provide “physick for the poor,” we will surely need to consider alternatives beyond simply publishing an up-to-date self-care health manual. While our responses might differ from those of Wesley, we can only hope that our goal will be the same—to realize as fully as possible in the present the healing of body and soul that God longs to provide to all!

**Appendix A:**  
**Selected Remedies from *Primitive Physick* (1791)**

**For an Ague** [i.e., intermittent fever and chills]

3. Go into the Cold-Bath just before the cold fit.
  - Nothing tends more to prolong an Ague, than indulging a lazy indolent disposition. The patient ought therefore between the fits to take as much exercise as he can bear; and to use a light diet, and for common drink, Lemonade is the most proper.
- When all other means fail, give blue Vitriol, from one grain to two grains, in the absence of the fit; and repeat it three or four times in twenty-four hours.
4. Or, take a handful of Groundsell, shred it small, put it into a paper-bag, four inches square, pricking that side which is to be next the skin full of holes. Cover this with a thin linen, and wear it on the pit of the stomach, renewing it two hours before the fit. Tried.
5. Or, apply to the stomach a large onion slit.
6. Or, melt two-penny worth of Frankincense, spread it on linen, grate nutmeg upon it, cover it with linen, and hang this bag on the pit of the stomach. I have never yet known it to fail. ...
9. Or, make six middling pills of cobwebs. Take one a little before the cold fit, two a little before the next fit (suppose the next day), the other three, if needs be, a little before the third fit. This seldom fails. Or, put a tea-spoonful of salt of tartar into a large glass of spring water, and drink it by little and little. Repeat the same dose the next two days, before the time of the fit.

**The Apoplexy** [i.e., a seizure, or stroke-like paralysis]

35. To prevent, use the cold-bath, and drink only cold water.
36. In the fit, put a handful of salt into a pint of cold water, and if possible, pour it down the throat of the patient. He will quickly come to himself. So will one who seems dead by a fall. But send for a good physician immediately.

**The Asthma**

41. Take a pint of cold water every morning washing the head therein immediately after, and using the cold bath once a fortnight.

42. Or, cut an ounce of stick Liquorice into slices. Steep this in a quart of water, for and twenty hours, and use it, when you are worse than usual, as common drink. I have know this give much ease.
43. Or, half a pint of Tar-Water, twice a day.
44. Or, life a fortnight on boiled Carrots only. It seldom fails.
45. Or, take an ounce of Quicksilver every morning, and a spoonful of Aqua Sulphurata, or fifteen drops of Elixer of Vitriol, in a large glass of spring-water at five in the evening. This has cured an inveterate asthma.

### **A Cough**

211. Every cough is a dry cough at first. As long as it continues so, it may be cured by chewing immediately after you cough, the quantity of pepper-corn of Peruvian bark. Swallow your spittle as long as it is bitter, and then spit out the wood. If you cough again, do this again. It very seldom fails to cure any dry cough. I earnestly desire ever one who has any regard for his health to try this within twenty-four hours, after he first perceives a cough.
212. Or, drink a pint of cold water lying down in bed. Tried.
213. Or, make a hole through a lemon and fill it with honey. Roast it, and catch the juice. Take a tea-spoonful of this frequently. Tried

### **Deafness**

237. Be electrified through the ear. Tried.
238. Or, use the cold bath.
239. Or, put a little salt into the ear.
240. Or, drop into it a tea-spoonful of salt water.
241. Or, three or four drops of onion-juice at lying down, and stop it with a little wool.

### **Extreme Fat**

330. Use a total vegetable diet. I know one who was entirely cured of this, by living a year thus: she breakfasted and supped on milk and water (with bread) and dined on turnips, carrots, or other roots, drinking water.

### **A Fever**

(In the beginning of any fever, if the stomach is uneasy, vomit; if the bowels, purge: if the pulse be hard, full or strong, bleed)

332. Drink a pint or two of cold water lying down in bed: I never knew it do hurt.

### **The Head-Ache**

389. Rub the head for a quarter of an hour. Tried.  
390. Or be electrified. Tried.  
391. Or, apply to each temple the thin yellow rind of a lemon, newly pared off.

### **The Iliac [Ileac] Passion [i.e., obstructed bowel]**

433. Apply warm flannels soaked in spirits of wine.  
434. Or, hold a live puppy constantly on the belly. (Dr. Sydenham.)

### **For one seemingly killed with Lightning, a Damp, or suffocated**

464. Plunge him immediately into cold water.  
465. Or, blow strongly with bellows down his throat. This may recover a person seemingly drowned. It is still better, if a strong man blows into his mouth.

### **Lunacy**

467. Give decoction of agrimony four times a day.  
468. Or, rub the head several times a day with vinegar, in which ground-ivy leaves have been infused.  
469. Or, take daily an ounce of distilled vinegar.  
470. Or, boil juice of ground-ivy with sweet oil and white wine into an ointment. Shave the head, anoint it therewith, and change it in warm every other day for three weeks. Bruise also the leaves and bind them on the head, and give three spoonfuls of the juice warm every morning. This generally cures melancholy. The juice alone, taken twice a day, will cure.  
471. Or, electrify. Tried.

