

A LOVINGLY DANGEROUS DISEASE: GENDER DISCOURSE AND 19TH CENTURY MEDICINE

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ABSTRACT

During the 19th century, medical science produced a significant number of academic works in which the female body was the central theme. Theses and dissertations sought to prove female inferiority through physiology, under what became known as the "science of difference." These efforts led to an extensive cataloging of the female body. Physicians increasingly diagnosed pathologies originating in the female reproductive system and associated them with a supposedly sinful nature. Within this context, the physician Leopoldo Pires Porto presented the thesis *On Intoxication by Love* (1923), in which he medicalized emotions and treated love as a morbid affliction with distinct manifestations in men and women. The distinctions made by Pires Porto serve as a key source for this study, as they reflect gender differences during the 19th century and contribute to discussions about the scientific production of the period.

Keywords: Gender. Medicine. Toxic Love. 19th Century.

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INTRODUCTION

Throughout human history, a hierarchy has been shaped over centuries between men and women. Men have often been considered more developed, whether physically or intellectually, while women have frequently faced difficulties in being perceived in ways other than those imposed by a patriarchal view of reality. The relationship between genders is contradictory: the male perspective on women tends to be shaped according to the historical period—at times they are treated with admiration, at others with hostility; in certain moments they are sacred, and soon after their femininity is profaned (Delameau, 2009, p.462). What these moments tend to have in common is the frequent objective of shaping women according to male will—placing them in boxes and sealing them shut.

In antiquity, women were considered graceful on the outside but full of rot on the inside, specifically because of their hidden sexuality. They were also held responsible for introducing sin into the world (Delameau, 2009, p.465). In the Middle Ages, however, there was the exaltation of Mary, regarded as the feminine ideal for preserving her untouched sexuality, in addition to possessing the characteristics desired in all young women—being the docile servant of God who renounced carnal pleasures (*op. cit.*, p.475).

Female sexuality, according to the medievalist perspective, is a sin par excellence (Delumeau, 2009, p.471). Christianity, believing in this premise, contributed to the creation of a popular imaginary that fears women—their actions, their exaggerated temperament, and, above all, their unknown reproductive system, which was believed to govern the entire female body.

Associating women and their bodies with sinfulness is not a custom that emerged in the medical treatises of the eighteenth and nineteenth centuries; such conceptions have traveled a long path through history, being modified and reshaped, yet maintaining the essence of the decharacterization of the so-called "weaker sex." In modern times, body and spirit were linked to illnesses that were treated primarily through knowledge transmitted socially, and the outcomes were explained through religious beliefs (Barreto, 2001, p.130). Over the years, numerous advances in medicine were achieved; however, the female body and its functions remained within the realm of the unknown—physicians did not understand menstruation, the uterus, pregnancy, or female genitalia. Thus, when knowledge proved distant and explanations were scarce, the era of medicine focused on women and their sexual organs began.

The changes caused in the female body by what is now understood as the hormonal cycle became the subject of intense debate in the centuries that followed. These factors, then unknown and believed by physicians of the time to require normalization in order to prevent disorder, would be investigated and controlled by those who held knowledge: men (Barreto, 2001, p.130). In the eighteenth century, female organs began to be catalogued and named (Laqueur, 2001, p.191), often being referred to as less perfect versions of male parts.

The growing interest in female nature caused women to oscillate between being seen as the cause of physical and mental illnesses and being measured against the moral values of the time (Barreto, 2001, p.135). It was then the responsibility of physicians to find effective solutions and beneficial treatments to calm female pathologies.

From this context, the present research analyzes, based on the 1923 thesis *On Intoxication by Love* by physician Leopoldo Pires Porto, nineteenth-century medicine as it relates to the female body. The thesis addresses pathological love, a disease that afflicted primarily the male gender, who, as victims of the most enervating passions, would fall ill in their souls—losing control of their fundamental senses and committing the greatest follies in the name of the beloved.

