

CHAPTER 14

Persuasion in Hungarian Medical Recipes

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There is wondrous power for curing that in the skull of a dead man.
(MBM-203)

Recipes constitute one of the most ancient genres of the medical text tradition, which has served as an important medium for sharing knowledge about healing since the very beginning of medication. Moreover, it also preserves and transmits sociocultural practices of healing as well as several other practical activities characteristic of particular ages and nations, thus functioning as a kind of ‘cultural footprint’ or ‘mirror’ (De la Cruz-Cabanillas 2020: 57–8). This continuity also underlies the social relevance of the genre (Heinemann 2000: 520).

In the sixteenth and seventeenth centuries, recipes were an especially prominent genre in medication and in the compilation and documentation of knowledge related to household activities (Leong 2018). This is testified to by recipe collections, remedy books preserved either in a handwritten form or in print, and also by knowledge and experiences shared in letters. Beyond sharing knowledge, such texts also foreground the function of persuasion by affirming the efficacy of a recommended therapy and by aiming for the creation of a positive attitude in the reader (McVaugh 1997: 216), which is linguistically well documented (e.g. Jones 1998; Taavitsainen 2001; Alonso-Almeida & Cabrera-Abreu 2002; Mäkinen 2011).

The goal of this chapter is to identify major patterns of persuasion in sixteenth- and seventeenth-century Hungarian recipes. It begins by offering an overview of the main features of sixteenth- and seventeenth-century healing and the related medical text tradition, highlighting the role of

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medical recipes as a genre in this context. This is followed by a demonstration of the material, methodology, and research questions of the investigation. The results section presents the most characteristic categories and linguistic constructions of persuasion in the material under study. Finally, the chapter ends with a short summary and concluding remarks.

14.1 The Sociocultural Background of the Hungarian Medical Discourse Domain in the Sixteenth and Seventeenth Centuries

The roots of Hungarian healing practices can be traced back to shamanism. However, apart from this early period, they have formed an integral part of the history of European medication, whose main features and stages are highlighted here in their relation to the corresponding medical text tradition.

Medication in Hungary in the sixteenth and seventeenth centuries was characterized by a high degree of heterogeneity. While the traditions of ancient Greco-Roman and Arabic medicine continued, folk healing also played a remarkable role, usually drawing on personal experiences, beliefs, and superstitions. In addition, the influence of organized religion ought not to be overlooked (Hoppál 1990: 699–701). Healing belonged to the spheres of both science and everyday practice, with the latter engaging a broad spectrum of society through a highly varied group of healers (see Figure 14.1). Apart from a small number of physicians, pharmacists, and barbers, most of the healing was carried out by specialists working among the people. Inevitably, this had an impact on the vernacular medical text tradition, in which scientific works accounted for a minority compared to popular recipe collections, remedy books, and herbarium books (Voigts 1982; Taavitsainen & Pahta 2004: 160).

The sixteenth and seventeenth centuries mark the first stage of Hungarian medical writing, providing the earliest surviving documents of considerable length. From the preceding periods, only fragmentary texts survive. As Szlatky observes:

Manuscripts and printed books together characterize the first period of Hungarian medical literature, and any differences resulting from printed as opposed to manuscript forms are easily offset by similarities deriving from shared themes, modes of presentation and the medium of Hungarian. (Szlatky 1983: 384)

Scientific treatises did not appear in Hungarian in the sixteenth and seventeenth centuries. Thus, surgical practices were primarily shared in

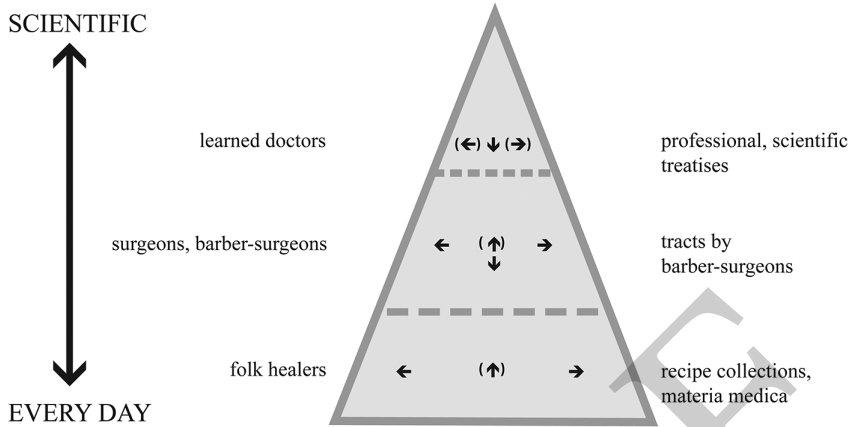


Figure 14.1 Correlations between the layered structures of medication and medical communication (sixteenth and seventeenth centuries)

recipe collections and other remedy books. From references made by contemporary authors, it is safe to infer that Hungarian-language medical literature must have included considerably more vernacular texts than those that are available to posterity (Szlatky 1980: 134).

Most of the surviving medical writings from this period are manuscripts (see Figure 14.2). The manuscripts were typically produced by compilation, translation, and copying, and have little in the way of a unifying principle. The professional standard of these compilations varies greatly, depending on the quality of the authors' sources and that of the translation. The key feature of these collections is that they served practical purposes. The texts are typically everyday recipe collections, remedy books, and herbarium books indicative of the scientific level of the era. In all of these texts, the genre of recipes plays a prominent role.

14.1.1 *Recipe: Context for Persuasion*

For millennia, recipes have been a central genre for sharing knowledge about healing and other practical everyday information. This holds true for the sixteenth and seventeenth centuries as well, with recipes permeating all levels of the medical text tradition (Taavitsainen 2001; Carroll 2004; Alonso-Almeida 2013). At this time, recipes played a key role in doctors' works, surgical documents, and everyday recipe collections alike.

