Introduction

The speculum is a fascinating Roman surgical artefact because its precision design shows an acute awareness of the anatomy of the female body (Figure 1a). The priapiscus of the Roman specula is rounded, not pointed, so as not to rub or cut the cervix. Archigenes of Apamea, as recorded in Paul of Aegina (6.73), explains its use and states that before the instrument was placed in the vagina, the woman was measured to ensure the priapiscus was not too long, if it was, then compresses where placed on the labia to shorten the priapiscus thereby protecting the cervix from injury. The design of the instrument, and the proposed care taken in its use, is an indication that the female body was a respected concern in a medical context, suggesting the possibility that the Roman female was more highly regarded than often represented both in general works and in more detailed studies of Roman women, where the female is implicitly described as subordinate (e.g. Allason-Jones 1989). Here a focus on the philosophy and practice of Roman medicine will be employed to illustrate that these implicit assumptions are not always as unproblematic as often portrayed. The speculum only provides one indication of how Roman doctors perceived the body. To gain a more precise idea about the opinions held in medical thinking it is necessary to examine other aspects of Roman medicine such as medical literature, archaeological and epigraphic remains, and religion. The questions asked of these concern how the medical perspective influenced wider perceptions of the female body, and conversely how the popular understandings influenced the medical comprehension of the woman's body. It will be seen that the social constructs of the body for both men and woman are never clearly defined as there are many contradictions in the juxtaposition of the body and society (Turner 1996).

Anthropological studies of many different cultures – Native American Indians, South Pacific Islanders and African societies to name just a few – demonstrate that attitudes towards the natural functions of the female, such as menstruation, pregnancy and menopause, often reflect specific beliefs held towards females and influence the role and status which women hold in their societies (Moore 1988:16-7). This also applies to Greek and Roman women. Although this paper concentrates on the latter, the gynaecological literature of the Greeks must be considered for it creates a context, illustrating how medical ideas developed. Furthermore, the differences in medical texts dating from roughly the same periods are used to demonstrate the complexity of attitudes towards the female body in a single area of thought.

The Greek perception

Ideas are given about how the female body functioned in the medical texts of the Hippocratic Corpus (a collection of medical compositions from the late fifth century BC) and some of Aristotle’s works. A lack of space prevents the detailed discussion this area deserves, but a few points will be drawn from this literature to show some of the ideas about the Greek female body and how these reflect general attitudes of the female’s position in society. Generally, Greek women were identified with the oikos or home, while men were associated with the polis or city (Dean-Jones 1991:112), though there were exceptions, for example, Aspasia, the political confidant of Pericles. Yet for the majority of women in Greek society the
structural dichotomy of her place in the private sphere against the public sphere of the male held
many implications about the attitudes sustained towards the female role in society that were
projected onto the medical conception of the Greek female body.

In some Greek medical philosophy the female body is assumed to have been something
‘other’ than that of the male body. It is stated by the author of the treatise On Disease in the
Hippocratic Corpus that in specific cases a man differs from a woman in greater ease or
difficulty when recovering from a disease (Acut. 1.22.6; 182, 22–184. 2L in Longrigg
1998:191). According to the author of Airs, Waters and Places, the contraction of disease is
dependent upon environmental factors causing men and women’s bodies to react differently
(Hp. Aer. 3-4, 2 14, 21–22 9L in Longrigg 1998:191). Another instance of this distinction in the
Corpus is quoted by the writer of Diseases of Women; if a woman was treated for the same
disease with the same treatment as a man, the author considers the effects to have been
potentially disastrous (Hp. Mul. 1.62,8 126, 14–19L in Longrigg 1998:192). This gendered
differentiation of diseases is also found in mythological sources; according to Hesiod, when a
plague was cast on a city: men died, but women became barren (Op. Works and Days 1.13).
These earlier ideas may have carried over into later society and medical writings.

Childbirth reinforced the Greek woman’s association with the home – one of her main duties
was to bear children. Some descriptions of her anatomy describe her as a receptacle for holding
children, for example, Aristotle’s description of female body as a jar or pot to hold children
(GA. 747a.4–23). The Hippocratic writer of the Nature of Women (3.7.314, 14–21L in Longrigg
1998:196) regarded the female body as a hollow tube that was connected by two orifices. In a
discussion of the problem of the womb moving too close to the liver, the writer suggests
attracting it back to its original place by pouring sweet smelling wines in the os or uteri while
applying evil smelling ointments to the nostrils. This is supported by the author of Diseases of
Women; here the fertility of a woman was tested by placing a clove of garlic in the womb – if
the woman could taste the garlic in her mouth the following day she was able to conceive; if she
could not, she was sterile (Hp. Mul. 3.214; 8.416, 3–5L in Longrigg 1998:197).