A thesis is a historical document in that it references and clarifies the discussions and paradigms within the field of Health Sciences that permeated the era in which it was written. In this way, Porto writes about love but also provides insights into the medical discourse employed during that period. The author is dedicated to proving, through examples of individuals possibly intoxicated by love, that such a pathology is serious and, if not properly treated, can lead to the worst outcomes, such as madness and even death. According to Nathália Boni Cadore (2011), Porto medicalizes emotions, attributing to love the connotation of a hereditary disease, comparing it to hysteria, and making a considerable effort to define what is “normal” and what is “pathological.”

Cadore (2011) states that the thesis *On Intoxication by Love* played an important role in understanding the influence of medicine on the science of difference. This is a path that must be followed in order to analyze gender constructions and female sexuality. The author argues that the history of sexuality does not exist; what persists is the history of how sexuality and its practices were produced (Cadore, 2011, p.12).

Following the issues presented, we seek to discuss the perception of gender relations in the nineteenth century based on the medicine of the time and its focus on

female nature, drawing from the concept of pathological love described in the thesis by Leopoldo Pires Porto (1923). Porto grounds his research in criteria supported within the academic environment in which he was inserted, reproducing the discourses of the period in his analyses.

UNDERSTANDING THE DANGERS OF INTOXICATION

Several authors and analysts of the nineteenth century and of the science of difference contribute to the understanding of the so-called “female sexual nature.” Fabíola Rohden (2002) writes about the medical movement aimed at emphasizing the difference between the sexes, and when science turns its focus to female bodies, it targets the reproductive parts, as it was believed that within this set of organs all evils were concentrated. Women are tied to their sexual functions; the uterus is seen as the receptacle of evil, from which diseases such as hysteria may develop and harm not only the woman individually but also the social collective—hence, it must be controlled.

The period under study is marked by a significant production of medical treatises and theses written by men to explain female illnesses. *Da intoxicação pelo amor* (1923) refers to a predominantly male disease that affects the opposite sex to a lesser extent; thus, the author employs distinct discourses to explain the manifestation of the pathology in each case.

Given this context, with references to the medical practices in flux at the time and the medical discourse of Leopoldo Pires Porto regarding the pathology of love, this study explores the female condition in the face of a patriarchal medicine that turned its gaze beneath women’s skirts and used science to perpetuate centuries-old discourse about the female body and its ailments. The selection of authors used was based on the discussion surrounding understandings of pathologies, the regulatory medicine directed at the female sex in the nineteenth century, conceptions of female sexuality grounded in reproductive organs, and the hygienist discourse of the time.

Michel Foucault (2009) states that sex has been historically repressed since the seventeenth century when the era of repression aligned itself with the development of capitalism. It is controlled with such rigor that merely speaking about it becomes a form of transgressing the prevailing order. In the nineteenth century, when early authors needed to mention it in their works, it was common for them to apologize for addressing such a sinful subject (Foucault, 2009, p.11-13). In that same century, medicine turned its attention to the

study of female sexuality under the pretext of needing to understand the origin of evil in women and their reproductive organs. In this way, society made room for discussions about sex—but only for the select group within the medical field, which claimed the authority to domesticate the dangerous behaviors of the uterus and the vagina.

The reorganization of bodily functions began with the alliance between medicine and the Church, in which the physician, responsible for the care of the body, drew closer to the figure of the priest, the one who cared for the soul and spirit. Together, these two institutions held full access to households and the intimacy of the population (Del Priore, 1993, p.29), facilitating the dissemination of hygienist treatises filled with behavioral norms. Hygienist production sought to encompass various social spheres, such as marriage, early childhood education, motherhood, and literature intended for young virgin girls.

