

Skin over the centuries. A short history of dermatology: physiology, pathology and cosmetics*

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Abstract. Dermatology, as a specialized branch of medicine dealing with skin, has a relatively short history. However, skin itself has an ancient history. The paper, divided into six sections (Introduction; The language of the skin; The skin and anatomy; Skin diseases; Beauty of the skin: Cosmetics; Conclusion), aims to demonstrate that the linguistic and epistemological foundations of modern science are rooted in Greek and Roman medicine.

Key words: skin, etymological analysis, lexical creativity

Introduction

Dermatology has a relatively short history. Skin, with its peculiarities and diseases, remained the preserve of surgeons and general practitioners until the end of the 18th century, when finally, with the thrust provided by the taxonomic classification of the sciences, it managed to establish itself as a specialized branch of study. The lack of consideration given to the skin as an organ *per se* in Greek medicine is certainly behind this delay. The theories of Hippocrates and Galen, adopted by Byzantine medicine and mediated by Arab culture, dominated in European universities from the 12th century onwards. On the whole, these theories were confirmed and justified, and occasionally refuted, but remained indispensable and irremovable

until the 17th century, when the technology of the microscope would allow Malpighi (1628-1694) to scrutinize the complex, layered structure of the skin. The four volumes of *On Cutaneous Diseases* by Robert Willan, author of a fundamental classification of skin diseases based on morphology, were published in London between 1798 and 1808. In 1806, Louis Alibert published the *Description des maladies de la peau observées à l'Hôpital Saint-Louis et exposition des meilleures méthodes suivies pour leur traitement*, a work in which the father of French and European dermatology advocates the importance of practical medicine revolving around the patient, based on the sensory perceptions of a doctor dealing with actual illness. With the stakeholders in the Hippocratic triangle – doctor, patient, illness – the medical-scientific debate on the skin officially begins.

* In this paper Greek authors, if not otherwise specified, are abbreviated as in Liddell HG, Scott R, Jones HS. A Greek-English Lexicon. Oxford: Clarendon Press; 1968. All references to Latin authors are made according to the abbreviations of the Thesaurus Linguae Latinae, followed by the Roman numeral to indicate the book within the work, and Arabic numbers to indicate the chapter and paragraph, or line in the case of a poetic work. For quotes from the works of Hippocrates, reference was made to the edition of Littré E. Oeuvres complètes d'Hippocrate I-X. Paris: J.-B.-Baillière; 1839-1861 and for the works of Galen to that of Kühn C.G. Claudii Galeni Opera Omnia I-XX. Leipzig: Car. Cnoblochii; 1821-1833, adopting the common custom of indicating in brackets the volume number in Roman numerals followed by the page number in Arabic numbers and the abbreviation L. for Littré and K. for Kühn.

Physiology

The language of the skin

An etymological analysis of the Greek and Latin words for “skin” revolves around the single concept of a surface casing that comes off easily, a coating and container of the internal organs: *dérma* had the original meaning of “animal hide”, “bare”, or “skin” of vegetables, from *dérō*, “skinning”, and assumed the specialized sense of “human skin” from Homer onwards (1). The same semantic sphere includes terms from other technical fields, designating “the skin” by metaphor: *rhinós*, “the leather cover of shields” and *teuchos*, “urn”, “container”. *Chrōs* indicates “complexion” that is, the skin in its natural appearance (2). In Latin, the main lexemes are *pellis*, *cutis* and *corium*: for all of them, etymological investigation confirms that they belong to the semantic field of something that contains, covers, protects and comes off easily (3). *Cutis* was the generic term used to refer to the skin of both humans and animals; the high number of occurrences in Celsus stabilized its use to refer to “human skin” in the medical field rather than *pellis* and *corium*, generally indicating “animal hide” (4). The distinctions between *cutis* and *pellis* fade only at the threshold of the Middle Ages; in Isidorus (ca. 560 - 636 AD), the two terms are indiscriminately used to indicate human skin:

Cutis est quae in corpore prima est, appellata quod ipsa corpori superposita incisionem prima patiat: *cutis* enim Graece incisio dicitur. Idem et *pellis*, quod externas iniurias corporis tegendo pellat, pluviasque et ventos solisque ardores perferat. *Pellis* autem mox detracta: subacta iam *corium* dicitur. *Corium* autem per derivationem *caro* appellavit, quod eo tegatur: sed hoc in brutis animalibus proprium. (*orig.* XI 1, 78-79).