Menstruation is another female function that helped to define the separation of men and
women in Greek society (Dean-Jones 1994:225). Menstrual blood was considered by some
writers to determine the general health of the female, thereby enhancing her separation from
men because men obviously cannot suffer from affects of menstruation. One differentiation in
the cause of female illness was an excess of blood in the body due to amenorrhea. The
Hippocratic writer of the Diseases of Women believed the blood would travel around the body
making the woman ill; therefore, menstruation was a means of maintaining a healthy body and a
catharsis for disease (Mul 1.1.8.12, 6–21L in Longrigg 1998:192). In spite of the conceptualized
separation of men and women created by the ideas about the cause of disease, no health
prevention appears to have existed to encourage men to avoid sexual contact during a woman’s
period. In fact, copulation was positively encouraged by some of the Hippocratic writers, and by
Aristotle, because they believed menstruation was the best time for conception (Hp. Mul. 1.17
8.56.15–17; Hp. Nat.Mul. 8.7.324.5–7; Arist. GA. 727b.19–26). This implies that women were
not ostracised or considered unclean during their cycle, such as amongst the Kaulong of New
Britain who believe menstruating women must not touch anything that might come into male
contact, because this will lend to the pollution of the male; in general, pollution spreads out from
their bodies (Moore 1988:16–7). Similarly, south-eastern American Indian tribes sent women
away from their villages during menstruation to stay in special dwellings so they could not
pollute the area (Galloway 1998:199). Nothing so severe is suggested for Greek women.
Perhaps her separation from the polis was symbolic of menstrual seclusion, just as some African
cultures, in this case the Masakin Qisar of Sudan, do not physically separate themselves from
women, in spite of their beliefs of menstrual taboos, but do so with painted symbols representing
male virility (Hodder 1982:159).
Menstruation is only mentioned in medical texts and seems to have been excluded from general Greek literature. Dean-Jones (1994:226–32) suggests the reason for this is that menstruation was not experienced by men and, therefore, ignored in conversation. She alludes to Aristophanes, who poked fun at all natural bodily functions, including female genitalia, but not menstruation. Perhaps it is, as Dean-Jones claims, simply a matter in which men were unfamiliar. However, Aristophanes does refer to the female genitalia; and general male familiarity with the vagina during sexual intercourse would have made men aware of the menses. It is possible menstruation was not mentioned because it was merely not an agreeable topic of conversation. Pliny, writing five hundred years later, apologises for mentioning such terrible things when he discusses uses for menstrual blood (HN. 28.24.87). King (1995:142) argues that in the Hippocratic Corpus doctors who wrote about female conditions stated that what they knew came from conversations with women, implying that menstruation was not a taboo subject of conversation, at least in a medical context. Here we come to an impasse because we only have the surviving literary sources to study, and only medical texts state any attitude about menstruation. Yet, no explanatory myth for the origin of the menses exists. This may imply that one was not created because it was not experienced by men (Dean-Jones 1994:232–4), but this requires that we then ask why women did not invent one. Had menstruation been taboo, a myth most likely would have been told to warn men of its evils.

Menstruation clearly caused changes in a female's health; Aristotle (Insom. 459b–460a 23) was the first, that we are aware of, to remark on how it could alter things beyond the body. He claims that if a menstruating female looked into a mirror she would dim the reflective surface with a bloody cloud; the newer the mirror, the more difficult the stain was to remove. This alteration was caused by the blood vessels in the eyes being affected by menstruation. The eyes then moved the air that touched the mirror's surface and changed its quality. Since bronze reacts with the air, the surface becomes stained; the cleaner the surface, the deeper the stain will permeate. The transformation in the mirror, suggests that the changes in the female body were capable of affecting sense perceptions and in some respects has the ability to alter the quality of things around the body. It is plausible that this statement is a representation of the non-philosophical point of view in Greek society; however, without any mention in the extant literature one is forced to hypothesise about the statement's origin; it shows an intermingling of science and folklore that continues to appear in classical societies.