The so-called science of difference, as explained by Fabíola Rohden, was also a source of medical motivation. By analyzing the reproductive organs, medicine crystallized the woman within the sexual and reproductive realm, in contrast to the man (Rohden, 2002, p.7). There are theses devoted to the ovary—what it is and what its functions are—but there is no equivalent body of work concerning the testicles. Gender differentiation was based on the premise that woman was merely the “imperfect version” of man; her clitoris was seen as nothing more than an underdeveloped penis, her biological functions destined for reproduction, and her social role confined to motherhood (Silva, 2011, p.47).

The conditioning of women within the domestic environment relates to their connection with the family. Michelle Perrot (2017) argues that each sex experiences crises differently, with women generally excluded from history, prevented from writing about themselves, and victims of a male historiography that tends to weaken them socially. The context presented by Perrot is certainly not that of Brazil in the nineteenth century nor the medical conditions imposed at the time, yet it fits the analysis by describing the exclusion of one gender within a misogynistic and patriarchal ideology.

Thus, with the differentiation and construction of the gender discourse of the nineteenth century clarified, Adriana de Carvalho asserts that medical concerns were influenced by European hygienist conceptions (Carvalho, 1996, p.26), where the ideal woman was one who renounced her carnal desires and devoted her body to reproduction (1996, p.28). Carvalho also notes that the terminology used for female parts was varied, with breasts referred to as glands and the hymen, for example, taking on a more moral than physical character (p.34).

The hygienist view was also responsible for the valorization of the family, with women who stayed at home caring for their husbands and children being seen as fulfilled and performing their social role (Carvalho, 1996, p.53). Medical theses tended to present breastfeeding and child-rearing as the “mission” of women on earth (1996, p.72).

Any tendency that deviated from the imposed ideal was considered a disturbance derived from feminine nature. In puberty, the time when girls physically develop and become capable of reproduction, that is, when they begin to exercise their sexuality, is marked by medicine as the period in which they are subject to psychological changes (Carvalho, 1996, p.99). It is during this phase, after the first menstruation, that a woman is considered ready for marriage, which separates the “girl” from the “woman” (1996, p.105). It is in marriage, if she is a decent girl, that the first marital contacts occur, awakening female sexuality in ways the woman herself could not have imagined. Adriana Carvalho (1996) serves as a basis in this research to understand the connection between medical discourses and the moralizing discourses of the nineteenth century, and how society was governed based on these principles of sexual restriction.

The author Goran Thurban (2006) contributes to the analysis of sex and the power relations imposed through it. According to Thurban, the partial process of secularization helped weaken the Church, contributing to the loosening of Christian morality (Thurban, 2006, p.228). However, the branching of customs and the Church’s influence on social life still governed actions, with the sexual hierarchy of domination, where men subjugate women, especially their wives, being a historical condition that spreads across cultures. A clear example is how this sexual domination imposed by white men was followed by other ethnic groups that made up Brazilian society, such as Afro-descendants (2006, p.237).

Thus, understanding the historical conceptions about love, pleasure, and the construction of the feminine figure becomes a search for the branching of factors, paradigms, and, consequently, authors who contributed to the creation of a patriarchal clinical perspective. Saint Augustine, in his ideologies about sexuality, points to a sexual nature in Adam and Eve, but one that excludes carnal pleasure, being exclusively for procreation. It is the original sin that awakens shame and pleasure, and the origin of diseases is also linked to the rebellious act of the first man and woman (Carneiro, 2000, p.48-49). Christianity ended up contributing significantly to the construction of a problematic harmony between the social and the sexual (Laqueur, 2001, p.73). The objectification of

carnal pleasure and the relationship of women with sex were pathways that shaped the very medicine of women in the nineteenth century.

The historian Henrique Carneiro (2000) discusses this love that kills, analyzing the nineteenth-century perceptions that even the brain, the most noble organ of the human body, could be a victim of pathology. Pathological love would produce pulmonary ailments, neuroses, deafness, hysteria, madness, among others (Carneiro, 2000, p.50-51). While medicine would dedicate itself to curing the body, theology would cure the soul, with the Church being responsible for the “divine physician” (2000, p.53).