### **[Lunacy:] Raging Madness**

472. Apply to the head, cloths dipped in cold water.  
473. Or, set the patient with his head under a great water-fall, as long as his strength will bear; or pour water on his head out of a tea-kettle.  
474. Or, let him eat nothing but apples for a month.  
475. Or, nothing but bread and milk. Tried.

### **The Measles**

- Immediately consult an honest Physician.  
481. Drink only thin water-gruel, or milk and water, the more the better; or toast and water.

482. If the cough be very troublesome, take frequently a spoonful of barley-water sweetened with oil of sweet almonds newly drawn, mixed with syrup of maiden-hair.

### **Nervous Disorders**

501. When the nerves perform their office too languidly, a good air is the first requisite. The patient also should rise early, and as soon as the dew is off the ground, walk. Let his breakfast be Mother of Thyme tea, gathered in June, using half as much as we do of common tea. When the nerves are too sensible, let the person breathe a proper air. Let him eat veal, chickens, or mutton. Vegetables should be eat sparingly; the most innocent is the French bean; and the best root, the turnip. Wine should be avoided carefully, so should all sauces. Sometimes he may breakfast upon a quarter of an ounce of the poser of Valerian root infused in hot water, to which he may add cream and sugar. Tea is not proper. When the person finds an uncommon oppression, let him take a large spoonful of the tincture of Valerian root.

502. But I am firmly persuaded, there is no remedy in nature, for nervous disorders of every kind, comparable to the proper and constant use of the electric machine.

### **To cure the Tooth-Ache**

714. Be electrified through the teeth. Tried.

715. Or, apply to the aching tooth an artificial magnet.

716. Or, rub the cheek a quarter of an hour.

717. Or, lay roasted parings of turnips as hot as may be behind the ear.

**Appendix B**  
**Preface of *Primitive Physick*, §16, *Works* (Jackson) 14:314–15**

For the sake of those who desire, through the blessing of God, to retain the health which they have recovered, I have added a few plain, easy rules, chiefly transcribed from Dr. Cheyne:

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- I. 1. The air we breathe is of great consequence to our health. Those who have been long abroad in easterly or northerly winds should drink some thin and warm liquor going to bed, or a draught of toast and water.
2. Tender people should have those who lie with them, or are much about them, sound, sweet, and healthy.
3. Every one that would preserve health should be as clean and sweet as possible in their houses, clothes, and furniture.
- II. 1. The great rule of eating and drinking is, to suit the quality and quantity of the food to the strength of our digestion; to take always such a sort and such a measure of food as sits light and easy to the stomach.
2. All pickled, or smoked, or salted food, and all high-seasoned, is unwholesome.
3. Nothing conduces more to health than abstinence and plain food, with due labour.
4. For studious persons, about eight ounces of animal food, and twelve of vegetable, in twenty-four hours, is sufficient.
5. Water is the wholesomest of all drinks; quickens the appetite, and strengthens the digestion most.
6. Strong, and more especially spirituous, liquors are a certain, though slow, poison.
7. Experience shows there is very seldom any danger in leaving them off all at once.
8. Strong liquors do not prevent the mischiefs of a surfeit, nor carry it off, so safely as water.
9. Malt liquors (except clear small beer, or small ale of due age) are exceeding hurtful to tender persons.
10. Coffee and tea are extremely hurtful to persons who have weak nerves.
- III.1. Tender persons should eat very light suppers, and that two or three hours before going to bed.
2. They ought constantly to go to bed about nine, and rise at four or five.
- IV.1. A due degree of exercise is indispensably necessary to health and long life.
2. Walking is the best exercise for those who are able to bear it; riding for those who are not. The open air, when the weather is fair, contributes much to the benefit of exercise.

3. We may strengthen any weak part of the body by constant exercise. Thus, the lungs may be strengthened by loud speaking, or walking up an easy ascent; the digestion and the nerves, by riding; the arms and hams, by strongly rubbing them daily.
  4. The studious ought to have stated times for exercise, at least two or three hours a day: The one half of this before dinner; the other, before going to bed.
  5. They should frequently shave, and frequently wash their feet.
  6. Those who read or write much should learn to do it standing; otherwise it will impair their health.
  7. The fewer clothes any one uses, by day or night, the hardier he will be.
  8. Exercise, First, should be always on an empty stomach: Secondly, should never be continued to weariness: Thirdly, after it, we should take care to cool by degrees; otherwise we shall catch cold.
  9. The flesh-brush is a most useful exercise, especially to strengthen any part that is weak.
  10. Cold bathing is of great advantage to health. It prevents abundance of diseases. It promotes perspiration, helps the circulation of the blood, and prevents the danger of catching cold. Tender people should pour water upon the head before they go in, and walk swiftly. To jump in with the head foremost is too great a shock to nature.
- V. 1. Costiveness cannot long consist with health. Therefore care should be taken to remove it at the beginning; and when it is removed, to prevent its return, by soft, cool, open diet.
2. Obstructed perspiration (vulgarly called catching cold) is one great source of diseases. Whenever there appears the least sign of this, let it be removed by gentle sweats.
- VI. 1. The passions have a greater influence on health than most people are aware of.
2. All violent and sudden passions dispose to, or actually throw people into, acute diseases.
  3. The slow and lasting passions, such as grief and hopeless love, bring on chronical diseases.
  4. Till the passion which caused the disease is calmed, medicine is applied in vain.
  5. The love of God, as it is the sovereign remedy of all miseries, so in particular it effectually prevents all the bodily disorders the passions introduce, by keeping the passions themselves within due bounds. And by the unspeakable joy, and perfect calm, serenity, and tranquillity it gives the mind, it becomes the most powerful of all the means of health and long life.