Medical philosophy changed during the Hellenistic era when Herophilus and Erasistratus began making anatomical studies through dissection and vivisection of human bodies. Herophilus stated men and women shared the same anatomy with one crucial difference, the male has his genitalia on the outside, while the female has hers on the inside of her body (von Staden 1989:165–9, 296–9; von Staden 1991:276). The 'magical' significance of menstruation is not mentioned in the anatomical studies, indicating that such popular beliefs were not accepted, or at least written about, by these scientific writers. The Hellenistic medical literature does not differentiate the males and females as much as some of the Hippocratic writers or Aristotelian philosophy; this appears to have influenced Roman medical thought.

The Roman female in medical literature

The construction of the female body in medicine, and its popular conception, may have served to inform one another. Roman women, especially during the imperial age, were not confined to the domus like their Greek counterparts. Their duties went beyond child-bearing – they were responsible for raising good Roman citizens by educating their children. To teach, the Roman female would need to have participated in some aspects of the male world to be educated herself. The duties of a Roman woman are only recorded for upper class females (Cantarella 1987:178); however, letters from soldiers, to their mothers suggest the latter knew how to read, indicating a degree of education in all classes of women. Soranus also requests that midwives, thought to be slaves or plebeians, be literate so they could stay abreast of the latest
medical theories (Gyn. 1,1,3; Jackson 1988:88). Roman women also gained freedoms that were denied their republican predecessors. She could seek a divorce, gain custody of her children if she could prove that the father was incapable of caring for them; there is also evidence that she could practise birth control and abortion, made apparent by Augustus, who was discouraged by the low numbers of upper-class children. He revised existing laws and created new ones on chastity and adultery, encouraged marriage between the various classes and is said to have given a lecture encouraging men of equestrian rank to procreate (Suet. Aug. 34). Roman women entered traditional male realms and pursued educational interests. Some learned to fight and hunt, others became gladiators and others doctors; the wife of the senator Licinius Buco was lawyer (Cantarella 1987:178). Literacy may also have been widespread, since there are records of many women holding jobs in areas that required reading, and not all of them were from the upper classes.

Celsus, a first century AD medical writer, used the male body as his model when he described medical treatment in his *de Medicina*, because the female body was something in need of separate discussion, her physiology and bodily functions were not shared by men (von Staden 1991:272). Celsus described the Roman female body in a similar manner to earlier Greek perceptions, seeing it as ‘weaker [and] more liable and bloodier than the male body’ (von Staden 1991:272; Celsus 7,29,1). Celsus, however, was apparently aware of the anatomical studies of Herophilus, who had discovered that the uterus was attached (contra Hippocratic writers, Hp. *Places in Man* 47, 6, 344, 3–22L in Longrigg 1998:194–5; von Staden 1989:165–9, 296–9; 1991:274). The female body of Celsus, a combination of Hellenic and Hellenistic theories, was never as healthy as a man’s. The female body was described as the *susceptible imbecilli* (weaker) rather than the *sani* or sound (Celsus 1.1–2; von Staden 1991:272–3).

This contradiction of attitude in the first century AD is also apparent beyond the medical texts. Menstrual blood is only mentioned once in Greek literature as having powers that extended beyond the body (Arist. above). However, more cases relating to its powers were mentioned in Roman literature. Columella, a second century BC agricultural writer, considers menstrual blood as having negative effects, stating his belief that if a menstruating woman walked near plants they died (RR. 10.357–63). In Pliny – who discusses conflicting points of views about the positive and negative factors of menstrual blood – there is a noticeable change in attitude from Columella about the menses and the female. Amongst his many stories of the mysterious and awful power of menstrual discharge, he claims whirlwinds and hail storms were supposedly driven away if exposed to menstrual blood (HN. 28.78.86). He also warns his readers about some negative aspects as well – he alerts men not to engage in sexual intercourse if a female is menstruating when the moon and sun are in eclipse because there will be irredeemable harm; thus indicating that it was not taboo to avoid intercourse during menstruation in general. Pliny also advises pregnant women to avoid walking over or touching menstrual blood because a smear of blood could cause a miscarriage (HN. 28.73.82–84). Yet simultaneously, he also considered menstrual blood to be a life-force, believing it was collected by the semen, life beginning from the combination (Plin. *HN*. 7.15.66). He also claims curative power, for example, as a lineament for gout. Further, the touch of a menstruating woman could relieve parotid tumours, superficial abscesses, boils and eye fluxes; blood was also a cure for tertians and quartans if rubbed on the soles of the patients’ feet – but the cure was more efficacious if it was the blood of the woman performing the treatment. Icatides, a doctor, said that quartans could be cured in men if they engaged in sexual intercourse with a woman on the first day of her cycle. Following this discussion, Pliny apologises – ‘this is all the information it would be right for me to repeat most of which also needs an apology from me as the rest is detestable and unspeakable’ (HN. 28.24.87). Clearly Pliny presents complex attitudes towards the beneficial and harmful qualities of menstruation, presumably reflecting those of Roman society as a whole.
Dean-Jones (1994:248, n.78) argues that menstruation only becomes an issue when the female began to challenge the role of male supremacy – it was a way of retaining male dominace. This statement can be contested on the basis of examples presented as illustrative of menstrual taboos. For example, Dean-Jones cites Tacitus (Hist. 5.6.5) who claims people who collected bitumen off a lake in Jerusalem could not cut it with a knife, but had to do so with a cloth soaked in menstrual blood. Further on, however, Tacitus says that the story was ridiculous and advises that the way to collect bitumen was to dry it in the sun; therefore demonstrating not everyone believed in the magical powers of menstrual blood.

