THE PATIENT'S CHOICE: A NEW TREATISE BY GALEN

The historian of ancient medicine has in recent years enjoyed one advantage over his more literary colleagues, the regular accession of substantial new texts by major authors. These have included not only fragments preserved on papyri and the membra disiecta gathered from later encyclopaedias and medical writings, but also complete treatises, some consisting of several books. There is, however, one drawback. Very few of these new texts are preserved in their original language, or even in a mediaeval Latin translation; most are to be found in versions done into Syriac, Arabic, or Hebrew, and hence they remain inaccessible to the average classicist without the intermediary of a further translation into a Western language. Besides, when such modern translations exist, they are not always easy to locate, even in the bestregulated libraries, and the supposed aridity of their contents acts as a further barrier to the dissemination of their information to students of ancient history and ancient philosophy. This paper is intended to bring to wider notice the most recent of such arrivals, and, by concentrating on what it has to say about Antonine society, to draw the attention of ancient historians to material that they might well overlook.

The editio princeps of Galen's treatise On examining the best physicians, which was published in 1988, together with an English translation and commentary, as part of the Corpus Medicorum Graecorum series of the Berlin Academy, is the fruit of almost thirty years of work by Dr Albert Z. Iskandar.² In 1960, he made available for the first time in print a treatise On examining physicians by the great Muslim doctor Rhazes (865-925), which is modelled on, and incorporates sections from, a largely unknown work by Galen on the same subject.³ In an appendix to this edition are listed Rhazes' borrowings, along with the corresponding passages in what was then thought to be the unique manuscript of the Arabic version of this lost work, Alexandria, Maktabat al-Baladiyya, Ms. 3813 jīm. Two years later, Iskandar published a short article, translating the relevant passages of Rhazes and Galen into English, and discussing their interrelation.⁴ Preparation of his announced edition of the new text was then held up as the result of the discovery by Albert Dietrich of an older, if textually less accurate, manuscript in a Turkish library, Bursa, Haraccioğlu 1120.5 Dietrich published part of the preface, the incipits of several chapters, and the conclusion, but only in Arabic. Not surprisingly, therefore, his study was neglected by classical

- ¹ The past fifteen years have seen the publication of Rufus of Ephesus, On jaundice; parts of his On melancholy; and some of his Case histories; and Galen, Commentary on Airs, Waters and Places (part). An edition of the Arabic version of the whole of this commentary is in active preparation, as is my own edition of Galen, On my own opinions.
- ² Galeni De optimo medico cognoscendo libelli versionem arabicam primum edidit, in linguam anglicam vertit, commentatus est Albert Z. Iskandar, Corpus medicorum graecorum supplementum orientale 4 (Berlin, 1988). This will be cited throughout as Iskandar. Unless specific linguistic points are at issue, references within the text are given by chapter and subsection only.
- A. Z. Iskandar, 'Al-Rāzī wa miḥnat al-ṭabīb', Al-Machrig 54 (1960), 471-522.
 A. Z. Iskandar, 'Galen and Rhazes on Examining Physicians', Bulletin of the History of Medicine 36 (1962), 362-5.
- ⁵ Albert Dietrich, 'Medicinalia arabica', Abhandlungen der Akademie der Wissenschaften in Göttingen, phil.-hist. Kl., 3 Folge, 66 (1966), pp. 190-206. In his description of the manuscript in his edition, p. 14, Iskandar omits the crucial library name (cf. Dietrich, pp. 245, 258, for other libraries in Bursa).

scholars, who had shown equally little interest in the long quotations from Galen's book that had been translated into German in 1929 from the Arabic biographer Ibn Abī Uṣaibi'a (d. 1270). Iskandar's own researches into rare Arabic texts also revealed a substantial number of quotations from Galen's book in later authors, not least among the writers of mediaeval Muslim handbooks for the market inspector, an official whose duties included the oversight of all medical personnel. In this *editio princeps*, readers will thus find not only a new classical text, and an accompanying English translation, but also a conspectus of its influence in the Muslim world for almost five hundred years.

If the merits of this edition reflect Iskandar's strengths as an investigator of Arabic manuscripts, his weaknesses are equally apparent, not least his ignorance of Greek, and of Roman social history. His Galen is largely the Galen of translation, whether Arabic or English, and the nuances of the Greek original are often lost in his English version. His commentary pullulates with misunderstandings of Galen's remarks, and wider questions of context and audience are never raised. This paper, as well as providing a description of this new book and the riches it contains, aims to correct some of its editor's misconceptions and to alert the reader unfamiliar with the technical problems of dealing with classical texts in translation to some of the pitfalls. Nevertheless, for all the strictures in the following pages, the balance of gratitude is still in Iskandar's favour, for the appearance of his edition in print makes it at last possible to see clearly what Galen himself was trying to achieve.

I. TRANSLATION

No trace of On examining the best physicians remains in the original Greek. It is not cited by Galen in any of his surviving writings, nor is it included in the lists of his own work he compiled towards the end of his life. Nevertheless, at least one Greek manuscript survived until the ninth century, when it was translated, first into Syriac and then into Arabic, by the great physician and translator, Ḥunain ibn Isḥāq, for two leading members of the court of Baghdad. Since the Greek original has not survived, it is impossible to be entirely sure of the reliability of Ḥunain's translation in every detail. Nonetheless, from the brief quotations from other texts where the Greek survives, and, still more, from what is known of Ḥunain's methods and technique elsewhere, it is possible to gain a reasonable impression of his accuracy and of the areas in which caution is most necessary when seeking to draw historical conclusions from his information.

All scholars who have studied the process of transmission of Greek medicine to the Muslim world are agreed on the magisterial accuracy of Hunain's versions. His methods of translation, as he described them, are remarkably sophisticated. He sought out Greek manuscripts, checked both his Syriac and his Arabic versions against the Greek original, and endeavoured to produce as stylish a version as

- ⁶ M. Meyerhof, 'Autobiographische Bruchstücke Galens aus arabischen Quellen', Sudhoffs Archiv 22 (1929), 75–82. Iskandar, p. 16, adds a further citation from this author. In my edition of On prognosis, Corpus medicorum graecorum v.8.1 (Berlin, 1979), I was able to provide parallel passages only from the sections already in print.
- ⁷ G. Bergsträsser, Hunain ibn Ishāq Über die syrischen und arabischen Galen-Übersetzungen, Abhandlung für die Kunde des Morgenlandes 17.2 (1925), p. 38 n. 112. The conjunction of Bakhtīshū' ibn Jibrīl and Muḥammad ibn Mūsā as the patrons of the respective translations gives at least a rough date and a place for the versions, c. 850 in Baghdad. Iskandar, pp. 18–19, 25–6, rightly concludes that there is every reason to suppose that the present version is by Hunain.

possible.⁸ He did this by forsaking a word-for-word equivalence in favour of an emphasis on the sense of the passage.