Carneiro asserts that modern misogyny was strongly Catholic and that false social morality was a male creation, made by men to dominate women (Carneiro, 2000, p.71). Love was no longer just a disease; it was also the cause of various ailments, not only love itself but sexual excesses, which were already considered responsible for the majority of diseases, both physical and psychological (2000. p. 97). From Carneiro’s perspective, one can understand the ideologies present in Porto’s thesis (1923), where such love, linked to diseased sexuality, branched into a pathology that affects the body and should be treated pragmatically.

For Leopoldo Pires Porto, love, which is a passion in a pathological state, is a voluntary intoxication, similar to those addicted to alcohol, tobacco, and hashish (1923, p.26). Just like addicts, those suffering from the disease of love cannot rid themselves of the desired object; lack follows the disgust and suffering of the afflicted. Porto asserts that the onset of the disease occurs like all others, without enthusiasm for experimentation, but after the first experiences, dependence is established. “Gradually, pleasure is found (...), and then the addiction begins, spreading throughout the victim’s organism, ruining it completely, surrounding the will in a path of atrophy, inflicting the fate of suffering (...)” (Porto, 1923, p.27).

The thesis *Da intoxicação pelo amor* treats love as consisting of two elements: a desire and a feeling, which, when balanced, form a harmonious and healthy love. However, if either of the two elements prevails, restricting and nullifying the other, pathology is present (Porto, 1923, p. 15). To understand what this pathology described by Porto is, starting with the overemphasis of the senses, the definition of pathology by Georges Canguilhem is used, interpreting the term as something that is normal but may become pathological under distinct circumstances (Canguilhem, 1990, p. 145). In other words, it is necessary to analyze individual psychic structures and consider the reactions of the disease in relation to

the environment, as pathology only exists when there are also collective alterations (1990, p. 147-148). Thus, based on Canguilhem's considerations, the pathological state would only be abnormal in certain situations, not in the general sense. In other words, love is not always a disease, but only in specific situations where various factors, including hereditary ones, influence its impact on individuals. The definition of pathology presented by Canguilhem (2000) can be analyzed in relation to Porto's thesis, as the author states that not all men are love sick, nor is it exhibited by all women who are in love. There are specific moments when the disease manifests.

Da intoxicação pelo amor links jealousy as one of the main symptoms of pathological love. It mentions the case of a jealous man who controlled his wife's actions violently. The young woman became reclusive, abstaining from daily pleasures to avoid provoking her husband's anger. However, this did not help, as he continued to assert that she had numerous lovers whom she hid around the house. When he could not find evidence, he would take out his frustrations violently. It is noteworthy that the pathological behavior only appeared when the man was near the woman; with others, he was a perfectly normal citizen (Porto, 1923, p. 99-100).

Porto claims that those afflicted with the disease of love are mostly men, but their condition stems from a family history of illnesses. In *Da intoxicação pelo amor*, the situation of a man suffering from the pathology is mentioned. This individual, above average intelligence and a lawyer, exhibited disturbed behaviors throughout his life, including gambling addiction and eccentric dressing. Porto argues that such behaviors could only belong to a love-sick person, and a man with such particular conduct would certainly love violently (Porto, 1923, p. 39-40). Observing the subject's heredity, a strong history of mental illness on the maternal side can be found, explaining the individual's behavior and tendencies toward pathological love.

Porto (1923) does not use the argument that only the female side of the family is responsible for the pathological state of the patients, but the medicine of the time explains states of madness primarily through the woman. It was from the 18th century onward that mental disorders became feminized; for a long time, the primary stereotypes of madness were attributed to men. However, the mentality shifted based on the views of the time regarding the female figure (Porter, 1987, p. 134). Porter argues that there is a visible association between mental disorders and women in contemporary Western culture (Porter,

1990, p. 133). Porto aligns with the ideology that hysteria has a maximum presence in the "weaker sex," as it was where it was most developed (Porto, 1923, p. 48).