Leaving aside the extravagant etymological explanation and the opposition between tight skin/removed skin, there is no trace of that technical-medical use of *cutis*, consolidated by Celsus, now evidently lost and recovered only in the modern age (5).

Indifference of doctors

The semantic field of “surface casing”, to which etymological analysis constantly refers, reflects the

lack of interest of Greek-Roman medicine in skin as an organ *per se* in physiological and anatomical terms. Externally visible anomalies were in any case always considered attributable to an internal imbalance of the humours (6). The typical representation of the signs that announce the end of life – hard, taut and dry, pale or purplish facial skin (II 114 L.) – is repeated in Latin in Lucretius’ “translation” regarding plague victims (*De Rerum Natura* VI 1182) and would be inherited by modern medicine under the name of *facies hippocratica*. It would be Galen (129-200 AD) who identified the skin as the organ of touch, above all concentrated in the skin of the hand, smooth and hairless in order to allow full contact with the objects it grasps (7). After the darkness of the following centuries, the light of Galenic medicine filtered through the synthesis of the Byzantines (from Oribasius, 4th century, to Aetius of Amida, 5th century, and Alexander of Tralles, 6th century), and with the increasing contributions of Arab medicine returned to illuminate Western science in the fledgling European universities of the 13th century, in the wake of that complex phenomenon that runs through the history of medicine under the name of “Galenism” (8). The interest in anatomy, enhanced by the development of the practice of dissection, was another way for medicine to tackle the “skin problem”. Overcoming religious scruples and superstitions of various kinds, whereby the surgeon was seen as a sacrilegious executioner (9), the dissection of corpses became an essential part of university teaching with Mondino de Luzzi (1275-1326). The observation of the human body during autopsy was not only a solid foundation for the study of anatomy but also, and above all, a means of confirming Galen’s theories. The skin was still invisible to the eye of the physician, who despite making an incision in it to proceed with the autopsy, immediately afterwards raised it and moved it aside in order to focus on the structure of the internal organs. Flesh, muscles, bones, nerves and tendons are proudly displayed in the *écorchés* of anatomical tables from the 16th century onwards, encouraging a trend that crossed the boundaries of educational and scientific aid to make forays into art.

Andreas van Wesel

The real breakthrough in the knowledge of the human body came with Andreas van Wesel (1514-1564), a Flemish doctor, who on the dissection table discovered new anatomical facts and revealed them to the world in his *De humanis corporis fabrica* of 1563. Wesel is not a theorist; he does not linger on learned etymological disquisitions on the lexical pairs *dermis/epidermis* and *cutis/cuticola* which had concerned his teachers Ginter von Andernach and Jacques du Boys, but concentrates on analysing the skin in terms of its substance and its constituent layers, with the attention it deserves as the first barrier to be incised during the ritual of dissection. The cutaneous substance is described as a half-way house between flesh and nerves; his investigation focuses on the pores and skin of the various parts of the body, to dwell on that of the hand, packed with nerve fibres. The giants of physiology are dethroned: Aristotle is criticised for having reduced skin to a layer devoid of sensitivity, and Galen for having operated only on animals, and not noticing the subcutaneous layer of fat. The authors after Wesel adhere to these observations, creating the prerequisites for scientific research on the skin in the following centuries (10).