The translator considers a whole sentence, ascertains its full meaning and then expresses it in Arabic with a sentence identical in meaning, without concern for the correspondence of individual words. This method is superior, and hence there is no need to improve the works of Hunain ibn Ishāq.⁹

Confirmation of this early judgment can be found in the many studies of Hunain's translation technique, from Bergsträsser's Habilitationschrift of 1912 to Garofalo's 1986 edition of Galen's Anatomical procedures. 10 His careful striving after precision of meaning, however, has one consequence that may mislead the unwary. In order to convey Galen's tone accurately, Hunain frequently resorted to doublets or further expansion in an almost 'baroque' exuberance.11 Failure to acknowledge this may easily result in an attribution to Galen of something he did not actually write, and in an unjustified emendation of the text.¹² This tendency to expansion is particularly common when either the word or the concept was unfamiliar to Hunain or his audience. To convey the appropriate nuances of meaning in such instances might require a variety of remedies. In one celebrated example, Hunain deliberately left out a Galenic quotation from Aristophanes because he was not acquainted with the poet's language, and because, furthermore, it added nothing to what Galen had already said.¹³ Elsewhere, he resorted to substitution or paraphrase.¹⁴ This was especially true of passages where Galen spoke of the history or social life of the Antonine world.¹⁵ So, for example, at p. 102,3 = 103,2, Hunain explains the custom of the 'salutatio' by means of an additional paraphrase: 'visiting men regularly: what is called "salutation". Elsewhere he secures clarity through an extremely precise translation. At pp. 102,7 and 104,11 = pp. 103,10, 105,17, his rendition of $\partial \rho \chi \iota \epsilon \rho \epsilon \dot{\nu} s$ as 'a man

- ⁸ See the comments by Hunain reproduced by Franz Rosenthal, *The Classical Heritage in Islam* (Berkeley, 1975), pp. 19–21.
 - ⁹ As-Safādī, translated by Rosenthal, ibid., p. 17.
- ¹⁰ G. Bergsträsser, Die bisher veröffentlichten arabischen Hippokrates- und Galen-Übersetzungen, Diss., Leipzig, 1912, later published in an enlarged form as Hunain ibn Ishāk und seine Schule (Leiden, 1913); I. Garofalo, Anatomicarum administrationum libri qui supersunt novem (Naples, 1986), esp. pp. xvii–xxvii, with a good bibliography of previous stylistic studies. I fail to understand why Iskandar, p. 26, says that 'nobody knows the method adopted by Hunayn... and his school... in rendering... Galen... into Arabic', unless 'method' is taken in the narrowest sense of discovering the precise meaning of a Greek word. Even so, Iskandar makes no reference to the work of any other scholar save Bergsträsser, and cites only parallel expressions found in other translations ascribed to Hunain and his school.
- ¹¹ The formulation is that of Peter Bachmann, 'Galens Abhandlung dazü, daß der vorzügliche Arzt Philosoph sein muß', *Nachr. Akad. Wiss. Göttingen* 1965, p. 10. Cf. for his pupil Hubaish, H. H. Biesterfeldt, 'Galens Traktat "Dass die Kräfte der Seele den Mischungen des Körpers folgen', *Abhandlungen für die Kunde des Morgenlandes* 40.4, 1973, pp. 16–28.
- ¹² For similar warnings, note Hans Diller, Kleine Schriften zur antiken Medizin (Berlin, New York, 1973), pp. 155–7; and Bengt Alexanderson, Galenos $\Pi EPI \ KPI\Sigma E\Omega N$ (Gothenburg, 1967), pp. 54–7.
- ¹³ Rosenthal, *The Classical Heritage*, p. 19; note also K. Deichgräber, 'Parabasenverse aus Thesmophoriazusen II des Aristophanes bei Galen', *Sitz. Akad. Wiss. Berlin, Kl. f. Sprachen, Lit. und Kunst* 1956, 2.
- ¹⁴ G. Strohmaier, 'Ḥunayn ibn Isḥāq et le serment hippocratique', in Ḥunayn ibn Isḥāq (Leiden, 1975), pp. 321-2.
- 15 cf. Mario Grignaschi, 'La "Physiognomie" traduite par Ḥunayn ibn Isḥāq', in Ḥunayn, pp. 285-91. This argument is employed by Toufic Fahd in his defence, against Manfred Ullmann, of the authenticity of Ḥunayn's translation of Artemidorus' *Dream book*, 'Ḥunayn ibn Isḥāq est-il traducteur des *Oneirocritica* d'Artémidore d'Éphèse?', ibid., pp. 270-84.

from the chief of the priests' conveys the meaning of the $d\rho\chi$ - prefix perfectly. ¹⁸ The best example of this technique of periphrastic expansion is found at pp. 94,5–6 = 95,6–7, where Galen quotes Thucydides, Hist. 3.42.2, against those who reject argument. ¹⁷ Ḥunain's version of $\tau o \dot{v} \dot{s} \tau \epsilon \lambda \dot{\sigma} \gamma o v \dot{s} \delta \sigma \tau i s \delta i a \mu \dot{a} \chi \epsilon \tau a i \mu \dot{\eta} \delta i \delta a \sigma \kappa \dot{a} \lambda o v \tau \dot{\omega} \nu \tau \rho a \gamma \mu \dot{a} \tau \omega \nu \gamma \dot{\nu} \gamma \nu \epsilon \sigma \theta a i$, $\dot{\eta}$ defences a reguments and analogies and claims that nothing is made valid with them, is either lacking in intellect or thereby seeks to acquire authority or has some interest at stake. That the latter pair of alternatives represents Ḥunain's own expansion of Thucydides' $\dot{\eta}$ iδία τi a $\dot{v} \dot{\tau} \dot{\omega}$ $\delta i a \phi \dot{\epsilon} \rho \epsilon i$ rather than a different Greek text is clear from Galen's own quotation of the same passage at De usu partium, iii.10: iii.217–18 K. The first part of the sentence, however, admittedly difficult Greek, is turned into elegant Arabic, which keeps the general sense although some way removed from the original. The striking $\delta i \delta a \sigma \kappa \dot{a} \lambda o v \sigma \dot{\nu} \tau \rho a \gamma \mu \dot{a} \tau \omega v$ loses the metaphor of teaching, and Thucydides' $\lambda \dot{\sigma} \gamma o i$ are expanded into two forms of argument, 'kalām wa qiyās', a phrase taken up a few lines later in the translation. ¹⁸

The conclusion to be drawn from this brief survey of Ḥunain's technique of translation is that while he is very likely to have preserved the general sense of the Greek, details have to be carefully checked for parallels in Galen's other writings before they can be accepted as genuinely Galenic and not the expansion or interpretation of his translator.¹⁹

II. TITLE

¹⁶ cf. Iskandar, p. 36, for these two examples.

¹⁷ Dietrich, op. cit. (n. 5), p. 194 n. 1, had earlier ascribed this quotation to Posidonius.

¹⁸ Iskandar, p. 95,7, translates *kalām* as 'words', which might seem to make a contrast with 'things'. However, its more usual meaning is 'argument', and that is how he translates it when the phrase is repeated at 94,8-9=95,11-12, and again in his summary of the Thucydidean comment at p. 141. The presence of 'yaṣeḥḥu', 'made valid' ('authenticated' Iskandar), might suggest that Ḥunain was thinking of a form of δικαιοῦν, but it is more likely that he was simply aiming to give the sense of this gnomic statement.

¹⁹ Iskandar's painstaking English translation corresponds well to the Arabic, but, at times, his choice of words gives a meaning more remote than Ḥunain's Arabic from what Galen originally wrote.

²⁰ Iskandar, pp. 12-13

²¹ G. Bergsträsser, op. cit (n. 10), nn. 118, 112.

it by the short form, albeit with variations.²² Although some of them may derive their information solely from Ḥunain's Risāla, others show evidence of having read the book themselves. Their unanimous testimony, which goes back in some instances to Ḥunain's own day, outweighs the partial evidence of the much later manuscripts, and confirms the short form as Ḥunain's original title.

III. AUTHENTICITY

Although Galen himself never mentions this work in any extant treatise, there can be no doubt that Ḥunain was right to include it among the genuine works of Galen, albeit one omitted from the catalogue of his own writings. ²³ Not only was it obviously written in Galen's lifetime, but there are cross-references to other works of Galen, as well as passages that are stylistically very close to others elsewhere in his writings, particularly in *On prognosis*. ²⁴ Authenticity is thus assured.