Hysteria became popularized as a woman's disease because it was widely linked to the uterus, which was thought to promote lack of control and madness in women, according to the medicine of the 19th century. The social conduct rules imposed on women tend to pathologize them (Albuquerque, 2007, p. 1), as socially acceptable behavior was that of an obedient and modest woman. Any deviation from this conduct would automatically label her as a victim of hormonal vapors, mad, or hysterical. The medicine of the time did not bother to establish deep diagnoses for hysterical patients; the concept of hysteria was maintained for centuries based on moral and social conceptions (2007, p. 6). Therefore, any woman could be diagnosed with hysteria, and any of her descendants could fall victim to the "sick love" if the symptoms appeared in the family. "The intoxication of love is no less fatal in hysteria, and how could it not be if the hysteric is the king of the unbalanced" (Porto, 1923, p. 46).

Porto claims that everyone must have heard at least one story about a woman who, despite being socially virtuous, decided to abandon her family and run away with her lover due to a hysterical outbreak (Porto, 1923, p. 48). In his thesis, the author refers to the women upon whom the patients of love project their pathology as innocent; often, they do nothing to fuel the twisted desires created by the illness. However, the factor of heredity is crucial in Porto's analysis, as it is through this lens that the true origin of the pathology is understood.

In defining hysteria, the author attributes characteristics seen as inherently feminine: "What most characterizes the hysteric is the extreme mobility of spirit. Capricious, fantastic, impulsive... impressionable, very skilled in pretending and lying, passing without transition from the greatest joy to the greatest sadness." (Porto, 1923, p. 47).

Thomas Laqueur believes that nature is to culture as sex is to gender (2001, p. 45). Thus, if the scientific society felt the need to develop a medicine to explain female inferiority, the starting point would certainly be sex. During the Renaissance, anatomists dissected female bodies in search of their particularities, examining and representing female anatomy through art, increasingly convincing themselves that women were a less perfect version of men. The new science that emerged in the mid-18th century did not break the ties of the old but only strengthened them (Laqueur, 2001, p. 95-96).

The discovery of the importance of the ovary occurred only in the 19th century, thus beginning the cataloging of the biological life of women based on this organ (Laqueur, 2001, p. 213). Studying the science of difference refers both to the physiological and medical scope as well as to social relations. The authors presented in this research all discuss the medicine of the period, relating it to the condition imposed on women based on their sexual nature. Considering these ramifications, studying the thesis of Leopoldo Porto means also exploring a social path, one that addresses how his pathology would affect the collective perception of the female figure, with the most likely place to find women in the 18th and 19th centuries being within the family context.

James Casey argues that during the organization of the household, while men had to work in the fields to guarantee subsistence, women stayed at home to ensure domestic order. People migrated from the countryside to the city, and social conceptions changed, but the conditioning of women to the home and children remained; society imposed female seclusion to domestic spaces (Casey, 1989, p. 132). Inserted within the family framework, the patriarchal civil codes of the 19th century controlled women by indicating manuals of conduct and social norms to be followed (p. 140).

Confined in their parents' homes and, after marriage, domesticated by their husbands, young women found love in romance novels, which depict passion with ecstasy and lovers as eternal, devoted figures. Romantic love, unlike the pathological love mentioned by Porto, is the product of those who did not learn to love with moderation, women who love too much (Lima, 2006, p. 10). The historical and cultural process of constructing this idealized love is as old as the one analyzed in this research. Amanda B. Lima (2006) writes about the phenomenon of obsession and dependence initially manifested in this romantic love, characteristic of women.

Lima points out that women who love too much often come from troubled homes where emotional needs were not reciprocated, thus finding passion as a response to their emotional voids.