Pathology

Skin diseases

Pliny (*nat.*, XXVI, 1) asserts that in his time in Rome and the surrounding areas new diseases spread that affected the face (*facies*) of men; they were neither painful nor fatal but were so disfiguring that any death would have been preferable (*sed tanta foeditate, ut quaecumque mors praeferenda esset*). Feared not so much because of their seriousness, then, but their appearance, which threatened to seriously affect interpersonal relationships and lead to social exclusion, skin diseases and disorders aroused the interest and curiosity not only of doctors, but also of the poets, historians, naturalists, lexicographers and encyclopedists of Antiquity (11). Skin diseases were not however the subject of monographs until 1572, when Paolo and Antonio Meietti, pupils of Girolamo Mercuriale, published the notes

taken during the lectures of their master at the University of Padua with the title *De morbis cutaneis set omnibus corporis humani excrementis[...] tractatus*, whose first two books, of the five in total, are dedicated to skin diseases (12). In all ages we encounter attempts to exorcise, as it were, the burden of suffering and death resulting from diseases that make their sufferers ugly and deformed, by projecting their origin upon a more or less distant “elsewhere”, evoked by a geographical adjective accompanying a simple common noun. Within Hippocratic medicine there is only a single mention (IX 74 L.) of *nousos phoenikie*, the “Phoenician disease”, about which we can only speculate that it was deadly, little known in Greece and considered common among the Phoenicians (13); in Augustan Rome, Horace (*sat.* I 5,62) speaks of a clown called *Messius*, known as *Cicirrus*, “rooster”, suffering from *morbus campanus*, the “Campanian disease”, a condition that one scholiast defines as a sort of localized wart on the forehead or temples (14). From the end of the 15th century onwards, syphilis, a venereal disease that spread like wildfire all over Europe and which will be discussed in greater depth below, was known in Italy as the “morbo gallico” or “mal francese”, attributing its spread to the French troops of Charles VIII, who arrived in 1494 to lay the French crown’s claim to the Kingdom of Naples. For the French, meanwhile, convinced in turn that they had only fallen ill as a result of the military expedition, it became infamous under the name *mal de Naples* or *mal napoletain*.

Medical dictionary and lexical creativity

The language of dermatology, and in general the technical language of medicine, of which it is a part, was born in Greece with Hippocrates and the authors of the *Corpus Hippocraticum*, then worked upon and developed by Galen, who added the diseases of his day. It was later annotated and extended by Latin authors, above all Celsus, Scribonius Largus, Cassius Felix and Caelius Aurelianus, who consigned it to the Middle Ages and the modern age with a semantic permanence seen especially in cases of simple symptoms or syndromes. The words used to indicate skin diseases follow the trend of the formation of technical terms of general medical language. They are mostly well-known terms from the

botanical, agricultural or zoological field, transformed into “medicalisms” as the result of a process of metaphorisation, based on the similarity of the affected skin with objects of everyday life (15). For Roman medicine in the 2nd century BC, which was still using a language of medical classification of an empirical and popular origin, the encounter with Greek medicine, with its codified and differentiated technical terminology, amounted to an epistemological revolution. In Celsus’ *De medicina*, the treatment of skin lesions of internal origin betrays the educational intention to transpose Greek knowledge rigorously and systematically, without however stifling the contribution of Latin lexical creativity (16). The means used are those of inventory and classification (by genre, form, colour and seriousness). The authority of the Greek language indicated the degree of aggressiveness of the condition: the malignant form, difficult to treat, is termed *agriā* (17), “savage”, and the Greek terms indicating the colour types of *vitiigo* (Cels.V 28, 19) on one hand indicate the success rate of therapeutic intervention (high for *alphós*, “light-coloured” and for *mélas*, “dark”; almost nil for *leúkē*, “white”), and on the other clarify the phenomenon of local depigmentation, a distinctive trait of the disease. In an unprecedented technique Celsus (V 28, 14) uses certain Greek words to enrich and diversify the sense of an existing Latin term that does not have an exact equivalent in Greek, such as *verruca*, which covers *acrochordon*, *thymion* and *myrmecia* (18). As part of the linguistic experimentalism engaged in by Latin authors for dermatological diseases, Pliny’s *mentagra* (*nat.* XXVI, 2-3) deserves to be mentioned. This repelling disease characterized by peeling of the skin starting with the chin, was clearly seen as equivalent to the *lichen* of the Greeks (15); but the term, of apparent popular origin and of a hybrid linguistic nature (from the Latin *mentum*, “chin” and the Greek *agra*, “captures”, used in medical language as a suffix for terms regarding types of *podagra*, “foot disease”, and *chiragra*, “hand disease”), is used by Pliny to refer to an extremely serious disease, which spread to Italy from Asia about halfway through the reign of Tiberius, transmitted through kissing. This is the first historical mention of a kissing disease that the moralistic medicine of the early 20th century attributed to the widespread practice of *fellatio* and *cunnilingus* (19). Educational purposes can also be seen at work in the *De medicina* by Cassius Felix (5th century), in which each