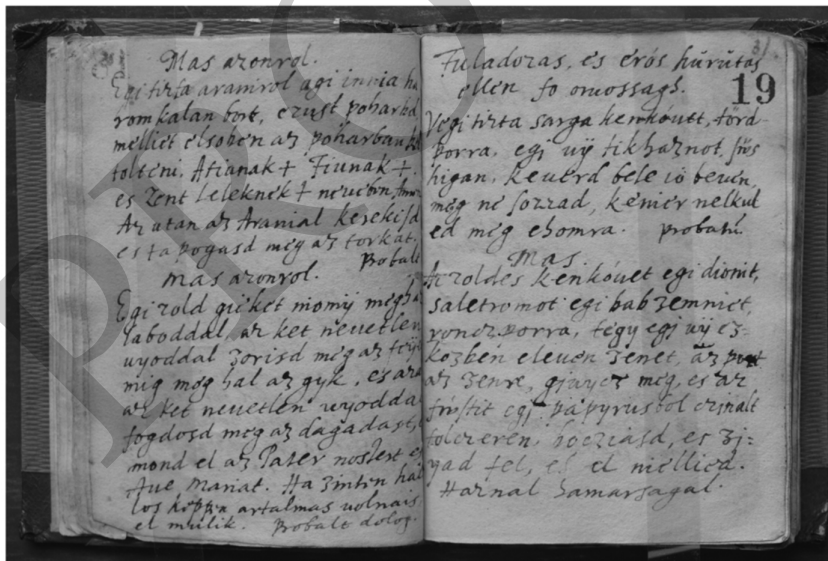
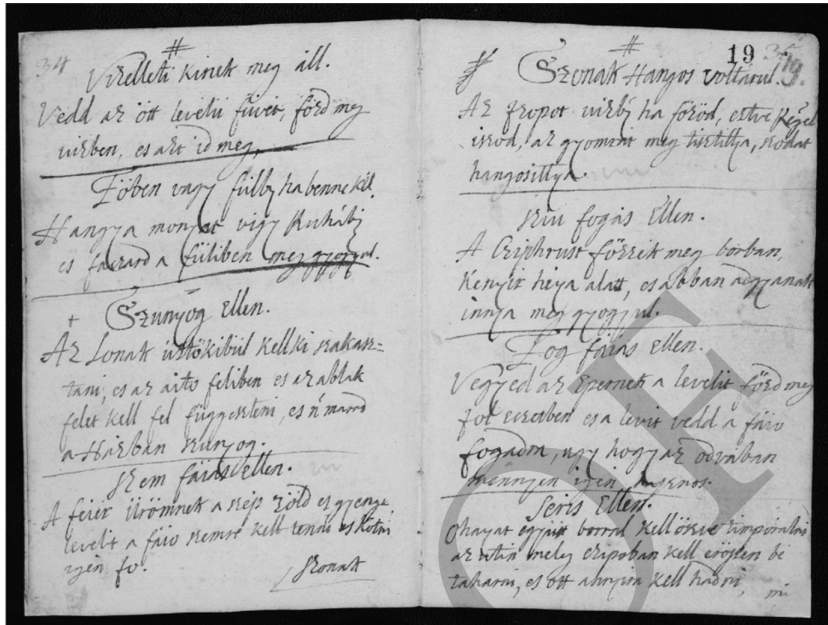


Figure 14.2 Illustrations of the manuscripts KP and HP

In the era under study, a recipe can be considered as a basic-level genre with several subtypes organized thematically (Hunt 1990: 16–17) or according to typical speech situations (e.g. therapeutic, herbal recipes, bloodletting, veterinary knowledge, dietary suggestions and beauty care, cookery recipes). They served as a key medium for sharing everyday knowledge ('household science') at the time (Leong 2018: 4) and had a much broader sphere of use than they do now. The basic or general theme of the genre is USEFUL KNOWLEDGE.¹ Thus, the notion of positive evaluation and a concomitant persuasive intention are already evident in a recipe's theme. USEFUL KNOWLEDGE is typically elaborated in relation to recommended actions ('this is how to do it'; Carroll 2004: 188). More specifically, recipes are instructions (Görlach 1992: 745; Taavitsainen 2001: 86) for the preparation of a substance, whether it is medicine, food, or some other everyday item (soap, wool, etc.).

Recipes include different types of typical information, though none of it is obligatory (Stannard 1982: 60–5). While subject to variation, the arrangement of this information follows a clear communicative principle or textual strategy, namely that of chronological sequencing (Taavitsainen 2001: 98). Prototypically, information occurring in sixteenth- and seventeenth-century recipes can be packaged into three functional units (Kuna 2016a: 205): (i) *heading* (what it is for: introducing an illness and its cure at a conceptual level); (ii) *section for instructions* (how much of what, and how: ingredients, measurements, instructions, methods, and tools); and (iii) *persuasion* (with an emphasis on efficacy and usefulness):

(1) *Ver hasrul* [heading].

Szedgied az cyprust, rutath, tongöri szölöt, eggiot főzd meg feier borban es igia meg. [section for instructions]

Probatum est. [persuasion] (TOK-176; emphasis added)

('Dysentery. Take cypress, rue and red currant, cook them together in white wine and let the patient drink it. This has been tried.')

The third functional unit, persuasion, is the focus of this chapter. In the analysis, however, I examine not only text-final persuasive units but rather the texts in their entirety, exploring persuasive communication. In the

¹ Conceptual categories/domains are marked by small caps, in line with the conventions of cognitive linguistics. A conceptual domain or frame is a coherent body of knowledge organized around a central concept (Croft & Cruse 2004: 17).

section below, I outline its linguistic and conceptual manifestations as well as its strategic character.