IV. DATE

From the cross-references and historical allusions it is possible to date On examining the best physicians fairly closely. Galen refers specifically to his already completed commentary on Hippocrates' Aphorisms, pp. 78,10 = 79,19, as well as to a book On the compounding of drugs, pp. 122,2 = 123,2. The former reference points to a date, at the earliest, in the mid-170s, and from the latter, which, in Hunain's translation, alludes to a book still to be written, Iskandar concludes that On examining the best physicians must pre-date On crises, for in the latter treatise Galen clearly refers to his drug book as complete. Since On crises was written before Commodus' departure from Rome in May, 175, Iskandar suggests that the new book was written shortly before then, between the composition of On critical days (which precedes the commentary on Aphorisms) and that of On crises, i.e. 'shortly before May 175'. 25

Several weighty arguments can be brought against this dating. At On prognosis 12,10: xiv.664 K., Galen told Peitholaos in 175 that he had just $(\tilde{\epsilon}\nu\alpha\gamma\chi\sigma s)$ written three treatises dealing with prognosis, On the differences between fevers, On critical days and On crises. Given that On examining the best physicians too deals at considerable length with prognosis and its necessity for the true physician, and, on Iskandar's chronology, was written precisely between two of these tracts, its omission is extremely odd. Secondly, there is no evidence whatever to contradict Galen's implication, confirmed by the texts themselves, that On critical days and On crises

- ²² The secondary tradition is reviewed by Iskandar, pp. 18–25, but neither here nor on p. 12, where he cites the bibliographical entries in the late-tenth century *Fihrist* of Ibn an-Nadīm and in the thirteenth-century dictionary of Ibn al-Qifṭī, are the details of the titles always given in full. The *apparatus criticus* at 1,1 cites only the variants in the headings of the two manuscripts, and hence the unwary reader may not realise the weight of authority against Iskandar's preferred title.
- ²³. Bergsträsser, op. cit. (n. 10), n. 112. Although he here expressly states that this book is not found in Galen's list of his own books, he makes no mention of it in the treatise he himself wrote on the books that Galen omitted from his catalogue, see G. Bergsträsser, Neue Materialien zu Ḥunain Ibn Isḥāq's Galen-bibliographie, Abhandlungen für die Kunde des Morgenlandes 19.2 (1932)
- ²⁴ Iskandar, p. 30. His previous pages, 27-30, endeavour to establish the authority of Hunain as a witness to authenticity, which is hardly at issue here.
- ²⁵ Iskandar, pp. 30-4. The reference to Herodes Atticus as 'the most able orator of our time', 112,11 = 113,15, does not, *pace* Iskandar, p. 31, place it at around the time of Herodes' death, c. 177, a date which he himself immediately rejects.

were written in fairly rapid succession, if not consecutively. Peterson's suggestion that The method of healing i-vi (which is cited in On crises i.3: ix.557 K.) was being composed simultaneously with On critical days, because there are no cross-references between the two treatises, is an unjustified inference from silence.²⁶ Given their very different subject matter, any cross-referencing would be fortuitous, and hence this argument cannot by itself disprove the hypothesis, likely on other grounds, that The method of healing was finished before Galen embarked on the two works dealing with crises. Even if Peterson is right, since The method of healing iii.5: x.200 K., cites On the composition of drugs as already in existence, it would appear that On examining the best physicians must predate this treatise as well as On crises. In other words, it was composed even earlier than Iskandar himself allows. Furthermore, the gap between On critical days and On crises grows ever greater, for it must accommodate not only the new text and The method of healing i-vi, but also the commentary on Aphorisms, which, on Iskandar's argument, was written after On critical days but before the new treatise. The chronological paradox is made even more striking if one accepts Peterson's cogent demonstration that there is no good reason to place the commentary on Aphorisms, or, indeed, any other Hippocratic commentary, before the composition of On crises.²⁷ On this chronology, the one text securely cited in the new treatise postdates May 175.

Against such a conclusion, Iskandar deploys two arguments to show that the new treatise predates the writing of On crises. The first is an argument from silence. Although much of the new text is taken up with the interpretation of crises, there is no mention of the long work in which Galen specifically discussed this problem. This, if true, is puzzling, although no more so than Galen's failure to mention On critical days, which certainly was written before the commentary on Aphorisms.²⁸ But, although there is no direct citation, an allusion can be detected behind Hunain's version. In ch. 7, Galen talks of the reliability of prognostic signs, and of the difficulty of telling at the very onset of a disease how long it is going to last. Although the crucial sign may not appear for some time, a good doctor ought to be able to tell on the first or second day of an illness whether it is going to end within a week or last for longer. Galen then quotes himself: 'Whoever denies this, and claims that such prognostication is impossible, will have to attend to our clinical cases and ask us to validate our statements, in order to discover himself whether we are wrong or right. '29 I have been unable to locate these actual words in any surviving work of Galen, but similar statements are found at the end of On Crises, Book I, and at the beginning of Book II (124–8 Alexanderson), during the course of a discussion on the identical topic of initial critical signs. If Galen is not quoting verbatim from an otherwise lost work but summarising a longer discussion of the subject, this passage in On crises offers by far the closest parallel from among Galen's many disquisitions on prognostic signs. Although this hypothesis is far from watertight, it offers the possibility, to put it no higher, that the new tract was written after *On crises*, which is likely on other grounds.

The second prop of Iskandar's theory is the reference at p. 122,1-2=123,2-3 to On the compounding of drugs as still in the future. Galen's pharmacological treatises come from two distinct periods of his life, the early 170s and the 190s. The majority, including the two big treatises On the compounding of drugs, according to type and ... according to site, were not written until the 190s, and, unless one is prepared to date

²⁶ D. W. Peterson, 'Observations on the chronology of the Galenic Corpus', *Bulletin of the History of Medicine* 51 (1977), 495.

²⁷ Ibid., pp. 492-3, accepted by Iskandar, p. 32.

²⁸ Rightly, Iskandar, p. 31, citing ix.770-1 K.

²⁹ Iskandar, p. 90,15-17 = 91,19-21.

the new treatise to around that time, it is somewhat unlikely that Galen can be alluding directly to this group of treatises. There is, however, an alternative, in the two books On the composition of drugs that were destroyed in the great fire at the Temple of Peace in 192 (x.896, 955 K.). Like the first eight books of On the properties of simples, they were written in the early 170s, for they are cited in On the causes of symptoms and in the Method of healing. 30 But a date as early as this for On examining the best physicians is extremely unlikely, for it conflicts with the reference to the commentary on Aphorisms and separates On critical days still more from On crises. There are two solutions to this dilemma. The first, with Peterson, is to assume that the two books On the composition of drugs cited by Galen in the early 170s were the opening sections of a major work which, for a variety of reasons, could not be completed for over twenty years. Its opening books, however, were available to Galen's friends, and circulated as an independent treatise. References to On the composition of drugs can thus relate both to something already available and to its future conclusion, and offer no precise terminus ante for the 170s.31 The second solution accepts the existence by 174 of a finished tract On the composition of drugs. independent in all but name of the two treatises of the 190s, and assumes that this is the work alluded to here by Galen. On this argument, the cause of the confusion is an ambiguity in Galen's language. As Bardong showed, Galen's use of the present tense in such words as $\dot{\epsilon}\xi\eta\gamma\circ\hat{\nu}\mu\alpha\iota$ may be interpreted as referring to a book or a discussion either past or future, depending on the wider context.³² Such ambiguity, however, is not always possible, or even desirable, for the translator. As Iskandar himself notes, p. 32, on one occasion Hunain translated, in an exactly similar context, a present ἐξηγούμενος as if it were a future. But a correct interpretation in one passage does not guarantee it in another. In his laudable effort to give a precision to the tense which is not there in the Greek, Hunain, perhaps thinking of the larger works still to come in the 190s, may have opted once again for the future tense. On either argument, the grounds for dating On examining the best physicians before On crises disappear, along with the ever-widening gap between On crises and On critical days. One must seek another date of composition.