Latin term is systematically accompanied by the Greek equivalent to minimize the margin of risk related to the failure to identify a disease (20). The terms used by Cassius Felix to indicate skin diseases express the vitality of popular language, since these are terms whose basic meaning refers to objects belonging to everyday life. The name of chilblains, for example, that Celsus (V 28, 6) had rendered with *ulcus hibernum*, perhaps to be closer to the Greek *chimethla* – from *cheimōn*, “winter” – in Cassius is *perniones*, a term derived from *perna*, “dried salt pork thigh” (16). Despite the apparent effort of Greek-Roman medicine to develop and differentiate the dictionary of skin diseases, terms indicating skin conditions are often generic and vague, almost hypernyms, in which it is difficult to identify specific diseases. This applies especially to the diseases that in the modern age are classified as “leprosy”, “scabies” and “herpes.”

Leprosy

In modern medical language, leprosy refers to a serious chronic infectious disease that mainly affects the skin, peripheral nerves and bones, caused by *Mycobacterium leprae*, discovered by Hansen in 1871. Although the name of the disease directly recalls the Greek term *lépra*, occurrences in the *Corpus Hippocraticum* relative to *lépral/leprós*, “squamous”, refer to benign skin conditions, or minor deformities (13), completely unrelated to the horrible mutilations which are associated with the modern meaning of the term. In fact, the real leprosy of the ancient world was called *elephantiasis*, a serious and fatal disease, which physicians in the Roman period were careful not to associate with the *lépra* or *leukē* of Hippocrates, and which Galen identified in the unrecognized and exotic “Phoenician disease” (13). The terms *elephantiasis*, *elephas morbus* and *elephantia* (Cels. III 25,1; Scrib. Larg. 250) are Greek calques which clarify the metaphorical use of the reference to the animal, both due to the obvious symptom of the thickening of the skin, both and to the seriousness of the disease: “elle a été considérée comme una *grande maladie*” (15, 21). The term ‘leprosy’ in its medieval and modern meaning of a scourge that disfigures and mutilates, came via the Greek Septuagint (22), where the term *lépra* was used to translate the Hebrew *tsarâ’ath*, the disfiguring skin disease and

manifestation of God's wrath, which involved a whole series of restrictions and prohibitions for those who were affected by it (*Leviticus XIII 2-46*). In late Antiquity the terms *elephantiasis* and *lepra* were synonyms, but the latter become more common as early as the 6th century, with the establishment of the first leper colonies in Europe. In modern medicine the term "elephantiasis" refers to a lymphatic condition that causes roughness of the tegument, caused by infestation with filariae, nematode worms from warm regions (23).