## ENDNOTES

1. This essay is dedicated to Paul M. Bassett on the occasion of his retirement as Professor of the History of Christianity at Nazarene Theological Seminary after 35 years of service. It was Dr. Bassett who instilled in me a deep appreciation for the historical rooting of current faith and practice, and who modeled for me the passionate, yet careful, study of this traditioning process.

2. For more on this, see Randy L. Maddox, "Reclaiming an Inheritance: Wesley as Theologian in the History of Methodist Theology," In *Rethinking Wesley's Theology for Contemporary Methodism*, edited by R. L. Maddox (Nashville: Kingswood, 1998), 213–26.

3. The quotation is from Foster, *Studies in Theology*, Vol. 1: *Prolegomena: Philosophic Basis of Theology; or, Rational Principles of Religious Faith* (New York: Hunt & Eaton, 1891), vi–vii. The only reference to Wesley I have found is in Vol. 6: *Sin* (1899), 179–81.

4. David F. Ford, *The Shape of Living: Spiritual Directions for Everyday Life* (Grand Rapids: Baker Book House, 1997), 21.

5. See respectively, Ronald H. Stone, *John Wesley's Life and Ethics* (Nashville: Abingdon, 2001), 157; and John Munsey Turner, *John Wesley: The Evangelical Revival and the Rise of Methodism in England* (Peterborough: Epworth, 2002), 41–42.

6. Cf. A.W. Sloan, *English Medicine in the Seventeenth Century* (Durham: Durham Academic Press, 1996), 138–40; and Robert Heller, "'Priest-Doctors' as a Rural Health Service in the Age of the Enlightenment," *Medical History* 20 (1976): 361–83.

7. In addition to Boyle's *Medicinal Experiments; or, A collection of choice remedies, for the most part simple, and easily prepared*, 3 vols. (London: Sam Smith, 1692–94), and *Of the Reconcilableness of Specific Medicines to the Corpuscular Philosophy; to which is annexed a discourse about the advantages of the use of simple medicines* (London: Samuel Smith, 1685); he read during this time at least John Allen, *Dr. Allen's Synopsis medicinae*, 2 vols. (London: Pemberton & Meandows, 1730); George Cheyne, *An Essay of Health and Long Life* (London: George Strahan, 1724); George Cheyne, *A New Theory of Acute and Slow Continued Fevers* (London: George Strahan, 1702); John Drake, *Anthropologia Nova; or, A New System of Anatomy*, 2 volumes (London: William Innys, 1727–28); John Floyer, *Pharmako-Basanos; or, the Touch-stone of Medicines*, 2 vols. (London: Michael Johnson, 1687–90); and Daniel Le Clerc, *The History of Physick* (London: Brown, et al., 1699).

8. Thomas Sydenham, *Complete Method of Curing almost all Diseases* (London: Randal Taylor, 1694), see *Works* 18:447; John Tennent, *Every Man His Own Doctor: or, The Poor Planter's Physician* (Williamsburg, VA: William Parks, 1734), see *Works* 18:443; and Daniel Turner, *The Art of Surgery* (London: C. Rivington & J. Clarke, 1722), see *Works* 18:385. Note also Wesley's comment about studying physick "properly" in preparation for his time in America, in *Plain Account of the People Called Methodists*, §XII.2, *Works* 9:275.

9. Letter to the Editor of *Lloyd's Evening Post* (23? January 1776), in *Lloyd's Evening Post* (26–29 January 1776), 102. While Wesley may have drawn on

his transcription of Tennent during his Georgia years, there is little direct dependence in the *Primitive Physick*, likely reflecting Tennent's own claim to be giving prescriptions suited to North America.

10. See James G. Donat, "Empirical Medicine in the 18th Century: The Rev. John Wesley's Search for Remedies that Work," *Methodist History* 44 (2006): 216–26.

11. These will all be included in Volume 32 of Wesley's *Works*. For an analysis of the two extracts from Tissot, see James G. Donat. "The Rev. Mr. John Wesley's Extractions from Dr. Tissot: A Methodist *Imprimatur*," *History of Science* 39 (2001): 285–98.