On Peterson's chronology of Galen's writings from the mid-170s, the commentary on Aphorisms was composed at the end of 175 or in early 176, and consequently On examining the best physicians must be later still, But how late? Given the absence of any citations in other surviving books, a definite answer is impossible. A date in the 190s cannot be excluded, if the proposed treatise On the composition of drugs is to be identified with one of Galen's large drug books written under Severus, but this is unlikely, not least in the absence of any allusion to events or writings from the late 170s onwards. A better solution would be to place it in 177/178, in close proximity to On prognosis. The argument is twofold. Firstly, although much of the new treatise is taken up with the importance of prognosis, not only for the doctor, but also as a way in which the intending patient/customer can gauge the physician's competence, it is curious that Galen refers neither to his commentary on the Hippocratic Prognosticon nor to On prognosis. The substantive chapters of the new book begin with a discussion of the opening words of the Prognosticon, one of Galen's favourite Hippocratic works, while On prognosis he considered his major discussion of the topic,

³⁰ K. Bardong, 'Beiträge zur Hippokrates- und Galenforschung', Nachrichten Akad. Wiss. Göttingen 1941, p. 635.

³¹ Peterson, op. cit. (n. 26), p. 491.

³² Bardong, op. cit. (n. 30), pp. 605, 617.

and was still referring to it as such in the 190s.³³ The absence of citations from or allusions to these two treatises in *On examining the best physicians* may be a consequence of its impromptu composition, but a simpler and more likely explanation is that it was written before the other two. By contrast, Galen's failure to mention *On examining the best physicians* in these or in any other writings on prognosis suggests that it was an occasional piece, an oration of which he himself did not retain a copy, or a mere preliminary, soon superseded by a more extensive and more closely focused discussion.

Secondly, the relationship between *On prognosis* and the new text is close both thematically and stylistically. The banishment of Quintus figures in both; the case of a man with a nasal haemorrhage from the right nostril is mentioned in both; and there are the same denunciations of the corruption and incompetence of other practitioners, often in the same language.³⁴ Given such similarities and, not least, the tone of aggrieved self-advertisement they both display and the crucial importance they both attribute to prognosis, a close chronological link between the two treatises is probable. Indeed, it is not fanciful to posit that *On examining the best physicians* provided the spur for the more detailed discussion of the meaning and practice of prognosis by emphasising its importance in the characterisation of the best physician.³⁵ If these speculations are right, the new treatise will have been written c. 178, three years or so later than its editor suggests.³⁶

V. AUDIENCE

Like most of Galen's treatises, On examining the best physicians was originally delivered orally in front of friends and acquaintances. His comment at 3.14 that the members of his audience were all aware of his treatment of a man with an eye-ulcer would seem to exclude the possibility that this was a public lecture to which anyone who wished might come. His words would be taken down by shorthand writers to form a book, which might then be copied and circulate among his friends.³⁷ Although not everyone would agree with Galen's own claims that all his treatises were 'published' in this way at the behest of friends, this book shows every sign of being among those that were. Indeed, the fact that nowhere else in his surviving oeuvre does he mention it might even suggest that he himself retained no copy, and that it survived (like On prognosis) solely through being preserved outside his own personal library.³⁸

Its intended audience is typical of the rich and cultivated circles in which Galen moved. The envisaged patient is wealthy enough to choose his own physician, and educated enough to understand the minutiae of medical discussion. Indeed, in order to make the right choice, he must be almost as well-read and as proficient in medical theory as his eventual physician (13.5). Such a passion for medicine is far from untypical of the Roman upper classes in the Antonine period, and Galen's own circle

³³ Iskandar, p. 46,13-48,2 = 47,19-48,3. Galen's characterisation of *On prognosis* is found at *In Hippocratis Epidemiarum librum VI comment. VIII:* CMG v 10,2,2, p. 495,2-12.

³⁴ cf. Iskandar, p. 52,11 = 53,19 with xiv.602 K.; p. 62,3-10 = 63,3-14 with xiv.665-9 K.; and, for verbal parallels, pp. 100,13-106,2 = 101,20-107,2, with xiv.600 K.

³⁵ Admittedly, this is far from being conclusive, for it is remarkable how Galen can take up, even after thirty years, problems discussed earlier, and continue his exploration often in similar language. He claimed consistency of doctrine, at least in essentials, throughout his career, but both tone and theme coincide in these two treatises even more than usual.

³⁶ For the date of *On prognosis*, see my edition, p. 49.

³⁷ cf. Iskandar, p. 138, for Galen's references to this book as a written treatise.

³⁸ For *On prognosis*, see the discussion at CMG v.8,1, pp. 49–51.

of intimates encompasses senators and even imperial relatives.³⁹ Much of Galen's advice can hardly have been followed except by those who had the time and the education, and, as such, it will have been irrelevant to the needs of the average Roman citizen. Similarly, the long examination of possible candidates can hardly have been pursued by a sufferer from an acute illness. This tract is either intended for those with a midler or a more chronic condition or, what is more likely, for those who wished to engage a physician in the future (8.10) or to secure his aid by means of a retainer. In short, more than most of Galen's writings, this is a text for the wealthy Roman with intellectual pretensions who 'considers his body at least as important as his personal possessions' (1.13).

VI. CHOOSING A PHYSICIAN

The problem of finding a suitably competent physician, as described by Galen, was, above all, a metropolitan problem. The peasant in the backwoods must make do with whatever was available. There might be a local healer, but his therapeutic resources were often slender (xii.908, 918 K.), or one might luckily encounter a healer either on a circuit or passing on his way to or from a distant homeland. More often than not, the countryman would have to rely on his own initiative. If he lived close enough, and acted decisively, he might, like Galen's peasant bitten in the finger by a snake, dash to a town where more expert help was available. If not, like a vine-dresser in a similar situation, he might have to amputate his finger himself (vii.197–8 K.). In the small country towns, according to Galen's idealisation in *On prognosis* (xiv.621 K.), the problem of choice did not arise. Such healers as there were were kept up to the mark by their patients' personal knowledge of the whole of their lives and background. The immoral and the incompetent, so Galen imagined, were forced out, and the virtuous rewarded. Hence, a preference for one healer over the next did not bring with it such disastrous consequences, since all alike were capable.

But for the inhabitants of the larger towns, like Pergamum and Rome, the constraints of a face-to-face society were much less. The size and anonymity of Rome meant that a man could die without even his neighbours knowing how or by whom he had been treated (1.12). One might, indeed, be able to find one of the select numerus clausus of doctors, chosen by a town council on the basis of their skill and morality to receive the privilege of tax-immunity or even a stipend, but, in a Smyrna or a Carthage, the ten healers who were so approved could have treated only a mere fraction of the population. 40 In Antonine Rome, there was not even this possibility of external differentiation, for, by long prescription, all medici whatsoever were entitled to the privilege of tax-immunity. It is hardly surprising, then, that in a work written for a Roman audience Galen should have made no allusion to any official ratification of a healer's merits. 41 If public approbation was not forthcoming, neither

⁴⁰ For the details of the system of tax-immune physicians, see my *From Democedes to Harvey* (London, 1988), chs. IV-V1.

³⁹ See On prognosis, passim.

⁴¹ Iskandar, p. 165, relates the public 'contest' between doctors at 9.6 to the choice of public doctors. This is unlikely for several reasons. At this date, the choice was made by the town council, not by the population at large; the post Galen eventually obtained was that of doctor to the gladiators, and was in the gift of the High Priest of Asia, and, as such, was not a public appointment; what is described is less of a public examination than a challenge match, such as we know from other passages in Galen (e.g. viii.158, xi.188 K.). or the medical 'contests' held at Ephesus and possibly elsewhere in Asia Minor. The incident took place in Pergamum, and

was personal recommendation entirely satisfactory, for, so Galen alleged, the fashionable doctors, who attended the best patients, were not always the most effective, for their very success might have been won through dubious means, flattery and quackery, rather than through sound therapy (1.9; 9.16; 9.22).

Galen's solution is the active involvement of the potential patient. It is not enough simply to stick to the doctor one is used to, for, without extending one's search, one has no way of knowing how much better or worse he might be than the next man (1.5). Reliance on the judgment of others is equally dangerous, for their criteria of excellence may be weak or fallible (1.6–7). Self-reliance is essential. In what may turn out to be a matter of life and death, it is the patient's duty to exert himself in every way to ensure that his physician is at least competent, if not a veritable Galen. If he does not, he has only himself to blame if things go nastily wrong.