Scabies

In modern medicine, scabies is a contagious infectious disease caused by the itch-mite *Sarcoptes scabiei*; it presents characteristic symptoms such as intense itching and skin tunnels dug by the parasite. The term *scabies*, from *scabo*, to "scratch", indicating a "disease that makes you scratch", is widely attested in Latin medical literature in reference to animals and humans (3). Commonly perceived as repugnant and contagious (24), this disease was described for the first time by Celsus (V 28,16), where it appears characterized by reddened skin with blisters and pus, itching ulcers, speed of spreading and tendency to reoccur. The most severe form or "agria", indicating an itchy condition resistant to any treatment has been related by some to a severe form of eczema (25), by others to the scabies of modern medicine (26). The descriptions from Pliny to Isidorus, while adding information to that supplied by Celsus, do not report distinctive peculiarities for this disease, often placed in relation to the *psōra* or *lēpra* of Greek medical language (27). In light of this evidence, more or less recent studies have highlighted the impossibility of precisely identifying the *scabies* of antiquity with the scabies of modern times. *Scabies* remains a generic term used to indicate various forms of eczema or psoriasis: itchy dermatosis in Celsus and Theodorus Priscianus; scaly dermatitis in Cassius Felix and Isidore of Seville (28).

Herpes

The term *herpes*, from the greek *herpō*, "to crawl", is polysemic in nature in ancient medicine. It is generally used to indicate widespread and ulcerative skin lesions

rather than a single, specific condition (29). A comparison with surviving documents has led to the identification of the two types of Celsus' *ignis sacer* (V 28, 4), respectively, with *herpes zoster* (30) and the modern-day erysipelas (31). Herpes would thus be Celsus' "sacred fire": the combination of two sensations (*rubor cum calore*) recalls the image of fire, a metaphor reinforced by *sacer*, which introduces a divine and demonic connotation (16). In medieval times *ignis sacer* referred both to rye ergot poisoning (ergotism), and to a severe form of *herpes zoster*, commonly known as shingles (in Italian as *fuoco di S. Antonio*, "St. Anthony's fire"). What is embarrassing is that a single denomination designates various diseases that have no relation to each other (32).

Syphilis

Syphilis, an infectious sexually transmitted disease, is caused by the bacterium *Treponema pallidum*, identified in the early 20th century. It owes its name to the young shepherd Syphilis, the main character of the didactic poem in Latin hexameters *Syphilis sive De morbo gallico libri tres* by Girolamo Fracastoro (1530) who, having offended Apollo, is punished by the god with a terrible disease that irremediably disfigures his beauty. As far as regards the name *morbo gallico* ("Gallic disease"), as already mentioned, this expresses the conviction that the epidemic originated with the French. The origin of syphilis is a contentious issue that has divided historians of medicine. According to the most reliable epidemiological interpretation, it is now believed that syphilis spread in Europe no sooner than the last decade of the 15th century, arriving with the sailors of Christopher Columbus, returning from the West Indies, where the disease was endemic. Mercury and the zest of guaiacum, a tall plant from Central America, from then onwards known as *legno santo*, "holy wood", used in decoctions to be spread on diseased parts or to be ingested, were considered the only effective remedies (33).

Since ancient times, the names of skin diseases have increased and undergone changes as methods of classification have become more informed and thorough. Nevertheless, the influence of classical authors has been constant. In the mid-17th century, a period when Cosimo Giovanni Bonomo and Giacinto Ces-

toni discovered the aetiology and pathogenesis of scabies, the method for effectively describing and classifying skin diseases is reminiscent of the didactic aims of the ancient Latin medical treatises: Bartolomeo Buonaccorsi (1618-1656), author of *De externis malis opusculum*, presents bullous impetigo and chickenpox thus: «scloppae, vulgo schioppole, sunt vesiculae quae per totum corpus spargi solent, rubicundae, humore turgentes». The creativity of popular language and the liveliness of lexical creation, characteristic of Greek and Roman medical treatises, is not abandoned even as late as the 18th century, when Francis Frappolli, carefully describing the so-called “illness of the rose”, was the first to call it «pellagra» (recalling the linguistic operation performed by Pliny with *mentagra*). Lastly, there was the Florentine Vincenzo Chiarugi (1739-1820), the first Italian dermatologist to play an official role in university education, who in the title of his *Trattato sulle malattie sordide della pelle*, (“Treatise on sordid skin diseases”), retains that sense of *foeditas* which had accompanied the perception of skin diseases throughout antiquity.