14.1.2 *Persuasion in Recipes*

The functional unit serving the purposes of persuasion by highlighting the recipe's efficacy has been broadly analysed in the literature, going by a variety of terms such as *efficacy statement*, *efficacy phrase*, *tag phrase*, and *stock phrase* (see e.g. Jones 1998; Alonso-Almeida & Cabrera-Abreu 2002; Mäkinen 2011). Efficacy phrases evaluate the medical value of a recipe and create a positive attitude toward it. As the earlier analyses have revealed, efficacy phrases have a variety of forms and roles. These expressions often signal the influence of a Latin source, which is characteristic of the genre; moreover, they also provide clues for textual organization. Prototypically, efficacy phrases appear toward the end of medical recipes (Cameron 1993: 40; Jones 1998: 201). However, other positions are also possible (Hunt 1990: 22–4; Taavitsainen 2001: 104–6; Alonso-Almeida & Cabrera-Abreu 2002: 140; Mäkinen 2011: 161–2).

Taking stock of previous studies on efficacy phrases but also departing from them in certain ways, the present analysis focuses on the linguistic and conceptual elaborations of persuasion, as well as the relationship between persuasion and evaluation in sixteenth- and seventeenth-century Hungarian medical recipes. Patterns of persuasive intent (and not the persuasive effect; Jucker 1997: 122–3) are considered in light of the contemporary sociocultural background of the texts.

In the analysis, persuasion is interpreted as a linguistic-conceptual strategic action aimed at changing the addressee's attitudes or behaviour, or at reinforcing her existing beliefs and conceptions with respect to a given phenomenon (Jucker 1997: 122; Virtanen & Halmari 2005: 5). In relation to attitudes, evaluation is a key aspect of persuasion, as indicated by the fact that one of the main ways of expressing persuasion is by using evaluating assertive speech acts (Ortak 2004: 149). Evaluation has both direct and indirect forms of instantiation, depending on whether the speaker expresses value attribution with an explicit linguistic symbol (e.g. *good*, *wonderful*) or opts for indirect construal by relying on background information (e.g. the authenticity of a person). Though linked to persuasion and its polarizing style of suggestive communication (cf. Ortak 2004: 155), value attribution may of course also receive expression by other speech acts, too. In the case of recipes, these include promises and

prognostications related to the result of therapy (Alonso-Almeida & Cabrera-Abreu 2002: 145–51).

14.2 Research Data and Method

Owing to the lack of an electronic corpus of Hungarian medical language, the material of the present empirical research on persuasion in recipes consists of the transcripts of five handwritten recipe collections for everyday use,² as well as the earliest surviving handwritten remedy book in Hungarian, *Ars medica* (ca. 1577). The latter has been made available in a software-based form as well (Szabó & Bíró 2000), which serves as a basis for the analysis of this remedy book. Although the selected works (see Table 14.1 and sources) cannot showcase the medical discourse domain of the era in its entirety, they still supply representative material for the study of major patterns of expressing a persuasive intent. This representativity comes from the fact that they comprise a high number of recipes (approximately 15,000–18,000) and display characteristic features of recipes of that time. The overwhelming majority (more than 95 percent) of the texts are related to healing; however, household know-how (about hunting and bee-keeping) also occurs in some of them, especially in the recipe collections.

The analysis of persuasion adopts a pragmatic perspective (Pelclová & Lu 2018) and primarily follows qualitative principles. The latter is in part justified by the fact that no electronic corpus of Hungarian medical recipes is available at present; therefore, methods for a corpus-based pragmatic study of persuasion cannot be applied (e.g. Mäkinen 2011). Additionally, the choice of qualitative methods also results from the goals of the analysis. Specifically, the exploration of genre-specific conceptual patterns invites qualitative analytical methods. The coding and mapping of patterns do, however, facilitate quantitative analyses and contribute to the goal of allowing persuasion to be searched for and studied also in a quantitative manner.

Over the course of analysis, I adopted a multistep procedure. Conceptual categories (codes)³ associated with persuasion were established

² Work on compiling the sixteenth- and seventeenth-century subcorpus of the *Corpus of Medical Hungarian* is in progress (Kuna 2016b). Several manuscripts have received literal and normalized transcriptions, but they are not yet publicly available. This is the reason why the present analyses are based on Hoffmann's (1989) literal transcriptions of the recipe collections. References to examples correspond to the numbering conventions of the source. The recipe collections are not variations of a single manuscript, as only a few of the recipes are shared by all of the collections.

³ The terms *conceptual category* and *code* are used interchangeably here. Although in linguistics *code* has several meanings, in the present chapter it is adopted in accordance with the terminology of qualitative software-based analysis.

Table 14.1 *Data about the manuscripts under study*

Title of the manuscript ^a	Number of recipes	Word count	Abbreviation ^b
<i>Ars medica</i>	Not known	192,913 words	AM
<i>Testi orvosságok könyve</i>	399	12,693 words	TOK
<i>Kis patika</i>	156	4,875 words	KP
<i>Házi patika</i>	262	8,210 words	HP
<i>Medicusi és borbélyi mesterség</i>	1,426	43,131 words	MBM
<i>Mindenféle orvosságoknak rendszedése</i>	232	13,862 words	MOR
TOTAL	6,877 (+AM)	275,684 words	

^aFor English translations of the titles, see sources.

^bFor specifying the source of each example, I use these abbreviations along with the recipe number or the numerical structure of the manuscript itself.

at multiple levels. First, I used a sample consisting of around 5,000 recipes to study acts of persuasion as functionally distinct textual units within recipes (Kuna 2016a: 214–16). In this earlier work, which was oriented toward text typology, it was already highlighted that persuasion formed part of an overall text-producing strategy. For the analysis of this strategy, a preliminary system of categories was subsequently set up, aimed at describing typical conceptual categories of persuasion in recipes. This procedure involved taking stock of and categorizing linguistic constructions associated with a persuasive intent and positive communication, in a way that was informed by related analyses in the disciplines of rhetoric and psychology, as well as studies of early and modern-era medical communication.