The key to the right decision is provided, according to Galen, by prognosis, which involves knowledge of both past and present, as well as of the future. The best doctor is the one who is most skilled at prognosis, for he will thereby be able to forestall a dangerous situation, or, if that is impossible, be ready with all the appropriate armamentarium when the crisis looms. When contradictory or apparently unexpected signs appear, the prognostic expert will be able to keep control of the situation because he knows what the course or the eventual outcome of the disease will be, and can take appropriate action accordingly (2.2–6).

If prognosis is the key to successful practice for the doctor, it also enables even the most ignorant patient to distinguish the experienced and trustworthy practitioner from the impostor and the quack. As Ludwig Edelstein long ago insisted, prognosis has a social function in offering a validation of the doctor's claims.⁴⁴ Not only can one observe the skilled physician's reactions to a case as the symptoms change, but the patient and his friends can compare the results of a case with what had been first predicted, always assuming, of course, that the doctor who made the prognosis is allowed to carry out the treatment himself unhindered. The good physician is not only able to tell the nature and the course of a disease quickly, but makes very few mistakes (5.5). He does not rely on one sign only, but often on a whole concatenation of signs, and, as a result of his deep knowledge, he is able to impose his will on the patient rather than tamely submit to his whims (5.16).

But for some physician-hunters, it is not necessary to look at a doctor's clinical practice before deciding on his merits. A man who is well trained in demonstrative logic can find out the truth simply by questioning the would-be healer on his learning (5.3–4). For Galen, the crucial test is his knowledge of Hippocratic writings, especially those on prognosis (5.1). Although in the past Hippocrates was considered divine, this, according to Galen, is no longer true of his own day (2.1). Many of the leading physicians now despise his teachings, and those of the Ancients (3.4), and are hence says nothing about conditions in Rome. Given that Galen knew of public physicians (v.751 K.) and that some of his audience might well have served on a town council in their 'native' cities, his silence can hardly be accidental.

- 42 At 11.7 Galen specifically contrasts his own abilities with those of the average, but still competent, physician, and suggests that such a man ought not to be rejected for not being the 'complete' physician. The same adjective is often found on honorific decrees and tombstones. Interestingly, Soranus, Gyn. 3, places the 'complete' physician at a lower level of competence than the $\alpha\rho\iota\sigma\tau\sigma$ s, see D. Gourevitch, 'Un thérapeute accompli. Note sur l'adjectif $\tau\epsilon\lambda\epsilon\iota\sigma$ s', Rev. phil. 61 (1987), 95–9.
- ⁴³ Galen's plea is subtly different from the suggestion of Athenaeus of Attaleia, 150 years earlier, that for a layman to learn about medicine would provide him with intellectual stimulation as well as practical benefit, should he fall ill.

⁴⁴ Ludwig Edelstein, Ancient Medicine (Baltimore, 1967), pp. 65-85.

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unaware of the reasoning behind his precepts (5.1). Such a complaint, although tendentious and almost certainly aimed at the Methodists, is nevertheless an important corrective to modern views on the development of medicine in Rome, which, in part as a result of the mere survival of texts in the Galeno-Hippocratic tradition, have seen a decline in Methodism after the time of Soranus in the early second century, and a contemporaneous resurgence of Hippocratism with Rufus of Ephesus and with Galen himself. If Galen is right in his assessment of the relatively small respect shown to Hippocrates in his own day, the triumph of Hippocratism by the fifth and sixth century may owe even more to his own achievements than has been previously realised. To put it at its very least, Galen himself was once convinced that Hippocratism was no longer the dominant force in medicine that it had been, and was to become again in the fifth century.⁴⁵

A knowledge of the Hippocratic writings is thus essential for the good physician, and, indeed, for the prospective patient if he is to have any chance of judging the veracity of the candidate's answers (5.1). Only if he is satisfied with the replies to his questions on what Hippocrates said and where, can he pass on to a further series of queries on the opinions of other ancient physicians. Galen's list is instructive: Diocles, Pleistonicus, Phylotimus, Praxagoras, Dieuches, Herophilus, Erasistratus, and Asclepiades (5.2). With the exception of Asclepiades, all flourished in the fourth or third century B.C. There is no author recommended from the major medical sects of the later Hellenistic period, no Athenaeus of Attaleia or Archigenes from the Pneumatists, no Heraclides of Tarentum from the Empiricists, even though, in other works, Galen speaks highly of all three. The absence of any of the Methodists is hardly surprising, given Galen's hostility to them, but it then appears strange to find the name of Asclepiades among the élite, since a connection is often made between his doctrines and the later 'Methodist' theories of Themison and Thessalus.⁴⁶ The presence of Erasistratus is also noteworthy, for he usually receives far more blame from Galen than praise.47

What links together these great names from the past, and accounts for their superiority, is their reliance on reason; in short, they were 'dogmatists' or 'logical physicians' (λογικοί). Galen's list of leading dogmatists who supported venesection, xi.163 K., comprises almost the same names, with Mnesitheus replacing Erasistratus, even though he himself admits that Asclepiades' membership might excite critical comment. Elsewhere, Galen associates Erasistratus with Diogenes, Diocles, Praxagoras, Phylotimus, Herophilus, Asclepiades and Hippocrates as physicians who recognised both experience and reason as the essentials of sound practice. Such a collocation is not confined to Galen. The pseudo-Galenic *Introduction*, xiv.683 K., describes Diocles, Praxagoras, Herophilus, Erasistratus, Mnesitheus, and Asclepiades as members of the 'logical sect', which had been founded by Hippocrates. Although modern scholars may rightly dispute whether this, at times quarrelsome, collection of individuals ever constituted a sect with doctrines as clear as those of the Methodists or the Empiricists, there can be no doubt that they were so described in introductory

⁴⁵ But cf. the comment of Philostratus, VS 536, that Timocrates of Pontus, fl. A.D. 140, as one who had devoted himself to the study of medicine, was fluent in the theories of Hippocrates and Democritus.

⁴⁸ cf. Edelstein, Ancient Medicine, pp. 180, 190; E. D. Rawson, Intellectual Life in the Late Republic (London, 1985), pp. 170-80; D. Gourevitch, Soranos d'Éphèse, Maladies des femmes (Paris, 1988), pp. xix-xxii.

⁴⁷ cf. Ivan Garofalo, Erasistrati fragmenta (Pisa, 1988), pp. 10-15.

⁴⁸ Galen, On medical experience, 13; pp. 109-10 Walzer. This section uses these 'dogmatist' names to attack those dogmatists who reject experience and who rely solely on reason as a guide.

handbooks. ⁴⁹ Traces of a similar classification can be found in another 'introductory' text of the first or second century. In the treatise *On acute and chronic diseases* traditionally known as *Anonymus Parisinus*, each disease is considered under three headings; its cause, its signs, and its therapy. While modern scholars have argued over the extent to which the two last sections show Methodist or Pneumatist influence, there can be little doubt that the first is concerned entirely with 'rationalist' opinions. The views of four physicians, Hippocrates, Diocles, Praxagoras, and Erasistratus, are regularly given, and together they constitute the 'ancients'. Only two other names are mentioned: Democritus the philosopher, for his views on *elephantiasis*, a disease on which earlier physicians had been silent, and Ariston, whose opinions on the causes of syncope are given almost as an afterthought. ⁵⁰

The presence of these canonical names in short handbooks of medicine resolves the problem of the accessibility of writings of these authors. Although Galen, a great bibliophile, may have owned copies of the works of Asclepiades, Erasistratus, Herophilus, and many others, he was avowedly exceptional in devoting much of his wealth to buying books (v.48 K.). Lesser men were hardly likely to be able to pick up copies of Dieuches or Phylotimus, despite a flourishing medical book trade in Rome (cf. viii.149 K.). But the tendency of introductory handbooks to present medical data in terms of disputed topics, a tradition that goes back at least to Meno and that is evident even in the later sections of the Anonymus Londinensis papyrus, will have offered the student a way of becoming acquainted with the great names and theories of the past.⁵¹ Galen's wish for the good student to know also the arguments and counter-arguments behind the various theses would be easily met from such books. The last part of Anonymus Londinensis, chs. xxi-xxxix, describes the body and its functions by means of a juxtaposition of the views of Herophilus, Erasistratus, Asclepiades, and Alexander Philalethes. Such school doxographies may be traced even in Galen. In his juvenile piece On medical experience, ch. 13, he draws on the opinions of great 'dogmatic' physicians of the past to defend empirical knowledge. While one cannot doubt Galen's own stamina or his father's wealth and intellectual interests, the fact that this list of authorities coincides almost exactly with those recommended in On examining the best physicians suggests that Galen was relying at least as much on 'school compilations' as on his own wide reading in his family's private library.