Literature, considered responsible for the utopia of love, fed women with stories written in pamphlets and influenced them to relate new romantic experiences, such as marriage, to childhood traumas (Lima, 2006, p. 65). Analyzing such a conception of love that emerged in the 19th century, alongside the definition of pathological love in the thesis *Da intoxicação pelo amor* (On the Intoxication of Love), is to understand the two branches of this feeling and how they are presented in different sexes. While romantic love,

characteristic of women, arises through their own idealizations, pathological love, attributed to men, has its genesis in heredity, relating to hysterical women and psychologically unstable family members.

The origin of these two phenomena also represents the gender discourse of the 19th century, characterized by the solidification of misogynistic discourses in medicine and consequently in the society of the time. Regarding pathological love, to understand it, it is necessary to analyze the following configurations. This sick love was already discussed in antiquity, but it is the medical treatises of the 18th and 19th centuries that revisit the theme comprehensively. The thesis *Da intoxicação pelo amor* not only explains the pathology but also suggests treatments and points out possible consequences.

Understanding the historical context in which women and their sexuality were shaped refers to the study of the entire history of humanity. The analyses did not emerge in the 19th century, but it was in this century of false morality that the sexual taboo opened gaps for sex in science. The way love becomes a pathology in the thesis of Leopoldo Pires Porto (1923), *Da intoxicação pelo amor*, debates other feminine aspects, particularly their mental capacities, since love is a disease that affects the body but originates in the senses.

Not only the fragility of the body, but also the inferiority of mental faculties, is a theme essentially attributed to the feminine figure. A starting point for this analysis is the very medicine discussed by men, which prevents women from speaking for themselves and their bodies. However, to delve deeper into the foundations that enabled this construction, it is necessary to return to darker periods in history.

Stephen Jay Gould (2014) traces a path through the history of racism by analyzing distorted data influenced by prejudices used to obtain distorted scientific results. The author writes about the condition of certain groups considered inferior, especially Black people, and how white men have conditioned them to a lower position on the scale of humanity. Gould's work references the female figure, as women are often excluded from most analyses that focus on mental faculties due to being viewed as less intelligent (Gould, 2014, p. 111). In the work, brains are cataloged in search of evidence concerning the inferiority of these specific groups, with the smaller female brain symbolizing their physical and intellectual subordination (2014, p. 111). These biological distinctions are intentionally misinterpreted, aiming to sustain the thinking of those who spread them.

The woman and her sacred vocation to procreate, determined by the misogyny of the period, pushed her into an environment of inescapable domination. The sacrament of

marriage became a coercive dimension (Del Priore, 2012, p. 28). At home, young women received an education filled with false moralism and excessive modesty. They turned to literature as a way to find love, which came in an idealized form. Priore asserts that young women loved a set of ideas they had about love (2012, p. 216). In the 19th century, the century that both prohibited sex the most and, paradoxically, spoke the most about it, the evocation of female sexuality did not happen in a way that benefited women. They did not know their bodies, and everything that was known about the subject was seen as profane, harmful, and disqualified.

CONCLUSION

This work is dedicated to understanding some of the perspectives present in the medical thesis *Da intoxicação pelo amor* by the doctor Leopoldo Pires Porto (1923). It aims to clarify the thoughts surrounding the female figure and her sexual and psychological nature, as these concepts underpin the genesis of pathological love, which affects men through heredity. Hysteria, defined as a disease rooted in the "weaker sex," is a widely debatable concept that can also be further examined in the second stage of the research, exploring its ramifications in other feminine examples cited by the author throughout the thesis.

The authors used in this research offer similar analyses, all guiding the gender discourse discussed in Porto's thesis. Clarifying what would be considered pathology in the 19th century contributes to the understanding of this sick love, as well as the differentiation made between men and women who "love too much." The differentiation of love in the two genders sheds light on the influence of medical discourse in the social realm, considering the attribution of completely different origins in the cases to demonstrate excessive love.

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