After setting up a system of categories, its validity was tested by eight Master of Arts (MA) students of psychology taking a course on suggestive communication in a medical context. Two students identified their own coding categories for words or phrases they regarded as having persuasive or suggestive force. They also provided descriptions for the coding categories. The codes described by the two students overlapped considerably with my own coding criteria. After the conflation and re-editing of the two lists of coding categories, six other students encoded the same 100 recipes (4,285 words) with the help of precise code descriptions. With the exception of one coder, intercoder agreement was in the range of 60–90 percent. In 2018, an MA student of linguistics again performed the coding process. With regard to the marking of passages in the texts

and the main conceptual categories, her work resulted in intercoder agreement exceeding 80 percent with my own analysis. It should be noted that in this system a persuasive phrase can receive multiple codes. Beyond coding the conceptual-linguistic categories of persuasive expressions, I also marked the position of each persuasive phrase within a recipe, with the aim of determining the positional distribution of such phrases (see Section 14.3.2). The coding procedure is illustrated in the following example:

- (2) *Ha az örménygyökeret megsütöd, megtöröd, vajban megfőzöd, az ótvart megkened véle, **meggyógyul vele szépen.*** (MBM-120; emphasis added)
(‘When you fry horse-heal, crush it, cook it in butter, and spread it on impetigo, **it heals nicely with this.**’)

In (2), a total of three codes are associated with the quotation *meggyógyul vele szépen* (‘it heals nicely with this’). With regard to distribution, it is text-final; in terms of content, it profiles GOOD, NICE, as well as HEALING (see Section 14.3.3). The entire analysis followed the same principle. In the five recipe collections, 2,912 phrases (quotations) were classified as pertaining to persuasion, and a total of 4,170 code designations were made.

After the codes were updated to their final versions, the subsequent qualitative analysis was performed with the software ATLAS.ti 7.2, which is able to visualize the co-occurrence or overlap of code categories, and also lists coded linguistic representations. This way, it was possible to retrieve typical linguistic constructions expressing a persuasive intent, which can be later integrated into the automatic query of expressions with a persuasive function in an electronic corpus.

This idea was put to the test in the analysis of *Ars medica*. The codes set up and validated by employing multiple coders as well as the software-based analysis served as a basis for the study of *Ars medica*, which I performed on the electronic edition of the remedy book (Szabó & Bíró 2000). This part of the present study incorporated the use of the proprietary search engine of ATLAS.ti to retrieve the linguistic representations of the conceptual categories, as supplied by ATLAS.ti. This change of method was made necessary by the fact that *Ars medica* is hardly amenable to qualitative analysis by ATLAS.ti, as the software is ill-suited for the study of such lengthy documents. The setting up of codes and the linguistic representations emerging from the analysis of recipe collections made it possible to search for tokens in this extensive work, and thus to collect linguistic representations related to the conceptual-linguistic category of persuasion.

I used a lemmatized search to retrieve token clusters. For example, in the case of USEFULNESS (*hasznosság*), I searched for more than twenty word-forms related to the category (e.g. *haszn**, *hat**). The same procedure was adopted for all the other categories as well; that is, I examined possible linguistic representations identified by earlier analyses and searched for (as well as manually filtered) them individually. This was partly made necessary by the fact that not all of the tokens were related to persuasion; moreover, it sometimes happened that the search engine displayed two searched-for tokens in the same window, at the same time. Therefore, frequency could only be calculated on the basis of manual checking of tokens. When it comes to personal names, geographical names, and similar categories, my work was aided by the word list of *Ars medica*. Ultimately, I identified and analysed a total of 3,884 phrases related to persuasion in the remedy book.

By using the material and methods described above, I sought to answer the following questions: With what frequency do persuasive phrases occur in recipes? In which position or in which part of the recipes do they occur? How can they be described in terms of conceptual-linguistic categories? What co-occurrences do these categories display? What role is played by the concept of VALUE, including both its positive and its negative poles, in the expression of persuasive intent? Do acts of persuasion have a prototype in Hungarian medical recipes of the sixteenth and seventeenth centuries? In what follows, I discuss the results of my analysis in terms of their relevance for these issues.

14.3 Trends of Persuasion in Sixteenth- and Seventeenth-Century Hungarian Recipes: Results

14.3.1 Frequency of Persuasive Phrases

Based on the analysis, a total of 6,796 persuasive phrases were identified in the six manuscripts. Their distribution is presented in Figure 14.3.

In the case of the five recipe collections analysed by ATLAS.ti, I conducted a further survey to find out the ‘density’ with which persuasive phrases occurred in particular manuscripts, in order to facilitate comparisons. The frequency of persuasive phrases in recipe collections was compared in terms of three numerical indices. F1 concerns the average number of phrases per recipe, measured by dividing the number of persuasive quotations in the manuscript by the number of recipes. The second index, F2, specifies the average number of persuasion-related code designations

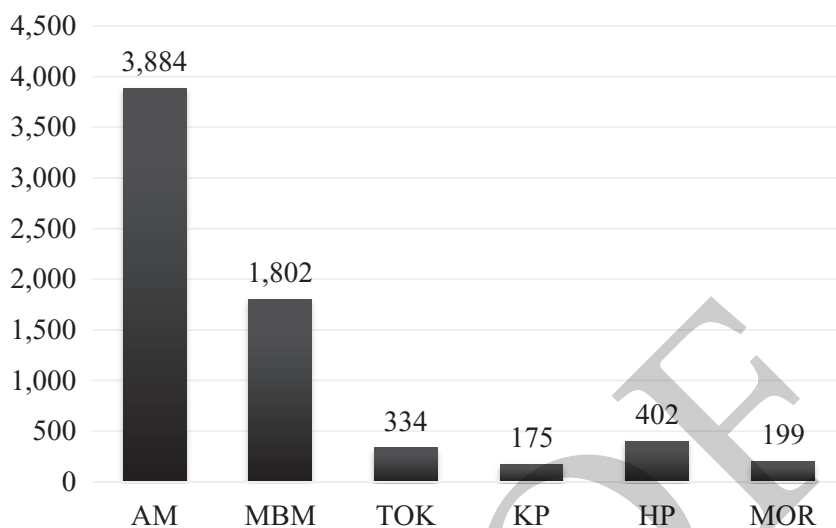


Figure 14.3 The numerical distribution of persuasive phrases in the recipe collections

per recipe, measured by dividing the number of persuasion-related code designations in the manuscript by the number of recipes. Finally, the third index, F_3 , highlights the frequency of occurrence of persuasive phrases with respect to the number of word tokens (the number of persuasive quotations divided by the number of word tokens in the manuscript, multiplied by 100 for the sake of ease of exposition). The values of the three figures in particular manuscripts are presented in Figure 14.4.