Cosmetics

Beauty of the skin and society

In the cultural imaginary of every period, attention to skin care and the beauty of the body has represented a form of externalization of the self, through the construction of a bodily image in line with the dominant aesthetic and health parameters. Medicine’s interest in beauty finds in cosmetics a legitimate epistemological justification. It was a constant concern of ancient physicians to guarantee the restoration of the natural state of beauty, especially after disfiguring diseases (34). For Galen (XIX 383 K.), someone who was beautiful was also healthy; beauty, the harmony of bodily proportions and a perfect complexion were an expression of the balance of the four humours and the four elements, a reflection in miniature of the harmony of the universe (Gr. *kosmos*; Lat. *Mundus*) (35). Pergamon, though averse to the use of makeup aimed at artificially creating beauty (XII 434 f. K.), devotes ample space in his writings to cosmetics and doctors who have written about cosmetics (36).

The failure to mention any type of rouge is indicative of a certain censure of women’s makeup. Previous texts, regardless of the literary genre to which they belonged, had restricted their attention on the topic of beauty to the subject of *cures*, obtained using harmless natural substances (37). The heavily made-up women we meet here and there in the works of satirists are mostly prostitutes, whose makeup expresses their social status: they dye their hair blonder with *sapo* from Mainz, obtained from a mixture of goat’s tallow and beech ash (Plin. *nat.* XXVIII 191 and Mart. XIV 26), they plaster white makeup on their foreheads and arms with chalk and white lead (Mart. II 41, 11-12; VIII 33,17), and black on their eyelashes and around their eyes, using *fuligo* or powdered antimony (Juv. II 93; Mart. IX 37). Women of respectable imperial society cannot do the same, prevented by the strong influences of a mentality that condemned makeup as an instrument of lust (Prop. I 2, 1-8; Sen. *dial.* XII 16, 4), in sharp contrast with the simplicity of the good old days. The negative opinion of cosmetics expressed by the Fathers of the Church, for whom Christ was both doctor-healer and an emblem of suffering in the sick body, was, of course, dictated by theological reasons. Hair dye, for example, guiltily contradicts the words of Christ (Mt 5,36) and implies that the creation is flawed (38). Byzantine medicine closely observes the trends of a society that increasingly gives importance to physical appearance and aesthetic values and devotes ample space to cosmetics, in particular the elimination of wrinkles, stains and hairs, and the thickening and dyeing of hair and eyebrows. The beauty of the Emperor and Empress, immortalized by iconography and historians, conveys a strong ideological message, expressing superiority, demanding divine veneration and creating role models (39). The recipes that make men and women look attractive, a heritage of the classical pharmacology of Dioscorides and Galen, multiply and are given even more space in the works of Theophanes Nonnus (10th century), Michael Psellos (11th century), and Joannes Actuarius (14th century).

Cosmetic medicine

The women doctors of the Byzantine and medieval periods practice and write on women and for women, trying out medical treatments and cosmetic