Tacitus’ rejection of the folklore about female blood provides a clue that in the late first century AD the menses was not always regarded as a magical device, but there would always have been an intermingling of tradition and science. Soranus of Ephesus wrote his gynaecological treatise about the same time as Tacitus and Soranus too, avoids discussing the magical beliefs about the female body, as he approaches the topic from a completely rational (here I mean non-magical) point of view. The only time magic is mentioned is when he discusses the practices of other cultures. His gynaecological treatise obviously discusses conditions which were specific to females, but his work was not intended as a means of enforcing particular sets of social values on the female’s place in society, but merely to describe the physiological differences. Soranus, unlike the Hippocrates, understood that men and women could suffer the same disease with the same symptoms; however, in certain instances the females’ expected role in society determined the embarrassment of her suffering. This is shown in Soranus’ discussion of satyriasis. He states that both men and woman could suffer from it, but that the condition is more embarrassing for females because women are forced to scratch themselves in public, which must have been a social faux pax. Furthermore, satyriasis caused a desire for intercourse that a female should not be seen to want (Gourevitch 1995: 162; Gyn. 3.25). Both bodies are the same medically, but there are social laws in Roman society that do not allow a female to be perfectly equal to a male and this is displayed in the way she is permitted to treat her body in public.

In some earlier medical texts menstruation has been explained as one of the factors separating Roman women from the male domain. Soranus, however, does not demonstrate this belief. To him menstruation was necessary if a woman wished to become pregnant; however, he did feel that menstruation was not always profitable for health as it causes headache, fever, chills and dimness of vision and he concludes it is not generally useful for maintaining a woman’s health (Gyn. 1.6.27–9). He considered amenorrhea a physical demonstration that a woman is healthy because menstruation stops when a female is doing plenty of exercise (Gyn. 1.6.28). Yet if she wished to have children then it was suggested that she stop exercising, allowing her body to relax and regain her menstrual cycle. Soranus does not, therefore, appear to be interested in describing the differences in men and women as a means of judging who was superior or inferior.

Galen, who wrote in the late second century AD, does not perpetuate this approach. He considers women weaker because their bodies are colder than those of men, making women less motivated. This coolness is the result of the fact that the uterus is open during menstruation, allowing air to flow into her (On the usefulness of parts of the body 14.3–6; S; Kühn 4.145–50). He also claims that temperature defines the side of a womb on which a child of a particular sex will develop. The female foetus developed on the left side of the uterus and the male on the right side (On semen 2.5.35–8). For Galen, the female was seen to exist within a separate realm.

From the Roman medical literature, it is obvious that contradictions in perceptions of the female body existed among the medical and non-medical writers alike, and that definitions are complex. The important point is that few actually describe such functions as wholly negative, (e.g. Columella), or those that do, emphasise positive aspects as well (e.g. Pliny).
Archaeological definitions

