

The Strange Case of Henry V'S Wandering Wound

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On Saturday 21st July 1403 the armies of King Henry IV and the rebel Henry Percy met in battle just north of the town of Shrewsbury. The royal forces were victorious, (Priestley 1979), but during the battle Henry IV's son, Prince Hal, (later to become King Henry V), was wounded in the face by an arrow while leading a charge. Despite the severity of the wound, he continued to fight on refusing to leave, demanding, according to one of his chroniclers, Tito Livio: *"Lead me, thus wounded, to the front line so that I may, as a prince should, kindle our fighting men with deeds not words"* (Dockray 2007 p.85).

Hal was transported to Kenilworth Castle. Henry IV's surgeon, John Bradmore, treated the wound following attempts by other physicians (Lang 2003). Bradmore described the wound as:

"...smetyn in the face be syd the nose on the lefte syd with an arrow the wyche sayd arrow entryd overwharte and after the schafte was takyn owt and the hede ther of a bod styll in the hyndyr parte of a bone of the hede after the mesur of vj ynche" (p.129, Lang 2003).

Cole and Lang (2003) translate this as: *"... [The arrow] struck in the face with an arrow beside the nose on the left side, which arrow entered from the side, and the said arrow, after the arrow was extracted, remained in the back part of the bone of the head six inches deep."* (Cole and Lang 2003, p.95).

To Cole and Lang (2003) the arrow was embedded inside the back of his skull. Bradmore prepared some tents the same length as the depth of the wound using the dried pith of elder stitched in purified linen. The tents were then infused with rose honey. He increased the size of the probes that allowed him to gradually enlarge the width of the wound.

He then invented a device to remove the arrowhead.

"I prepared anew some little tongs, small and hollow, and with the width of an arrow. A screw ran through the middle of the tongs, whose ends were well rounded both on the inside and outside, and even the end of the screw, which was entered into the middle, was well rounded overall in the way of a screw, so that it should grip better and more strongly.

"I put these tongs in at an angle in the same way as the arrow had first entered, then placed the screw in the centre and finally the tongs entered the socket of the arrowhead. Then, by moving it to and

fro, little by little I extracted the arrowhead.” (p.95 Cole and Lang 2003) (below).



He then cleansed the wound with white wine and inserted new tents, made of wads of flax soaked in a cleansing ointment, which comprised of white bread, barley, flour and turpentine. After the second day he shortened the tents every two days and *“within twenty days the wound was perfectly well cleansed”*.

He then regenerated the flesh with a “dark ointment” known as *“Unguentum Fuscum”*, a compound of resin and gums. Throughout the course of treatment he anointed Hal’s neck with *“Unguentum Nervale”*: a compound containing over twenty herbs, wax, butter and resins every morning and evening to soothe the muscles.

Finally he placed a hot plaster on top of the wound to prevent spasm. According to Bradmore, Hal was *“perfectly cured”* (p.95, Cole and Lang 2003).

According to Cole and Lang (2003): *“...it is just possible for an arrow to enter beside the nose and lodge at the back of the head without causing immediate death or lasting disability, but the margin of error either way is extremely small, and the Prince was clearly very fortunate indeed to survive the wound.”* (Cole and Lang 2003, p.96).

However, there is a theory that states - in contradiction to Bradmore’s account- that Henry was actually struck on the right side of the face.

The theory was originated by Ian Mortimer in his *“Fears of Henry IV”* (2007) he states that Prince Hal was struck by the arrow beneath his left eye, which is in accordance with what Bradmore tells us. However, in *“1415: Henry V’s year of Glory”* (2009) he states that Hal was struck

below his right eye. Curious about this change I questioned him about this. His response appeared in the *Reenactor e.magazine*, Issue 23, November 2010.

“Originally when writing the Fears of Henry IV in 2006 I followed Bradmore: left eye. In this I was following Prof Carole Rawcliffe, who on page 76 of Medicine and Society says the arrow entered his face on the left side of his nose. [but] looking at all the portraits of Henry V when researching 1415: Henry V’s Year of Glory in 2008, I noticed that all the portraits of Henry were showing the same profile, with his left shoulder to the viewer, as if he did not want the right-hand side to appear. Also in the course of researching the book, I came across a reference to the king not wanting people to look him in the eye. Putting this together with the above point, and the fact that no portrait images on charters or documents show a scar, I figured that it was most probable that the wound was on the hidden right-hand side of the face. This squares with John Bradmore’s account if the wound was on the left hand side of the face as you looked at the wounded prince. We would normally call this the right hand side...Hence I changed the description of the wound.”

However, Mr. Mortimer’s reasoning is somewhat dubious. The most famous portrait of Henry V (below) by an unknown artist which hangs in the National Portrait Gallery was painted in the late 16th or early 17th century, and images of him which appear in manuscripts are too small to make out any details. Further, Henry not wanting his subjects to look him in the eye is consistent with his personality and behaviour.



While a number of his personal characteristics and behaviours have been seen as admirable in the past and today such as his

capabilities as an administrator and military commander, he also was known to be severe; cold; humourless; aloof; domineering; ruthless; bad tempered vindictive and inhumane. He was intolerant of dissent and prepared to punish, even remove those whose loyalty he suspected. Men feared his anger and avoided questioning the wisdom of his judgements or the rightness of his decisions - when his honour was impugned he could suddenly become very angry (Dockray 2007; Mortimer 2009; Seward 1987): “[Henry was] *much feared and dreaded by his princes, knights and captains and by people of every degree because all those who disobeyed his orders or infringed his edicts he would put to death without mercy.*” (Waurin: Hardy 1868, p.429)

Therefore is it any surprise that Henry forbade anyone to look him in the eye? Further an artist commissioned to paint a portrait of a monarch, especially one who could be as bad tempered and vindictive as Henry would be more likely to produce a flattering portrait omitting any blemishes rather than a “warts and all” portrait, fearing the consequences otherwise. Henry also believed himself to be God’s emissary on Earth (Dockray 2007) thus making him more reluctant to be beheld by his subjects.

As for the accuracy of medieval depictions of Henry, medieval portraits were not photographs, as the J.Paul Getty Museum observes of medieval portraits:

“In contrast to modern portraiture, which strives to capture the accurate likeness of a specific person, medieval portraiture was primarily valued for its ability to express an individual’s social status, religious convictions, or political position. Medieval portrait painters, rather than reproducing the precise facial features of their subjects, often identified individuals by depicting their clothing, heraldry, or other objects related to them. The goal of medieval portraiture was to present a subject not at a particular moment in time, but as the person wished to be remembered through the ages.”

As for the side Bradmore perceived the wound to be on, no doubt a talented and innovative surgeon like John Bradmore could tell left from right.

However this flawed theory appeared again in 2013 forwarded by Michael Livingston given at the session *Aspects of Medieval Military History I*, at the *48th International Congress on Medieval Studies* (2013) and in the book *Dragon’s Blood and Willow Bark: The Mysteries of Medieval Medicine* by Toni Mount (2015). To the best of my knowledge, Ian Mortimer was never acknowledged by Professor Livingstone as the originator in the former, and there is no reference to him in the latter.

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