12. Cf. Dorothy Porter & Roy Porter, *Patient's Progress: Doctors and Doctoring in Eighteenth Century England* (Stanford, CA: Stanford University Press, 1989); Irvine Loudon, "Medical Practitioners 1750–1850 and the period of Medical Reform in Britain," in *Medicine in Society*, edited by Andrew Wear (New York: Cambridge University Press, 1992), 219–47; and Roy Porter, "The Eighteenth Century," in *The Western Medical Tradition*, edited by Lawrence Conrad (New York: Cambridge University Press, 1995), 371–475.

13. Note his rejection of this explicit suggestion in Letter to 'John Smith' (25 March 1747), *Works* 26:236.

14. *Farther Appeal to Men of Reason and Religion*, Pt. I, §3, *Works* 11:106.

15. For more on the "healing" emphasis in Wesley's understanding of salvation, see Randy L. Maddox, *Responsible Grace: John Wesley's Practical Theology* (Nashville: Kingswood Books, 1994), 144–47.

16. Letter to Alexander Knox (26 October 1778), *Letters* (Telford) 6:327. Another good example is Letter to Miss Agnes Gibbes (28 April 1784), *Methodist History* 6.3 (1968): 53.

17. See in this regard George Whitefield's Letter to John Wesley (25 September 1740), *Works* 26:31–33.

18. Cf. David Harley, "John Hart of Northampton and the Calvinist Critique of Priest-Physicians: an unpublished Polemic of the early 1620s," *Medical History* 42 (1998): 362–86. An excellent example of the alternative Arminian inclusion of medical care in the pastoral task can be found in Gilbert Burnet, *A Discourse of the Pastoral Care* (London: Richard Chiswell, 1692), 183, 194–201 (a book that Wesley read in October 1729).

19. See *Bibliotheca Annesleiana; or a Catalogue of Choice Greek, Latin and English Books, both Ancient and Modern, ... being the library of the Reverend Samuel Annesley ... sold by auction on Thursday the Eighteenth of March, 1696*, by Edward Millington (copy in British Library). The medical volumes, by such authors as Boyle, Culpepper, Digby, and Helmont, can be found on pp. 7–8, 18.

20. For a few examples, see "Large Minutes," Q. 42, *Works* (Jackson) 8:319; *To the Societies at Bristol* (1764), *Letters* (Telford) 4:272; Letter to Christopher Hopper (20 November 1769), *Letters* (Telford) 5:161; and Letter to Joseph Taylor (9 September 1782), *Letters* (Telford) 7:139.

21. Compare the list recommended for Assistants in "Minutes" (3 August 1745), *Minutes of the Methodist Conferences, from the First, held in London, by the Late Rev. John Wesley, A.M., in the Year 1744* (London: John Mason, 1862), 1:29; to a list recommended to all readers in the Appendix of *Reflections upon*

*the Conduct of Human Life: with reference to Learning and Knowing*, extracted [by Wesley] from John Norris, 3rd edition (London: William Strahan, 1755); and his recommendation in Letter to Margaret Lewen (June 1764), *Letters* (Telford) 4:249, that were later published as “A Female Course of Study,” *Arminian Magazine* 3 (1780): 602–604.

22. Note in this regard that the letter that John and Charles Wesley sent on June 25, 1751 to James Wheatley, a Methodist itinerant who had been caught in sexual impropriety, instructed him to desist not only from preaching but from practicing physic (see *Works* 26:465).

23. Cf. *Plain Account of the People Called Methodists*, §XI.4, *Works* 9:274. Phyllis Mack has stressed the prominence of women among the early Methodist visitors of the sick in “Does Gender Matter: Suffering and Salvation in Eighteenth-Century Methodism,” *Bulletin of the John Rylands Library* 85.2–3 (2003): 157–76.

24. Philip Wesley Ott has made this point well in “John Wesley on Mind and Body: Toward an Understanding of Health as Wholeness,” *Methodist History* 27 (1989): 61–72; and “John Wesley on Health as Wholeness,” *Journal of Religion and Health* 30 (1991): 43–57.

25. Letter to Samuel Bradburn (13 March 1788), *Letters* (Telford) 8:45.

26. Cf. the prescriptions for Apoplexy and Measles in Appendix A. See also his Postscript to the Preface of *Primitive Physick*, §5, *Works* (Jackson) 14:317.

27. See particularly *Journal* (4 January 1785), *Works* 23:340–41.

28. *Journal* (30 September 1786), *Works* 23:420.

29. Note his warning against such practice in medicine, and in many other fields, in Sermon 50, “On the Use of Money,” §I.5, *Works* 2:272. Cf. *Primitive Physick*, Preface, §14, *Works* (Jackson) 14:312–13.

30. For good surveys of this tension, see Doreen Evenden Nagy, “The Intellectual Climate: Religion and Popular Medicine,” in *Popular Medicine in Seventeenth-Century England* (Bowling Green, OH: Bowling Green State University Popular Press, 1988), 34–42; and Roy Porter, “Medicine and Religion in 18th Century England,” *Ideas and Production* 7 (1987): 4–17.