As illustrated above, medical writings reflect the perspective of individuals. Thus it is necessary to look beyond the literature for a fuller understanding of medical attitudes towards Roman women. Archaeologically, medical instruments demonstrate a developed understanding of female anatomy. The earliest known gynaecological instruments date to at least AD 79 – those found at Pompeii – showing that gynaecology was a developed field before Soranus wrote his treatise and presumably, long before the first century AD as well. The evidence of 'advanced' gynaecological care suggests that females were not always considered pollutants in the first century AD and the negative ideas mentioned by Pliny about menstruation cannot have been accepted by all. Nowhere is the evidence more indicative of a scientific understanding of female anatomy than in the vaginal speculum (Figure 1a). It comprises a projecting priapiscus composed of three prongs (in one case four) (Bliquez 1994:208). The prongs are prismatic on the inside and convex on the outside with a smooth surface and rounded tip. The lotus, at the opposite end of the priapiscus, is at a right angle and being operated by a worm screw situated at the back of the instrument (Muscio 2.34.94; Tert. De anim. 25.5 in Longfield-Jones 1986:83, n. 11). The instrument often has handles at the side (Muscio 2.34.94 in Longfield-Jones 1986:83 n 11). They were frequently forged of bronze, being easy to cast, strong, resistant to rust and also decorative (Hp. De Medico 2; Celsus 7.26.1; Oribas. 49.3. in Longfield-Jones 1986:84 n. 19); the worm screw was hand-made of brass.

The speculum is a rare find in the archaeological record, which is possibly surprising given the frequency with which it mentioned in medical texts (e.g. Muscio 2.33.91; Oribas Syn. 9.41; Gal. 19.110; Soranus Gyn. 2.40. in Longfield-Jones 1986:81, n.5). Only about seven are known, though they have been found around the Empire in Asia Minor, Varna, Madrid, Libya, and three from Pompeii, dating from the first to fourth centuries AD (Jackson 1988:94; Longfield-Jones 1986:81–2; Bliquez 1994:209; Künzl 1983:112). Jackson (1988:94) suggests that the rarity of the instrument may mean that it was only available to the wealthy. However, medical
instruments have also been found at Roman fortifications, including a rectal speculum (Figure 1b) from the auxiliary fort at Vechten on the lower Rhine (Braadbart 1994: 164). Rectal specula are normally used on both men and women and may have also been applied as vaginal specula for younger or smaller women. Albuscas, who drew much of his medical information from Greek and Roman literature, mentioned the use of wooden or lacquered specula, which may also have been used by the Romans. These might have been more affordable and, therefore, widespread, but are less likely to have survived in the archaeological record than their metal counterparts (Spink & Lewis 1973: 486, chapter 77).

The catheter is another instrument that demonstrates careful design for both male and female bodies (Gal. 14.787). The male instrument was longer and S-shaped (Figure 2a). The female catheter was shorter and straighter (Figure 2b) (Celsus 7.26–113; Milne 1907: 144). Here it is important to note that female and male anatomy were clearly distinguished in terms of surgical implements; if not designs might not have differed.

For help in childbirth various instruments were developed specifically to keep the female alive in case of the threat of death to either the baby, mother or both. If a foetus died in utero during labour, the midwife or doctor was advised to use special traction hooks (steel hooks with bronze handles) that were to be inserted into an orifice of the foetus' body, generally the eyes or ears so that there would have been equal pull on both sides of the body (Sor. Gyn. 2.19; Celsus 7.29; Paul of Aegina 6.74). One of the more gruesome instruments to have been developed was the decapitating knife (Sor. Gyn. 4.19; Milne 1907: 154). In case the traction hooks failed to work the decapitating knife was suggested. This curved knife with a long handle was used to separate the head of the infant from its body (Figure 2c). Two other instruments were also described in the literature being designed to crush the head of the foetus to make its removal from the uterus easier. The cranioclast was used to crush the skull, the fragments of bone being removed individually. The cephalotribe was used to again crush the skull, but without causing
the bones to splinter. This was used especially in the removal of a child that was doubled on itself (Milne 1907:154–5). Forceps are thought to have been an Arab invention (Milne 1907:157). These instruments demonstrate the value placed on the life of the woman, even over that of a male child.