recipes on themselves. Metrodora, author of a treatise in Greek, *On the Diseases and Cures of Women*, focuses on depilatory treatments, toning lotions for the face and breasts, recipes for perfumes and potions for success with men (40). Medical science becomes a vehicle for social emancipation and is not afraid of ideological or religious censorship, especially in particularly fertile contexts. In Salerno, the *civitas hippocratica* of southern Italy, home to a thriving medical *schola*, mostly the domain of men, a large number of *mulieres* and women physicians were active between the 11th and 15th centuries, among whom pride of place goes to Trota of Salerno, wife of the famous doctor Platearius, and mother of the equally famous doctors, Johannes and Matthaeus Platearius. author of *De ornatu mulierum*, a cosmetics treatise, Trota does not espouse a pre-established canon of beauty. She set forth new practices learned from Saracen women and casually provided recipes for treating skin, dying hair, whitening, applying facial makeup and even “reacquiring” lost virginity. Putting aside the ongoing debate regarding Trota the author and Trota the “celebrity”, the cultural impact of this woman physician deserves attention. She managed to definitively do away with the traditional feminine virtues of chastity and modesty, legitimizing female pleasure in the care of one’s body and in the discovery of one’s sexuality, for too long relegated to the exclusive prerogative of the *meretrix* (41). From the Middle Ages to the Renaissance, beauty recipes, essential remedies for blemishes caused by skin diseases, occupy an official place in medical-cosmetic literature that speaks in the vernacular when it wants to reach a wider public, in Latin when it is the subject of university lessons. Giovanni Marinello, in his *Gli ornamenti delle donne* (1563), speaks directly to his women readers, stimulating the interest of a lay public towards more or less severe skin conditions – itching, scabies, leprosy, hirsutism etc. – that while not disfiguring as such, clearly make the sufferer less attractive. Gabrielle Falloppio and Girolamo Mercuriale dedicated university courses to explaining their medical and cosmetic works entitled *De decoratione* (3). However, medical cosmetics passed new milestones in the 16th century, and on the threshold of the 17th century, the *turpitudines* were dealt with comprehensively in of Gaspare Tagliacozzi’s *De curtorum chirurgia* (1597). In this way the modern

age revived Galen: beauty, which is the health of the body, should be recovered and sought by every means. Where pharmacology fails, the scalpel steps in.

Conclusion

Before receiving official blessing as a specialized branch of medicine (18th-19th centuries), the study of skin did not receive the attention it deserved over the centuries. The cause of this delay can be explained by the common perception of the skin as something external, superficial and superfluous at the same time, as seen by the semantic scope of the wide variety of terminology in Greek and Latin, which insisted on the notion of ‘surface envelope’. Greek-Latin medicine attributed the skin with a purely instrumental function. In the *Corpus Hippocraticum* the skin is either a screen protecting against atmospheric agents (VIII 596 L.) or serves for the perspiration of sweat through the pores (VI 102 L.) or, as we have seen, is the external representation of a pathological disorder of the internal organs. In the literary imagery of the Ancients the skin was not the bearer of good news. It became visible, along with the bones, to indicate the bodily decay (see for example Plaut. *Capt.* 135: *ossa atque pellis sum*) that the suffering of sickness and old age had emptied of everything that made it alive and vital: *pellis* and *cutis* merely represented the inert and insensitive matter of a body that had already been delivered to death, and in the metaphorical scope the proverbial expression *pellis curare* (e.g. in Hor. *sat.* II 5, 37-38 and *epist.* I 4,15) described the attitude of those who devoted themselves exclusively to external aspects and neglected the important things in life.

Although from the Renaissance onwards scientific discoveries progressively saw a rise in specialist medical interest in dermatology, however, the greatest acknowledgment to the learning of the Ancients is the fact that the terminology for the classification of diseases remained almost intact. Still today we preserve the same lexical variety that Greek-Roman medicine had adopted and divulged, focusing on expressive creativity which, however, in many cases did not correspond to specific conditions, something that would not happen until the modern age.

The historical-cultural path followed in this study reveals interesting social implications, consequent to the positive effects of increasing attention on the skin. The sense of repulsion created by the visibility of dermatological diseases, often stressed in ancient works, certainly heightened the sensitivity of physicians also to aspects of cosmetics and aesthetic medicine, achieving results that in ancient times could not even be imagined, such as the emancipation of women and the sense of care and respect that each person has for themselves and their body.

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