31. For some examples in his *Journal* see 20 December 1742 (*Works* 19:306), 12 November 1746 (*Works* 20:145), 22 Sept.–3 Oct. 1756 (*Works* 21:78), and 7 October 1790 (*Works* 24:191). See also the published accounts in *Arminian Magazine* 5 (1782): 251–57, 312–18; 9 (1786): 43–44; and 10 (1787): 35–37.

32. *Advice with Respect to Health*, Preface, §9, *Works* (Jackson) 14:258. Cf. *Primitive Physick*, Preface, §15, *Works* (Jackson) 14:314; and Letter to Robert Carr Brackenbury (13 February 1784), *Letters* (Telford) 7:209.

33. This point is demonstrated in further detail in Henry D. Rack, “Doctors, Demons, and Early Methodist Healing,” in *The Church and Healing*, edited by W. J. Sheils (Oxford: Basil Blackwell, 1982), 137–52.

34. See esp., Michael MacDonald, “Religion, Social Change, and Psychological Healing in England, 1600–1800,” in *The Church and Healing*, edited by W. J. Sheils (Oxford: Basil Blackwell, 1982), 101–25, esp. 106 & 125; and Roy Porter, *Mind Forg’d Manacles: A History of Madness in England from the Restoration to the Regency* (London: Athlone, 1987), 68–72.

35. Wesley notes such reactions in his *Journal* for 21 January 1739 (*Works* 19:32), 1 March 1740 (*Works* 19:140), 23 August 1740 (*Works* 19:166), and 17 September 1740 (*Works* 19:168–69).

36. Note this defense in *Journal* (21 September 1739), *Works* 19:99. Continuing debate over this defense can be traced in *Farther Appeal to Men*

*of Reason and Religion*, Part I, §VII.13–17, *Works* 11:197–201; *Answer to Mr. Church’s Remarks*, §III.10, *Works* 9:119–20; and *Principles of a Methodist Farther Explained*, §IV.7–10, *Works* 9:207–11.

37. See *Farther Appeal to Men of Reason and Religion*, Part I, §VII.14, *Works* 11:198.

38. See the *Journal* entries for 2 May 1739 (*Works* 19:54–55), 12 October 1739 (*Works* 19:104), 25–26 October 1739 (*Works* 19:110–11), 15 July 1742 (*Works* 19:282), and 13 January 1743 (*Works* 19:311–12).

39. See George Cheyne, *The Natural Method of Curing the Diseases of the Body and Disorders of the Mind Depending on the Body* (London: Strahan, 1742), 78–95, esp. 90. Wesley notes reading this volume in *Journal* (12 March 1742), *Works* 19:256. Cheyne emphasizes a sparse diet and cold baths for the cure.

40. *Journal* (24 September 1742), *Works* 19:299.

41. Cf. *Journal* (5 June 1753), *Works* 20: 461–63; *Journal* (8–11 September 1755), *Works* 21:28–29; and *Journal* (2 July 1766), *Works* 22:48. Note as well *Journal* (27 April 1752), *Works* 20:421, where Wesley describes a woman as *either raving mad or possessed*, and then makes clear that it was demonic possession, since a prayer for deliverance was effective.

42. Cf. *Journal* (21 December 1762), *Works* 21:400. For a comparison of Bedlam, which did not focus on medicinal treatment of patients, with Saint Luke’s Hospital, see G. S. Rousseau, “Science,” in *The Eighteenth Century*, edited by Pat Rogers (New York: Holmes & Meier, 1978), 153–207, esp.180–82; and the recent more nuanced account in Jonathan Andrews & Andrew Scull, *Undertaker of the Mind: John Monro and Mad-Doctoring in Eighteenth-Century England* (Berkeley: University of California Press, 2001).

43. Cf. Sermon 72, “On Angels,” §II.13, *Works* 3:26; and Sermon 132, “On Faith,” §8, *Works* 4:194. Wesley is citing Thomas Deacon (1697–1753), another priest/physician. Deacon trained under Richard Mead (1673–1754), a leading physician, who shared this view of the causes of insanity. Cf. Henry Broxap. *A Biography of Thomas Deacon* (Manchester: University Press, 1911), 21–22, 81–88.

44. This point is well argued, against MacDonald and Porter, in Paul Laffey, “John Wesley on Insanity,” *History of Psychiatry* 12 (2001): 467–79. A good example of the elder Wesley attributing madness to natural causes is Sermon 41, “Wandering Thoughts,” §II.3, *Works* 2:129.

45. The most insightful study of Cheyne is Anita Guerrini, *Obesity and Depression in the Enlightenment: The Life and Times of George Cheyne* (Norman: University of Oklahoma Press, 2000).

46. Note his comment about the book in his Letter to Susanna Wesley (1 November 1724), *Works* 25:151. For publication details of *Essay*, see note 7 above.

47. *Primitive Physick*, Preface, §16.VI (see Appendix B); cf. Cheyne, *Essay*, 170–72.

48. *Journal* (12 May 1759), *Works* 21:191.

49. Cheyne, *Essay*, 171.

50. Cheyne, *The English Malady; or, A Treatise of Nervous Diseases of all Kinds, as spleen, vapours, lowness of spirits, hypochondriacal, and hysterical distempers* (London: George Strahan, 1733). His title reflects the fact that many on the continent were claiming that the English were particularly susceptible to these diseases. See p. x for his main thesis.