As we can see, in MBM, KP, and HP, on average there is more than one persuasive quotation per recipe. Of course, this does not mean that every recipe would have a persuasive part (some of them have none, while others include several). In the recipe collections TOK and MOR, by contrast, F_1 falls below 1; that is, on average there is fewer than one persuasive phrase in the recipes. F_2 , for its part, concerns the question of how often the conceptual categories co-occur, typically enhancing each other's effect. This index is the highest in MBM and HP, around 2. This means that on average two categories are combined in particular quotations in every recipe. F_2 is at its lowest in TOK and MOR, with values around 1. This means that generally just one code designation is associated with each quotation. Looking at F_3 , we can see that persuasive phrases have the highest share with respect to the number of word tokens in HP (4.8), MBM (4.1), and KP (3.5). By contrast, the F_3 values of TOK (2.4) and

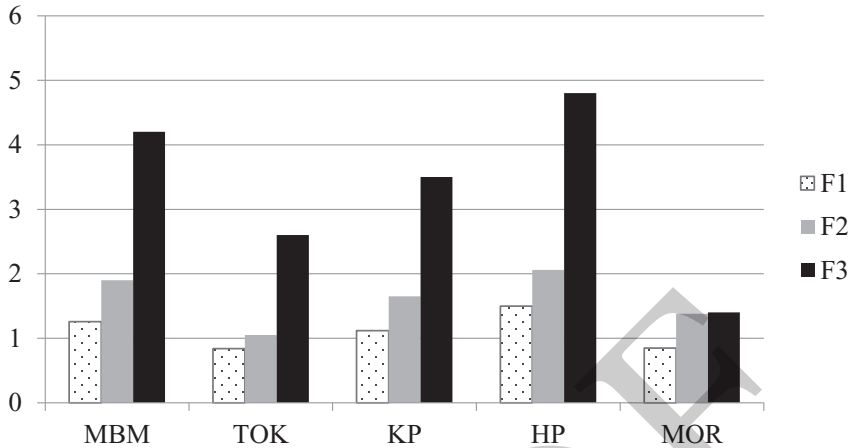


Figure 14.4 Values of F₁, F₂, and F₃ in the recipe collections

MOR (1.4) are much lower. Based on the three figures, the elaboration of persuasive acts is more intense in MBM, KP, and HP than in TOK and MOR.

14.3.2 *The Positional Distribution of Persuasive Phrases in the Texts*

I examined the distribution of linguistic representations of persuasion in the five recipe collections analysed by ATLAS.ti. The results are shown in Figure 14.5.

As can be seen, the text-final position is the most dominant, making up 43 percent, or 50 percent when the penultimate position⁴ is also included. In close correlation with the directing of attention, persuasive communication puts a premium on information in first and last positions (Miller & Campbell 1959); essentially, this can be interpreted as a positioning operation. When the first position (also prominent in terms of positioning) is also taken into account (15 percent), then the three positions have a share of 65 percent in total. The relatively high proportion of persuasive phrases in text-medial position can be primarily ascribed to the frequency

⁴ The penultimate position was marked in cases where a persuasive part in text-final position was immediately preceded by another persuasive part and separated from other passages by an interpunctuation mark in the manuscript, cf. Example 4. Such efficacy phrases are closely connected to text-final persuasion, which is why the latter position can be said to have a share of 50 percent.

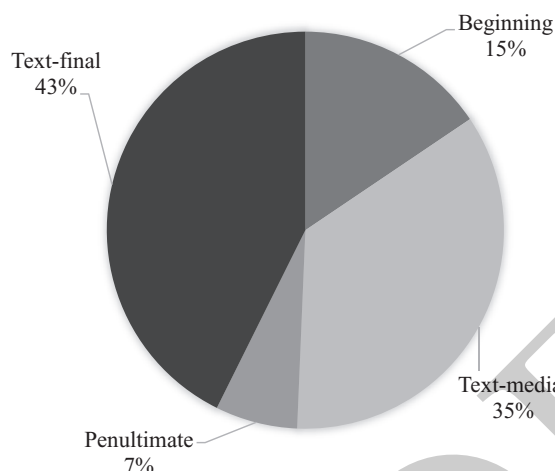


Figure 14.5 The distribution of persuasive phrases in recipes included in recipe collections

and general scope with which the concept of GOOD is linguistically elaborated (see Section 14.3.3). To summarize, positioning is a key factor for persuasion in the recipes, with special prominence attached to text-final and text-initial positions.

14.3.3 Conceptual Categories of Persuasion and Their Co-occurrences in Medical Recipes

Over the course of qualitative analysis, I explored the conceptual construal of persuasion in recipes along the lines of ten main classes and twenty-five subcategories. For their detailed presentation in terms of semantic features, including several illustrative examples, see Kuna (2018). In the present chapter the categories are only discussed in a summary fashion, and presented in Table 14.2,⁵ with solely the frequency and co-occurrence of categories (as revealed by software-based investigations) receiving in-depth analysis.

Based on the software-supported analysis, the ten main codes related to persuasion have the frequencies in the remedy book and in the five recipe collections shown in Figure 14.6.

⁵ The numbers do not indicate chronological order; rather, they only aid the process of coding and illustration. A slight difference with respect to Kuna (2018) is that after a software-based analysis of the entire material, categories 9 and 10 came to be included.