To interpret the 'right course of instruction' (5.1) to be followed by a student in terms of book-learning would make sense of Galen's puzzling silence on teachers. Nowhere in *On examining the best physicians* does he raise the possibility that the quality of a student may, in some instances, be gauged from that of his teacher. Although Galen elsewhere notes the misfortune that a poor teacher can bring upon the head of a good student,⁵² he does not suggest that a reference to, or from, a good

⁴⁹ Heinrich von Staden, 'Hairesis and Heresy: the case of the *haireseis iatrikai*', in Ben F. Meyer, E. P. Sanders, edd., *Jewish and Christian Self-Definition* (London, 1982), iii, pp. 76–100, esp. pp. 81–3; this triple division of the sects may well have been canonical before Galen, *pace* von Staden, p. 83.

⁵⁰ R. Fuchs, 'Aus Themisons Werk Ueber die acuten und chronischen Krankheiten', *Rheinisches Museum* 58 (1903), pp. 68–113. Fuchs' edition is greatly in need of improvement, not least because it was based only on two poor manuscripts. For the question of authorship and date, cf. J. Kollesch, *Untersuchungen zu den pseudogalenischen Definitiones medicae* (Berlin, 1973), pp. 24–8; and Garofalo, *Erasistrati fragmenta*, pp. 9–10.

⁵¹ Kollesch, *Untersuchungen*, is fundamental for any study of such introductory literature. Cf. also, Brian Lawn, *The Salernitan Questions* (Oxford, 1963), pp. 3-5.

⁵² Notably in the case of Philistion, a young man from Pergamum who was led astray by following the teachings of his master Metrodorus, CMG v.1.1, pp. 401-3.

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teacher will be of assistance in determining one's choice of doctors. Still less does he mention attendance at a well known medical centre, such as Alexandria or Smyrna. Indeed, his only reference to a physician who has travelled widely is extremely disparaging (9.17): he has no right to be called anything save an impostor whose speciality is wandering abroad. In holding up his own career as an example to follow, it is reading and personal study, not travel or attendance at a medical school, that he emphasises (9.3: 9.22; cf. x.560–1 K.).

The energetic dedication of the autodidact also provides the would-be patient with another way of examining the physician. Anyone at all can test a physician by looking at his clinical practice and, not least, by comparing his prognoses with his results. By contrast, a theoretical examination demands intelligence, logical ability, and a certain degree of effort from the examiner, and is, for that reason, beyond the capacity of most men (5.4; 8.3-4; 8.9; 9.1). There is, however, a third way, which may help to decide on the true physician without recourse to the bedside or to intellectual heights. If the putative physician is already known to the would-be patient, and has shown himself to be honest, hard-working, and intelligent (9.5), then he can be trusted to act correctly. This may be true, even if all that the patient has to go on is the physician's own assertion that he is intelligent, quick-witted and, like Galen, devoted to studying medicine and examining the treasures of the Ancients (9.3). Such an autodidact, of encyclopaedic learning, Galen ranks above a man who has neither intelligence nor appropriate medical experience.⁵³ His qualified support is not just special pleading for fellow bookworms. As Jutta Kollesch has pointed out, the relatively small number of teaching centres known will have meant that those healers who did not come from medical families or who were not apprenticed had inevitably to pick up medical theory, and much of the details of medical practice, from what they could read.⁵⁴ Galen's emphasis on the amount of information an aspiring doctor could gain by himself also reflects a society where the instant transformation of gladiator, undertaker, cobbler, or failed grammarian into doctor (and, occasionally, the reverse) was common enough for comic wit.55

If the candidate shows himself to be of good character, to have passed his time in study and clinical practice rather than in frivolity, and to have read the right books (9.22), his examination may proceed further. He should be questioned first about his knowledge of anatomy, then about the actions and function of each organ, and, finally, about his methods of reasoning in his therapeutics. Only if he passes these theoretical tests, should one investigate his statements about patients and his performance in practice (9.24). Here Galen runs into difficulties, as he himself admits. His first series of recommendations (10.1–11.8) offers a series of examples of assuredly excellent treatment, e.g. curing tonsillitis or trachoma by drugs and diet rather than by surgery (10.1–2), but, he has to admit, failure to do this is no indication of incompetence. Many famous physicians have had to confess themselves baffled by conditions curable by a Galen (11.7–8), and the patient may be glad of basic competence if the alternative is either nothing or an interminable wait for the new

⁵³ Ḥunain's version, which I follow here, is somewhat banal, for obviously a man of intelligence and some learning is superior to a man who has neither. A better and more Galenic interpretation, which may have been clearer in the original Greek, would be that this man would be better than the unintelligent but experienced healer, and than the intelligent but inexperienced one. The latter proposition is obvious; in the former, Galen is ranking experience of cases derived from reading almost on a par with bedside experience.

⁵⁴ Kollesch, op. cit. (n. 50), p. 14.

⁵⁵ Nutton, From Democedes to Harvey, VIII, pp. 30-3.

genius to arrive. Galen thus changes tack, describing instead diseases and conditions that a competent healer ought to be able to treat successfully, e.g. curing a dog bite by drugs alone or knowing how and when to open a vein (12.1-2). Equally, while a merely competent practitioner may not know everything there is to know about drugs, he should at least be expected to have a method of making up his own remedies from whatever is to hand, flowers, fruits, saps and the like, for he might easily be stranded on a journey, far from his normal supplies (cf. xii.908 K.). He should also be able to name a drug which can cure a whole range of conditions, either by itself or in combination with other media (12.4-8). His choice of drug will offer as promising an indication of his abilities as a list of his cases, where it is not their number that should count, but their difficulty (13.5). A favourable outcome in a handful of complicated cases outweighs any number of easy successes. The wouldbe patient is expected by Galen to be able to distinguish the difficult from the easy case by his own powers of investigation and intelligence. He may find it simpler to test the doctor's ability to communicate his findings. Anyone who fails to describe symptoms clearly by word of mouth can be dismissed at once, while the others should be examined further on their ability to diagnose at once symptoms they have already described orally (13.10). A similar procedure can be applied to the examination of surgeons, and is again dependent on the patient's ability to discriminate between a serious and a simple condition (14.1–3).

While Galen's advice to the would-be patient is far more detailed and informative than, for example, Soranus' recommendations for the ideal midwife, Gyn. 2-3, it is far from satisfactory, It is, in short, a typically Galenic combination of bombast and sound sense. On the one hand, Galen is well aware of the problem of choice, and of the difficulties of assessing clinical cases. Yet he remains optimistic, and sees in prognosis a way in which all who wish to observe the doctor in action at the bedside can most easily compare his pretensions with his practice. On the other hand, this imposes a large burden on the lay examiner, particularly if he prefers first to test the physician orally. Galen offers him short cuts to the truth, but acknowledges that these are not always possible. Besides, there is throughout a schizophrenic view of Roman society. Galen's advice, which is couched in general terms, is given for a public he himself admits is unlikely to be able to follow it. He regularly contrasts the small group of friends and acquaintances with the rest of society, whose abilities and interests render them unwilling and unable to carry out even the most minor of theoretical examinations. Galen is imposing a duty on the aspiring patient that he expects is beyond many who would seek his help.⁵⁶ This unfortunate state of affairs is in his eyes only too typical of the society in which he finds himself, Antonine Rome.