51. The entry in his Oxford diary for 9 September 1734 mentions reading “Cheyne” but does not list a title. *English Malady* is item 75 in the list of books in Randy L. Maddox, “Kingswood School Library Holdings (ca. 1775),” *Methodist History* 41.1 (2002): 342–70.

52. “Thoughts on Nervous Disorders,” §§1–5, *Works* (Jackson) 11:515–17. The reference at the end is to William Cadogan, *A Dissertation on the Gout, and All Chronical Diseases, jointly considered, as Proceeding from the Same Causes; What these Causes are; and a Rational and Natural Method of Cure Proposed* (London: Dodsley, 1771). Wesley read Cadogan in 1771, and published an extract three years later in Volume 26 of his *Works* (Pine edition).

53. Sermon 84, “The Important Question,” §III.7, *Works* 3:193.

54. Cf. his comments on “lowness of spirits” in *Journal* (13 July 1739), *Works* 19:79; *Journal* (20 February 1745), *Works* 20:53; and *Journal* (26 August 1752), *Works* 20:435; and on melancholy in *Journal* (22 April 1766), *Works* 22:39.

55. Cf. Sermon 47, “Heaviness through Manifold Temptations,” §III.1–2, *Works* 2:226–27.

56. For a more detailed survey of this balance, see Joe Gorman, “John Wesley and Depression in an Age of Melancholy,” *Wesleyan Theological Journal* 34.2 (1999): 196–221.

57. Sermon 47, “Heaviness through Manifold Temptation,” §III.2, *Works* 2:227.

58. For more analysis of this distinction, focused on Wesley’s setting, see Harold J. Cook, “Physick and Natural History in Seventeenth-Century England,” in *Revolution and Continuity: Essays in the History and Philosophy of Early Modern Science*, edited by Peter Barker & Roger Ariew (Washington, DC: Catholic University of America Press, 1991), 63–80.

59. He was clearly applying “physick” to the therapies collected in the volume, rather than to the advice in the preface. See his comment: “There can be no doubt that your bodily disorder greatly affects your mind. Be careful to prevent the disease by diet rather than physick,” in Letter to Alexander Knox (26 October 1778), *Letters* (Telford) 6:328.

60. Antoinette Emch-Dériaz, “The Non-naturals Made Easy,” in *The Popularization of Medicine, 1650–1850*, edited by Roy Porter (New York: Routledge, 1992), 134–59.

61. See also Philip Wesley Ott, “John Wesley and the Non-Naturals,” *Preventive Medicine* 9 (1980): 578–84.

62. Cf. Ginnie [i.e., Virginia] Smith, “Prescribing the Rules of Health: Self-Help and Advice in the Late Eighteenth Century,” in *Patients and Practitioners*, edited by Roy Porter (New York: Cambridge University Press, 1985), 249–82, esp. 259, 264–65; and Virginia Smith, “Physical Puritanism and Sanitary Science: Material and Immaterial Beliefs in Popular Physiology, 1650–1840,” in *Medical Fringe and Medical Orthodoxy, 1750–1850*, edited by W.F. Bynum and Roy Porter (London: Croom Helm, 1987), 174–97, esp. 177–81.

63. Note as well his critique of a physician who persisted with the “hot regimen” in treating citizens of London when it was clearly ineffective: *Journal* (16 August 1748), *Works* 20:239. See his commendation of Tissot for avoiding this: *Advice with respect to Health*, Preface, §3, *Works* (Jackson) 14:255.

64. Cf. Cheyne, *English Malady*, iv–v; and the analysis of Bryan Turner, “The Government of the Body: Medical Regimens and the Rationalization of Diet,” *British Journal of Sociology* 33 (1982): 254–69, esp. 265–66.

65. Cf. *A Letter to the Right Reverend the Lord Bishop of London*, §14, *Works* 11:344–45.

66. See especially “Thoughts on Nervous Disorders,” §§6–7, *Works* (Jackson) 11:518; and the Preface to his extract of Cadogan’s *Dissertation on the Gout*, *Works* (Jackson) 14:265–69. But note also that he suggests a vegetarian diet for weight loss (Appendix A, #330). William Stroup’s recent study overplays a little Wesley’s encouragement of vegetarianism; cf. Stroup, “Meat, Ethics, and the Case of John Wesley,” in *Orthodoxy and Heresy in Eighteenth-Century Society*, edited by Regina Hewitt & Pat Rogers (Lewisburg: PA: Bucknell University Press, 2002), 267–80. More balanced is Charles I. Wallace Jr., “Eating and Drinking with John Wesley: The Logic of his Practice,” *Bulletin of the John Rylands Library* 85.2–3 (2003): 137–55.

67. See the advice for avoiding costiveness (i.e., constipation) in Appendix B, §V.1. The phrase “soft, cool, open diet” is Wesley’s summary, not found in Cheyne’s original.