Table 14.2 *Conceptual categories of persuasion*

I. GENERAL POSITIVE VALUE	
1.1. GOOD, NICE, BEAUTIFUL	(3) <i>Főszédelgésről igen jó, jó</i> (MBM-33) (‘For dizziness, it is very good, good ’)
1.2. USEFUL	(4) <i>Ez is próbált dolog, hasznos való</i> (MBM-9) (‘This is also a tested thing, useful ’)
1.3. WONDER, WONDERFUL	(5) <i>csuda hasznát érzi</i> (MBM-845) (‘feels its miraculous benefit’)
1.4. CLEVER, WISE	(6) <i>kövessed amaz bölcznek mondasát</i> (HP-195) (‘follow the advice of that wise man ’)
1.5. IMPORTANT, FAMOUS	(7) <i>Ezek oly fő dolgok, az mellickek massa nem talaltatik.</i> (KP-156) (‘These are important things which have no parallels’)
1.6. FORTUNE/LUCK	(8) <i>Szerenczéd liszen puskádoz. Probatum est.</i> (HP-202) (‘ You will have luck with your gun. It has been tried.’)
1.7. OTHER (EFFORTLESSNESS)	(9) <i>minden erőltetés nélkül kitisztítja az rosz nedvességet</i> (MBM-508) (‘it cleans the bad humidity without strain ’)
2. INTENSITY	(10) <i>Es ottan meg indittia, ha még uas auagi aczel erejü giomor uolnais</i> (KP-73) (‘And then it sets it in motion, even when the stomach has the power of iron or steel ’)
3. TESTEDNESS	(11) <i>Probalth dologh egjnehanzor sok ieles ferfiakon</i> (TOK-311) (‘ This thing has been tried a couple of times on several outstanding men’)
4. CERTAINTY	
4.1. CERTAIN, TRUE [+]/[–]	(12) <i>bizony orvosság</i> (AM I.97b) (‘it is an unfailing cure’)
4.2. DOUBT	(13) <i>de lebet ketsegh az olyan beteghez</i> (AM I.157a) (‘but doubt may affect a patient like that’)
5. TIME FACTOR	
5.1. SPEEDINESS	(14) <i>haznal hamarsagal</i> (KP-29) (‘it brings benefits soon ’)
5.2. BELATEDNESS	(15) <i>soha megh nem gyógyulhat</i> (AM I.105a) (‘s/he can never recover’)
6. RESULT OF THERAPY	
6.1. HEALING	
6.1.1. HEALING, RECOVERY	(16) <i>köszvénybül meg gyógyét</i> (HP-91) (‘it cures you of gout’)
6.1.2. PASSING OF THE DISEASE	(17) <i>csudalatosan ki vonysa a’ genieseket, es megh tisztettia</i> (MOR-21) (‘ miraculously it removes pus, and cleans it ’)

Table 14.2 (cont.)

6.1.3. POSITIVE CHANGE	(18) elmenek tisztulast es uidulast zerez (KP-23) (‘it cleans and cheers up the mind’)
6.1.4. OTHER	(19) <i>melegen a tyúkoknak adod, sokat tojnak tőle.</i> (MBM-138) (‘if you give it to the hens while it is warm, they will lay lots of eggs from it ’)
6.2. FATAL OUTCOME	(20) <i>hamar megh hal az ember</i> (AM I.137a) (‘the man will die soon’)
7. AUTHENTICITY/CREDIBILITY	
7.1. THE RECIPE’S AUTHOR	(21) <i>Magam probaltam dolog</i> (KP-5) (‘A thing I have tested myself ’)
7.2. THIRD PERSON	
7.2.1. SPECIFIC FAMOUS PERSON	(22) <i>Reverius híves doktor írja</i> (MBM-706) (‘ the famous doctor Reverius writes this’)
7.2.2. GENERAL, NON-SPECIFIC PERSON	(23) <i>Minden doktorok dicsírik ezt a fűvet</i> (MBM-1248) (‘ All doctors praise this herb’)
7.2.3. REFERENCE TO GOD	(24) <i>ketsegnelkul Isten akarattialbol megh allattia az fenet</i> (TOK-227) (‘without doubt, God willing , it will stop the problem’)
8. EMOTIONAL INVOLVEMENT	
8.1. POSITIVE EMOTIONAL EFFECT	(25) <i>Barátom, nem tréfa ez. Ezt observáld bár meg. Köszvényes barátom, próbáld meg, nem hagysz hazugságban, ebben is, hidd el bár</i> (MBM-840) (‘My friend, this is no joke. Observe this. My gouty friend, try it, you won’t find me lying about this either; believe me’)
8.2. NEGATIVE EMOTIONAL EFFECT	(26) <i>Agy velenek penigh semmi ugy nem art, minth az emztetlensegh</i> (AM I.2a) (‘ Nothing is as bad for the brain as indigestion’)
9. ARGUMENTATION, JUSTIFICATION	(27) <i>eczuetest ne igiek, mert hamar megh eozül miatta</i> (TOK-354) (‘should not drink anything with vinegar because his hair will grow grey because of it’)
10. OTHER (e.g. geographical place, prayer, incantation)	(28) <i>es jól lösz: X9XX5XOCX3X</i> (HP-208) (‘and will be good: <i>X9XX5XOCX3X</i> ’) ⁶

⁶ Charms and prayers may form a part of persuasive, suggestive communication. However, they occur very rarely in the recipes under study (see category 10 in Figure 14.6).