VII. GALEN AND ANTONINE SOCIETY

On examining the best physicians offers yet another critique by Galen of life in Rome. He rails not only against the big city, but against its ruling classes, enfeebled by luxury and incapable of even the slightest effort of thought or action (5.4; 7.2; 8.2). In their headlong pursuit of riches, power, and prestige, the common aim of all the inhabitants of Rome, they neglect their bodies and their minds.⁵⁷ They may know in precise detail the number of their villages, their slaves, and their tenants, but not that

⁵⁶ 9.21. Iskandar's translation of the original $\epsilon \lambda \pi i \zeta \epsilon \iota \nu$ 'hope' gives a weaker impression of Galen's contempt.

⁵⁷ 1,12; 8,2; 8,9. Cf. also Galen's complaint, xix.59-60 K., about those who have left off practising medicine and turned to politics.

of the organs of the body (9.15; cf. v.49-50 K.). Consequently, they are easily hoodwinked by medical charlatans who play on their obsession with wealth and women (1.8), and who give them the treatment they think will please rather than the one that will actually cure (5.17).

Such denunciations, which can be paralleled in *On prognosis*, are hardly specific, and their historical value is at best dubious. They are far more revealing of Galen's psychology than of life in Rome. Nonetheless, some of his observations and examples offer unusual and tantalising glimpses of social and intellectual life. Galen stresses throughout this treatise the effort involved in any proper search for a good physician - an expenditure of both time and intellectual energy. The ideal doctor, in turn, must devote a similar amount of effort to keeping up his knowledge and skills. He must read and reread the major texts on medicine; he must exercise thought and logic; and he must constantly practise his art. The time-wasting distractions of dinners and the morning salutation are best avoided as a waste of time, for, to Galen, the right use of time is essential, whether one is a doctor or a lawyer. He gives two cautionary examples (9.19-20). In one, an orator who delivered a bad speech apologized for having been busy with other things during the previous four days. In the second, the miscreant is Herodes Atticus. This man, 'the most able orator of our time', explained to Galen that a speech had fallen far short of his usual high standard because of the amount of business he had had to transact in the previous three days, which had left him no time for reading and writing. This incident would appear to have taken place in Rome, and hence should not be identified with Herodes' notorious failure in his trial before Marcus at Sirmium. 58 But, wherever and whenever this incident is located. it places Galen more firmly in the intellectual circles of Rome, for, however close his relationship to Herodes may have been, there is no reason now to doubt that the two had met, which was plausible on other grounds.⁵⁹ Although the evidence for Galen's involvement in the so-called Second Sophistic movement comes entirely from Galen's side, unless credence is given to medical allusions in Lucian, such claims as this to friendship with the great men, claims made in front of members of the same social class as Herodes and open to public correction, are very likely to have been true. 60

For a man whose medical practice was, at least in part, in court circles, Galen is remarkably scathing about the reluctance of the upper classes in Rome to involve themselves in hard mental activity. Some wealthy men, he accepts, are incapable of any form of exertion; others have diverted all their energies to unworthy ends. This may be the pursuit of power and office (8.9), a comment that might suggest that the cursus honorum in Antonine Rome was far from being the relatively ordered progression of some modern textbooks. Galen, for what his evidence is worth, implies a constant struggle, not just for the highest office, but for those lower down the scale. He singles out forensic oratory as a waste of time, especially when coming from a judge (8.10).

⁵⁸ Philostratus, *Lives of the sophists* 559–61. The statement of Iskandar, p. 170, that Herodes himself heard Aristocles at Pergamum rests on a mistranslation of Philostratus' Greek by Wright, Loeb ed., p. 185. Herodes sent his pupils to Pergamum but did not go himself.

⁵⁹ See G. W. Bowersock, *Greek Sophists in the Roman Empire* (Oxford, 1969), pp. 81–2.

⁶⁰ cf. Barry Baldwin, *Studies in Lucian* (Toronto, 1973), pp. 38–40. The attempt by J. Scarborough, 'The Galenic Question', *Sudhoffs Archiv* 65 (1981), 1–31, to discredit Galen's evidence on the grounds of lack of confirmation from elsewhere is not convincing, see my *From Democedes to Harvey*, ch. III.

⁶¹ Galen's perspective is shared by Ramsay MacMullen, Corruption and the Decline of Rome (New Haven and London, 1988), pp. 60-88.

They spend their lives in making rhetorical speeches that are irrelevant to good judgment and the legal duties which they practise; some they deliver before passing sentence, others after, and so on. If those who take up legal duties and hold high offices were to get a genuine education, they would be able to omit all this stuff and adopt other routes to practice of legal duties.

Galen's targets here are not just the advocates, but the praetors and others who presided in judgment over the courts. If they had had a more philosophical and logical education, they would be able to cut through the mire of rhetorical argument and, as a result of shorter judgments, gain time for better things, including the study of medicine. The recovery of a leading citizen from disease is for Galen more rewarding than passing judgment on opponents who spend the whole day wrangling over money. While the conflict between physician, philosopher, and orator over the desirability of their profession was undoubtedly as much a *topos* in Rome as it was to become again in Renaissance Italy, Galen adopts a more subtle and idiosyncratic stance. ⁶² He focuses on the judge and his rhetorical judgments rather than on the pleas of the advocates. Students of ancient rhetoric should remember that a praetor might, like the advocates appearing before him, be a man of many words.

Galen has also harsh things to say about those members of the upper classes with more literary talents (12.2-3). Although they do take up reading, they busy themselves with 'the useless traditions of the past and the daily chronicles, which are mostly false. They investigate the etymology of words and how they were used in the past', and neglect both medicine and philosophy. Galen's criticisms here are surprising in many ways. His attack on history for being either useless or false goes far beyond the strictures of his contemporary Lucian in his How to write history, and seems to be aimed at two distinct groups. The first, antiquarians, like Claudius Charax, a consul from Pergamum, who devoted their time to exploring local traditions, while the second may have been the annalists who exploited the partial records of diaries or, perhaps, the Acta Diurna. 63 Such a disdain for history is rare in Antiquity (so historians like to think), and one can point as counter-examples to other physicians like Soranus, the author of Biographies of medical men, Statilius Crito, doctor to Trajan and author of Getica, and the prolific Hermogenes of Smyrna, CIG 3311, who wrote on history almost as much as on medicine.⁶⁴ Yet a brief look at Galen's other references to history and historians may throw light on his dismissal of the activities of his contemporaries.

For a man of such wide interests, Galen rarely quotes or alludes to historians. For his more literary touches, he prefers the poets, from Homer, Hesiod and Archilochus to Callimachus, Theocritus and Euphorion. He mentions only four historians, Thucydides, Xenophon (for both the *Anabasis*, the *Memorabilia*, and the *Oeconomica*, xviiia.301 K.), Herodotus, and Ctesias, unless one chooses to include also Plutarch for his *Homeric studies* (v.300 K.). Of these, only Thucydides receives a generous amount of praise, or is cited in such a way as to suggest that Galen was very familiar with his work. He is acknowledged as an accurate and an honest observer, whose comments on humanity are appropriately moral, but he has his limitations.

⁶² Quintilian, Decl. 268; cf. E. Garin, La disputa delle arti nel Quattrocento (Florence, 1947).
⁶³ Galen's Greek may originally have been $\epsilon \phi \eta \mu \epsilon \rho i \delta \epsilon s$, with its hints of the diaries of Alexander and other generals. But it should be emphasised that Hunain may well have been merely interpreting Galen here, and the exact wording should not be pressed. For Charax, see Osvalda Andrei, A. Claudius Charax di Pergamo: interessi antiquari e antichità cittadine nell' età degli Antonini (Bologna, 1984).