68. For more on the broad conviction of the benefits of open country and fresh air in health manuals of the time, see Andrew Wear, “Making Sense of Health and the Environment in Early Modern England,” in *Medicine in Society*, edited by Andrew Wear (New York: Cambridge University Press, 1992), 119–47.

69. Letter to Lady Maxwell (23 February 1767), *Letters* (Telford) 5:42.

70. *Extract from Dr. Cadogan’s Dissertation on the Gout*, Preface, §10, *Works* (Jackson) 14:268.

71. “Thoughts on Nervous Disorders,” §10, *Works* (Jackson) 11:520.

72. Letter to Miss Agnes Gibbes (May 1785), *Methodist History* 6.3 (1968): 59.

73. Cf. Porter, “Eighteenth Century,” 419–20; and Cheyne, *Essay of Health*, 95.

74. Letter to Mrs. Christian (17 July 1785), *Letters* (Telford) 7:281.

75. Cf. Letter to Miss Agnes Gibbes (14 January 1785), *Methodist History* 6.3 (1968): 57.

76. See Letter to Sarah Wesley (18 August 1790), *Letters* (Telford) 8:234.

77. Wesley may have learned of this device from a description in *The Gentleman’s Magazine* 16 (1746): 478. John Fletcher also apparently used one regularly; cf. *The Life and Death of Mr. Fletcher*, §3.13, *Works* (Jackson) 11:291. For a picture and discussion of one of the few remaining examples, see Conrad Volk, “The Dumb-Bell at Knole: A Seventeenth-Century Exercising Device,” in *National Trust Studies 1981*, edited by Gervase Jackson-Stops (London: Sotheby Parke Bernet, 1981), 133–38. See also David Bryant, “The History of the Dumb Bell,” *The Ringing World* 98 (2002): 260–61.

78. “Thoughts on Nervous Disorders,” §7, *Works* (Jackson) 11:518.

79. Sermon 93, “On Redeeming the Time,” §II.4, *Works* 3:326–27 (1782).

80. See, for example, Keith Thomas, “Cleanliness and Godliness in early Modern England,” in *Religion, Culture, and Society in Early Modern Britain*, edited by Anthony Fletcher (New York: Cambridge University Press, 1994), 56–83, p. 65.

81. See especially “Large Minutes,” Q. 44, *Works* (Jackson) 8:320; Sermon 88, “On Dress,” §5, *Works* 3:249; and Sermon 98, “On Visiting the Sick,” §II.6, *Works* 3:392.

82. The phrase “it prevents abundance of diseases” in §IV.10 of Wesley’s abstract of Cheyne (Appendix B) is Wesley’s addition, not found in Cheyne, *Essay of Health*, 108.

83. For individual examples, see remedies 3, 35, 41, and 138 in Appendix A. The appended list is found in every edition of *Primitive Physick* through Wesley’s life (pp. 117–18 in 1791).

84. John Floyer, *The Ancient Psychrolousia Revived; or, an essay to prove cold bathing both safe and useful ... also a letter of Dr. [Edward] Baynard’s containing an account of many eminent cures done by the cold baths in England* (London: Smith & Walford, 1702). Note Wesley’s reference to this work in *Desideratum*, Preface, §4, *Works* (Jackson), 14:242.

85. Cf. Smith, “Physical Puritanism,” 180.

86. Eunice Bonow Bardell, “*Primitive Physick*: John Wesley’s Receipts,” *Pharmacy in History* 21 (1979):111–21.

87. *Primitive Physick*, Preface, §11, *Works* (Jackson) 14:311.

88. A good study of the contemporary practice of apothecaries, which can help in identifying many of Wesley’s remedies as well as discerning his distinctive preferences is Juanita G. L. Burnby, *A Study of the English Apothecary, From 1660 to 1760* (London: Welcome Institute for the History of Medicine, 1983).

89. *Primitive Physick*, Preface, §14, *Works* (Jackson) 14:313. See as well his praise of Sydenham, Dover, and Cheyne in *ibid*, §12, 14:311–12; and of Tissot in *Advice with Respect to Health*, Preface, §2, *Works* (Jackson) 14:255.

90. Wesley’s Oxford diary records that he read Boyle’s *Specific Medicines* (see note 6) on 9 July 1725. Pages 137–225 of this work are devoted to Boyle’s defense of simple medicines.

91. Cf. Barbara Beigun Kaplan, “*Divulging of Useful Truths in Physick*”: *The Medical Agenda of Robert Boyle* (Baltimore: John Hopkins University Press, 1993); and Michael Hunter, “The Reluctant Philanthropist: Robert Boyle and the ‘Communication of Secrets and Receipts in Physick’,” In *Religio Medici: Medicine and Religion in Seventeenth-Century England*, edited by Ole Peter Grell & Andrew Cunningham (Hants, England: Scolar Press, 1996), 247–72.

92. *Primitive Physick*, Preface, Postscript, §2, *Works* (Jackson) 14:316.

93. Cf. Andrew Wear, “Medicine in Early Modern Europe, 1500–1700,” in *The Western Medical Tradition*, Lawrence Conrad et al. (Cambridge University Press, 1995), 215–360; here, 309–10.