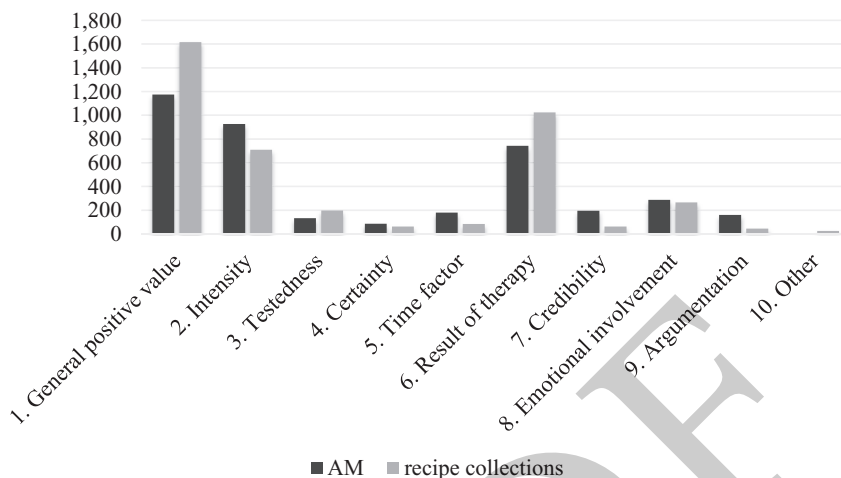


Figure 14.6 The frequency of categories related to persuasion in *Ars medica* and in the recipe collections

As Figure 14.6 shows, 1. GENERAL POSITIVE VALUE is the most frequent category in *Ars medica* and in the recipe collections. Also prominent are the elaborations of 2. INTENSITY and the 6. RESULT OF THERAPY. In the recipe collections, 1. GENERAL POSITIVE VALUE and 6. RESULT OF THERAPY are expressed more frequently, whereas in the remedy book, the linguistic representations of 7. AUTHENTICITY/CREDIBILITY are more common. This may be explained by genre-specific features, by the sources used by authors (and the schemas they follow), and the scholastic style alike (Taavitsainen & Pahta 1998: 167–74). Generally speaking, though, it can be concluded that the proportions of patterns of persuasion are remarkably similar between the recipe collections and the remedy book. This is most probably linked to the fact that each text was written for non-professional people, and they are based on a similar text tradition, following similar patterns. Unfortunately, scientific treatises in Hungarian are not available from the era under study, hence they cannot serve as a standard of comparison (cf. Mäkinen 2011: 171–5).

The examples in Table 14.2 and 14.3 both show that a given persuasive phrase may well be associated with many categories and receive multiple codes. For example, in (29), which is the heading of a recipe, the concepts of 1.5 IMPORTANCE/FAMOUS, 2. INTENSITY, and 3. TESTEDNESS are combined:

(29) *Akarmi fele forma közueny ellen fö probált oruossag.* (KP-18)
 ('It is a major tested medicine against any kind of gout.')

The ATLAS.ti software makes it possible to study co-occurrences across main and subcategories in the five recipe collections under study, and I analysed the clustering of all of the categories. Here, however, I only present co-occurrences in terms of the ten main categories (see Table 14.3), with colour coding to indicate the frequencies of the co-occurrences.

Looking at relationships across main categories, we can see that they typically do not co-occur with themselves. Exceptions in this regard concern 1. GENERAL POSITIVE VALUE and 6. RESULT OF THERAPY. The multiple elaborations (58 times in both cases) presumably have an accentuating function. To a lesser extent, the categories of 7. AUTHENTICITY/CREDIBILITY and 8. EMOTIONAL INVOLVEMENT also

Table 14.3 *The clustering of the main categories in the recipe collections*

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
1.	58									
2.	546	0								
3.	18	21	0							
4.	10	10	2	0						
5.	22	41	0	0	0					
6.	199	209	3	25	65	58				
7.	33	24	13	2	0	8	8			
8.	59	64	1	11	2	68	7	2		
9.	14	12	0	0	0	9	3	29	0	
10.	7	8	3	0	0	0	11	0	0	0
1 - 20										
21 - 50										
51 - 100										
100 - 200										
200 -										

- 1. GENERAL POSITIVE VALUE
- 2. INTENSITY
- 3. TESTEDNESS
- 4. CERTAINTY
- 5. TIME FACTOR
- 6. RESULT OF THERAPY
- 7. AUTHENTICITY/CREDIBILITY
- 8. EMOTIONAL INVOLVEMENT
- 9. ARGUMENTATION
- 10. OTHER

co-occur with themselves. As shown by Table 14.3, 1. GENERAL POSITIVE VALUE and 6. RESULT OF THERAPY are often combined (in 199 instances), and these two categories are also the most likely to be elaborated in conjunction with 2. INTENSITY (in 546 and 209 instances, respectively). Further, it can be established that 8. EMOTIONAL INVOLVEMENT is often combined with 1. GENERAL POSITIVE VALUE (59 instances), with 2. INTENSITY (64 times), and with 6. RESULT OF THERAPY (68 instances). Moreover, a close relationship between 5. TIME FACTOR and 6. RESULT OF THERAPY can also be discerned (65 co-occurrences).

The analysis shows that the concept of 2. INTENSITY is almost always combined with some other category, and even particular subcategories. Most frequently 2. INTENSITY co-occurs with 1. GENERAL POSITIVE VALUE (546 instances) and especially its subcategories 1.1 GOOD/NICE/BEAUTIFUL (403 instances), 1.2 USEFUL (87 times), and 1.5 IMPORTANT/FAMOUS (33 instances). 2. INTENSITY also often co-occurs with 6. RESULT OF THERAPY (209 instances), more specifically its subcategory of 6.1.3 POSITIVE CHANGE (205 instances). Furthermore, 2. INTENSITY co-occurs with the subcategory 5.1 SPEEDINESS (41 instances) of 5. TIME FACTOR, and with the subcategory 8.1 POSITIVE EMOTIONAL EFFECT (40 instances) of 8. EMOTIONAL INVOLVEMENT (64 instances). Clustering as a tendency may be put down to the fact that the linguistic elaboration of 2. INTENSITY can be linked to various constructions in recipes (e.g. enhancement, expression of degree, hyperbole, lengthiness, ALL-NOTHING, and the extremes of other scales). In addition, it also highlights the fact that persuasion and its conceptual-linguistic construal are fundamentally related to more intense elaboration, which is iconically manifested in the expressions involved.