As artefacts were explicitly gendered they undoubtedly carried symbolic value that would have affected their use and deposition. In future, greater concern should be placed on the way that they might have been used in the negotiation of gender roles in society. There is always the possibility the Romans believed in female pollution — as mentioned, other cultures have segregated women physically or symbolically during menstruation. Modern western culture still hides the fact that women menstruate, by creating a menstrual etiquette that requires women to hide the fact of their periods, both in general, and in particular from men (Ginsburg 1996:365). Women are rarely seen to menstruate in western literature or films and when it is discussed it is usually under bizarre circumstances of young girls at menarche, such as in the Exorcist, where the onset of menstruation is clearly not treated as something normal (Galloway 1998:203). This western discrimination carries over into the archaeological record and menstruation and women’s health are often disregarded or assumed to have been disregarded by the societies under study. In the literature it is clear that menstruation during the Roman era was not ignored and there is little in imperial literature that suggests it was considered polluting. Little is understood about how Roman women protected their clothing from blood stains, probably because we assume that things were hidden, so we do not look, as is also the case with the lack of ‘menstrual huts’ in the archaeological record. We are aware of their existence through historical sources, but such buildings have never been identified in the archaeological record as Galloway (1998:205) points out, because menstruation is hidden today it is expected to have been ignored in the past as well — this has implications for what is looked for in the archaeological record, including that of the Roman era. This is supported by the context in which the instruments were found. The specula from Pompeii and from Spain were found with sets of surgical instruments that consisted of scalpels, probes and other common instruments. This does not suggest that instruments concerned with female genitalia were considered polluting and kept separate from those used in the treatment of men (Bliquez 1995; Longfield-Jones 1986). Furthermore, the dual use of rectal specula emphasises the lack of concern for symbolic pollution. It is therefore, quite possible that the Romans did not hide menstruation as common today, especially since Pliny mentions the occurrence of drops of blood on the ground when he warns pregnant women not to come into contact with it.

Epigraphic and mythological evidence

Epigraphic evidence points to another aspect of attitudes towards women and medicine — their role as doctors. Women are mentioned as medica instead of obstetric on fifteen known inscriptions from the first to third centuries AD, with one exception dating to c.350 BC. Five are from Asia Minor (Pleket 1969:10, 27–8, 32, 38–9). One was honoured with a statue by her city, Tlos in Lycia (Pleket 1969:27–8). Six inscriptions have been found at Rome (CIL 6, 6851, 8711, 8926, 9614, 9614 & 9616), one from Auximum in Italy (CIL 9, 5861) and three from other areas of the empire: Carthage (CIL 8, 24679) Lugdunum (CIL 13, 2019) and Belgica (CIL 13, 4334). The inscriptions show that women in all areas of the empire were permitted to learn the skills of a doctor rather than those of a midwife. Since females could become doctors it is implied that they could care for men — male doctors were allowed to help midwives in cases of difficult labour. In general, there is no evidence for the prohibition of women in medical practice.

Medically, there was an attitude that the female body in the Roman world was comparatively equal to that of the man, and this attitude was most apparently carried over into general society. This is perhaps seen in religious practices as well. In Greek religious sanctuaries, there do not seem to have been any prohibitions excluding woman from entering while they were
menstruating; however giving birth was not permitted as the blood from childbirth was a pollutant. This has implications that there were differences in the attitudes about the two types of blood, though references are limited. However, some sanctuaries forbade women to enter at all times, a practice possibly deriving from Greek laws, though whether their original significance was fully understood in the Roman context is unclear (Parker 1983:20, B26-7).

Both Hecate and Diana may also be associated with the menstrual cycle. Diana was identified with the moon, itself associated with menstruation in many cultures. The moon was also associated with things that occur in the evening such as witch-craft and mysterious happenings. With these aspects, Diana is syncretic with Hecate, goddess of witch-craft, crossroads and the underworld (Burkert 1985:171, 200). Once a month a sacrifice was made to Hecate that seems to suggest an association with the menstrual cycle. A food associated with her was the blood red mullet; could this also be a symbolic aspect menstrual blood? One might also ask whether these monthly sacrifices were simply to appease Hecate or a form of symbolic ritual purification. It is possible that there was an association with the menstrual cycle and religion. If so, these sacrifices are suggestive of purification. Whether this ritual was followed by all women is unclear – indeed, Pliny or perhaps Soranus might have commented on these practices if they had; nonetheless, there is the possibility that some women felt the need, or were required, to purify themselves.

Conclusions

In conclusion, Roman archaeology has rarely considered the conceptualisation of the body, despite the considerable potential for such work. From the literature, archaeology and religions of the Roman world, it seems that the functions of the female body were only occasionally considered harmful; they were also seen as life-giving. Unlike many societies, taboos of sexual pollution seem not to have been significant, and this has important implications for our understanding of the symbolism of gendered material culture and the organisation of domestic space. The intertwining of folklore, magical beliefs and scientific ideas make attitudes towards the Roman female body complex, but it is this richness and diversity of perspectives provided by the historical and archaeological evidence – as well as ethnographic parallels – which make this such a fruitful area of research.

Department of Classics, University of Newcastle upon Tyne

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