94. Peruvian bark (or Cinchona) is the natural source of quinine. It was discovered by Jesuits in Peru. For an example of Wesley’s criticism of certain prescriptions of the bark, see *Advice with respect to Health*, Preface, §7, *Works* (Jackson) 14:257.

95. Wesley emphasized, for example, that people lack familiarity with exotics: *Primitive Physick*, Preface, §10, *Works* (Jackson) 14:311.

96. See *ibid*, §4, 14:308–309.

97. *Ibid*, §6, 14:3089. See also §3, 14:308.

98. Cf. Sermon 59, “God’s Love to Fallen Man,” *Works* 2:423–35; and Sermon 63, “The General Spread of the Gospel,” §27, *Works* 2:499.

99. The most helpful essay on this topic is H. Newton Malony, “John Wesley and the Eighteenth Century Therapeutic Uses of Electricity,” *Perspectives on Science and Christian Faith* 47 (1995): 244–54.

100. In the Preface to *Desideratum*, §1 (*Works* [Jackson] 14:241) he refers to the following in particular: Benjamin Franklin, *Experiments and Observations on Electricity* (London: E. Cave, 1751); John Freke, *An Essay to show the Cause of Electricity* (London: William Innys, 1746); Dr. Hoadly & Benjamin Wilson *Observations on a Series of Electrical Experiments*, 2nd edition (London: Payne, 1759); Richard Lovett, *The Subtil Medium Proved* (London: J. Hinton et al., 1756); Benjamin Martin, *An Essay on Electricity* (Bath: for the author, 1746); William Watson, *Experiments and Observations Tending to Illustrate the Nature and Properties of Electricity*, 3rd edition (London: C. Davis, 1746); and Benjamin Wilson, *A Treatise on Electricity* (London: Davis et al., 1750).

101. See *Journal* (9 November 1756), *Works* 21:8; *Desideratum*, Preface, §5, *Works* (Jackson) 14:243; and Willem D. Hackman, *John Wesley and His Electrical Machine*. London: John Wesley’s House and The Museum of Methodism, 2003. For more background on the interest in medical uses of electricity at the time, see Paola Bertucci, “The Electrical Body of Knowledge: Medical Electricity and Experimental Philosophy in the Mid-Eighteenth Century,” in *Electric Bodies: Episodes in the History of Medical Electricity*, edited by Paola Bertucci & Giuliano Pancaldi (Bologna: University of Bologna Department of Philosophy, 2001), 43–68.

102. Cf. *Desideratum*, Preface, §3, *Works* (Jackson) 14:242. As Wesley admits, the work was almost entirely abridged from others, particularly from Lovett’s *Subtil Medium*.

103. Wesley, *Desideratum* (London: Strahan, 1760), §I.1, p. 9

104. *Desideratum*, Preface, §8, *Works* (Jackson) 14:243.

105. *Primitive Physick*, Preface, §10, *Works* (Jackson) 14:310–311.

106. In this consideration it may help to note that such attacks upon learned medicine for its cost and exclusivity had become a standard item in works popularizing medical knowledge by the middle of the seventeenth century; cf. Andrew Wear, “Medicine in Early Modern Europe, 1500–1700,” 324.

107. Some sense of these dynamics can be gained from Mary Fissell, *Patients, Power, and the Poor in Eighteenth Century Bristol* (New York: Cambridge University Press, 1991); and Anne Digby, *Making a Medical Living: Doctors and Patients in the English Market for Medicine, 1720–1911* (New York: Cambridge University Press, 1994).

108. *Plain Account of the People Called Methodists*, §XII.1–3, *Works* 9: 275–76.

109. Cf. *ibid*, §XII.6, *Works* 9:276

110. Note how this specific point is made in one of the first admirable contextual studies of Wesley’s interest in medicine: George Sebastian Rousseau, “John Wesley’s *Primitive Physic* (1747),” *Harvard Library Bulletin* 16 (1968): 242–56; here, 247.

111. See in this regard his criticism of Tissot’s fondness for bleeding and enemas [glysters], in *Advice with respect to Health*, Preface, §4 *Works* (Jackson) 14:255–56; and another fine contextual study of Wesley: Clifford Wayne Callaway, “John Wesley’s *Primitive Physick*: An Essay in Appreciation,” *Proceedings of the Mayo Clinic* 49 (1974): 318–24; here, 323.

112. John Wesley, *Primitive Physic* (London: Epworth Press, 1960), §467, 86.

113. Cf. *Primitive Physick*, Preface, Postscript, §3, *Works* (Jackson) 14:317.

114. Letter to Alexander Knox (16 August 1778), *Letters* (Telford) 6:317–18.

115. Readers may find of interest at this point my subsequent study: “Reclaiming the Eccentric Parent: Methodist Reception of John Wesley’s Interest in Medicine,” in “*Inward and Outward Health*”: *John Wesley’s Holistic Concept of Medical Science, the Environment, and Holy Living*, ed. Deborah Madden (London: Epworth, 2008), 15–50.