14.3.4 *Persuasion and Value*

The results of analysis also point to the fact that the operation of polarization (value attribution) is central for the function of persuasion in recipes. This finding is in line with research on persuasion in the modern and historical era (Ortak 2004; Östman 2005; Mäkinen 2011), and also with the definition of persuasion that refers to a change of attitude, typically also involving/activating explicit or implicit value attribution.

Based on the manuscripts under study, elaboration of the positive pole is much more dominant than that of the negative pole in recipes of the era. This can be seen in data on both frequency of occurrence and co-

occurrences. In the recipe collections, a positive outcome is highlighted 1,034 times, but a negative one only 17 times; in *Ars medica*, these figures are 649 and 93, respectively. Furthermore, it can be observed that the concept of 6.1 HEALING receives extensive metaphorical construal (Kuna 2014), whereas a negative outcome is generally expressed literally. The positive pole's predominance is also suggested by the fact that our present-day interpretive horizon opens up the complex category of 1. GENERAL POSITIVE VALUE, which proves to be the most frequently attested category in both the recipe collections and *Ars medica* (see Figure 14.6). By contrast, GENERAL NEGATIVE VALUE does not appear as a separate code; instead, it is subsumed by 6.2 FATAL OUTCOME and 8.2 NEGATIVE EMOTIONAL EFFECT, at a much lower frequency rate. In sixteenth- and seventeenth-century recipes, persuasion is typically associated with positive value attribution, in harmony with a positive attitude, the intention of creating trust, and the goal of the genre. On top of this, polarization also plays a role in the recipe's theme (USEFUL KNOWLEDGE) and in the elaboration of 6. RESULT OF THERAPY, the timing of therapy (5. TIME FACTOR), and 8. EMOTIONAL INVOLVEMENT. Here again, the positive pole is primarily foregrounded. Less directly, the concept of VALUE is also bound up with references to concrete persons or God, as the persons involved and God evoked a positive attitude in the era under study. Thus, polarity is also implied by the category of 7. AUTHENTICITY/CREDIBILITY.

14.3.5 *The Prototype for Persuasion in Recipes*

Based on the analysis, it is possible to outline the prototype for persuasion in Hungarian recipes, which basically conforms to what we know from the literature about efficacy phrases in other languages (see Section 14.1.2). This prototype has the following properties: it is positioned at the end of recipes; it is intimately related to the script evoked by recipes and by the concept of healing; relatedly, it has a considerably general scope (not being restricted to particular illnesses); it may stand by itself or in conjunction with other persuasive patterns; and it typically foregrounds a positive value. Accordingly, the prototype for persuasion in recipes is most directly linked to the codes 1.2 USEFULNESS, 3. TESTEDNESS, and 6.1.1 HEALING/RECOVERY. Finally, the analysis suggests that the prototype is not directly linked to the most frequent category, which is represented by the sub-category 1.1 GOOD, evoking a positive attitude in the most general way.

14.4 Conclusion

This chapter's aim was to explore categories related to persuasion in sixteenth- and seventeenth-century medical recipes on the basis of Hungarian texts. I analysed five recipe collections with the qualitative software ATLAS.ti and one remedy book by using the proprietary search engine of its electronic edition. The process of categorization prioritized semantic rather than formal criteria. At the same time, as a result of software-based analysis, it became possible to list linguistic representations instantiating particular categories, which may be put to use in corpus-based searches in the future.

The research has revealed the fact that persuasion constitutes a characteristic strategy of text production underlying Hungarian medical recipes in the era. Persuasive parts in the Hungarian texts under study are remarkably similar to medical recipes produced in other languages in the same era, which follows from the way in which these texts were created and how knowledge was transmitted at the time. The analysis has also shown that evaluative language is fundamental for the persuasive function of recipes. In the Hungarian sample, the positive pole clearly dominates, in close relation to the goal of the genre; that is, the sharing of knowledge.

One limitation of the present study is that, in the absence of a corpus of medical Hungarian, it was not possible to analyse the recipe collections and the remedy book with precisely the same methodology. Thus, with regard to *Ars medica*, no results have been produced concerning the distribution of persuasive phrases, the co-occurrence of categories, and the frequency of persuasive phrases with respect to the number of word tokens. A further limitation is that the study offers no insight into what features and historical developments characterize persuasion-related categories in various discourse domains. The reason is that no learned treatises written in Hungarian are available from the era under study; these did not begin to appear until the eighteenth century.

Despite these limitations, the analysis has the advantage of extending the interpretation of persuasion as strategic action to historical texts, studying it from the perspective of the speaker's persuasive intent, taking the genre of recipes as a point of departure. For this purpose, qualitative software-based analysis was performed, which allows one not only to present particular categories but also to find out about their frequency rates and co-occurrence tendencies. In addition, the analysis also opens up possibilities for comparison with studies focusing on other languages, with the prospect of reaching a better understanding of medical recipes in pan-European and cross-cultural dimensions.

SOURCES

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HP = *Házi patika* [Home pharmacy]; Oct.Hung.485; c. 1663. In Hoffmann (1989): 227–46.
KP = Váradi Vásárhelyi, István: *Kis patika* [Little pharmacy]; Duod.Hung 66. 1628. In Hoffmann (1989): 211–25.
MBM = Becskereki Váradi Szabó, György: *Medicusi és borbélyi mesterség* [Medical and barber profession]; Nr. 5295. 1668–1703. In Hoffmann (1989): 341–434.
MOR = *Mindenféle orvosságoknak rendszedése* [Classification of medicaments]; Oct.Hung.87; second part of seventeenth century. In Hoffmann (1989): 459–72.
TOK = Szentgyörgyi, János: *Testi orvosságok könyve* [Book of medicine for the body]; Oct.Hung.500; c. 1619. In Hoffmann (1989): 173–201.

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