⁶⁴ cf. A. D. Momigliano, 'History between Medicine and Rhetoric', *Ann. scuola norm. sup. Pisa*, ser. 3, 15 (1985), 767–80, esp. 773, where he notes Galen's 'attempt to distance himself from history and to side with philosophy'.

Thucydides was no doctor, and so, inevitably, in his description of the plague of Athens, he missed much that a well-trained physician like Hippocrates would have seen (vii.850 K.). It is unfortunate that Galen's own detailed criticism of Thucydides' account of the plague has been lost, for it would then have been possible to see in detail how far his historical and his medical concerns overlapped or conflicted.65 Obviously, he took a particular interest in the medical data collected by the historians he mentions - the Athenian plague, the snow-blindness of Xenophon's troops on their march through the mountains (iii.77.5-7 K., from Anabasis 4.5), and the death of Cambyses (xviiia.156 K. = Herodotus, Hist. 3.66) - but not, apparently, in their political or military information (although, to be fair, it is hard to see where, in his medical writings, he would have found an opportunity to display such knowledge). By contrast, he takes note of interesting words like σφακελίζεσθαι (xviiia.156 K.) used by Herodotus at Hist. 3.66, or grammatical constructions in Thucydides. 66 His bias against the historians is shown most clearly in his attitude towards Herodotus. At xviiB.33 K. he draws a distinction between those interpreters of Hippocrates who choose to read the ancient physicians as they would the Histories of Herodotus and Ctesias and those, like himself, who seek to derive serious profit from them. The same point is made with greater concision at iii.393 K., where the reader is advised to pay close attention to Galen's demonstration of the anatomy of the hand, and to commit its findings to memory. This anatomical historia is a far more serious business than reading Herodotus, which is done purely for pleasure $(\tau \epsilon \rho \psi \epsilon \omega s \ \tilde{\epsilon} \nu \epsilon \kappa \alpha)$. With such a complex of prejudices towards even major historians, it is not surprising that Galen should dismiss their later imitators as frivolous and useless, whether their subject was antiquarian or contemporary. The recording of the past, although capable of giving pleasure, must take a distant second place to the learning of medical facts for the preservation of present health.

As we have just seen, Galen's interest in the historians extended to grammatical and syntactical details. His Hippocratic commentaries employ a similar battery of linguistic knowledge to elucidate the dark and difficult sentences of his master.⁶⁷ This knowledge was reinforced by his own studies of lexicography, which included not only ten books of πολιτικά ὀνόματα in Eupolis, Aristophanes and Cratinus, but also forty eight books of words found in Attic writers (xix.48 K.). It is thus surprising to find him criticising the rich and powerful in Rome for spending their time in investigating 'the etymology of words and how they were used in the past' (12.2.) The paradox is reduced only a little if a distinction is made between etymological arguments, which Galen regularly disparages as a useless waste of time, and examining what words meant in the past, for in the Hippocratic commentaries he often refers to Hippocratic usage to explain difficult words, and his studies of the language of the Attic writers were written expressly 'to elucidate meaning'. 68 It would be special pleading to argue that Galen wrote these books purely to distinguish, as another of his titles put it, Clarity and unclarity of expression, for a work on Counterfeit Attic words (xix.48 K.) must have dealt precisely with the questions he

⁶⁵ See F. Kudlien, 'Galens Urteil über die Thukydideische Pestbeschreibung', *Episteme* 5 (1971), 132–3.

⁶⁶ xviiia.450 K. = Thucydides, *Hist.* 1.63 and 118; xviiiB.849 K. = *Hist.* 3.23.

⁶⁷ cf. M. S. Silk, 'LSJ and the Problem of Poetic Archaism: from Meanings to Iconyms', *CQ* 33 (1983), 309–9, who argues that, for much of his linguistic commentary, Galen will have been drawing on earlier Alexandrian grammarians.

⁶⁸ xix.60-1 K., where this (good) reason is contrasted with that of gaining a good Attic literary style. Iskandar, p. 173, rightly draws attention to Galen's dislike of etymological argumentation but says nothing about Galen's own lexical studies.

now condemns as frivolous. It was as much a contribution to the literary controversies of the Second Sophistic movement as the *Onomasticon* of Julius Pollux.

Whether Galen is being hypocritical or not in his denunciations of antiquarian etymologists, his evidence adds one more footnote to the sophistic and literary quarrels satirised by Lucian.69 Whereas the connection of the leading classes of Antonine society with the writing of history and with antiquarian pursuits has long been known, 70 their involvement with linguistic investigations has been seen as more peripheral, as patrons and friends, rather than as practitioners. Phrynichus dedicated his book on Attic diction to Cornelianus, ab epistulis graecis in the last years of Marcus Aurelius, and his Ἐκλογὴ ἡημάτων καὶ ὀνομάτων ᾿Αττικῶν to Commodus, who was also the recipient of the Onomasticon of Pollux.71 Those who, like Herodes Atticus, Fronto, and Aelius Antipater, gained consular rank or who, like Polemo, Damianus, and Hermocrates of Phocaea, came from wealthy families prominent in their own provinces, are usually categorised as sophists and orators, rather than grammarians. Even Favorinus, who is criticised by Galen for his fondness for correcting everything to the purest Attic, i.41 K., and whose interests were unashamedly antiquarian, is not known for his etymologising. Galen's criticism, if it has any foundation at all, implies that such pursuits were followed by senators, as well as by grammarians, and, as such, throws a little light on a very dark period in the history of Greek etymology.72

Galen has a third cause for complaint against the rich and powerful who have let medicine sink from an art studied and practised by kings to one thought fit only for slaves.⁷³ Instead of studying medicine for themselves, kings seek recovery through divine medicine, and 'in every country, in every city, there are places where recovery is sought through divine medicine, some named after Asclepius, others after Apollo' (i.4). While in religious shrines orators recite poems in praise of health to popular acclaim, few of their audience wish to take up medicine, if only for their own good (i.1–2).⁷⁴ Leaving it to Asclepius is thus, in Galen's eyes, fraught with danger.

- ⁶⁹ C. P. Jones, *Culture and Society in Lucian* (Cambridge and London), 1986, is the most recent study; for the Latin side, see Edward Champlin, *Fronto and Antonine Rome* (Cambridge and London, 1980).
- ⁷⁰ See, in particular, E. L. Bowie, 'Greeks and their Past in the Second Sophistic', *Past and Present* 46 (1970) 3-41.
- ⁷¹ For Cornelianus, see G. W. Bowersock, op. cit. (n. 59), p. 54. Cf. now also S. Argyle, 'A New Greek Grammarian', *CQ* 39 (1989), 524-35.
- 13 Iskandar, pp. 143-4, interprets 'kings' solely as Asclepius and the Asclepiads. But Galen never refers to Asclepius as a king, see, in particular, the fragments of his commentary on the Oath, ed. Rosenthal. Possible identifications would be with the Homeric heroes taught by Cheiron the centaur, Ptolemy I and II, Attalus III, and Mithridates V. Manfred Ullmann, Rufus von Ephesos, Krankenjournale (Wiesbaden, 1978), p. 120, notes to Arabic 'mulūk' can stand for 'nobles' and 'princes' as well as 'kings', citing this passage from the translation literature. But here, as in the case in the Krankenjournale, an original $\beta \alpha \sigma \iota \lambda \epsilon is$ would fit nicely.
- ⁷⁴ Iskandar, p. 142, identifies the 'orators' solely with his fellow townsman, the great orator Aelius Aristeides, whose hymns in praise of Asclepius are now lost. But this is far too restrictive; see the evidence for poems in honour of Asclepius and Hygieia (and plays, see Aelian, fr. 101 Hercher) collected by E.J. and L. Edelstein, *Asclepius* (Baltimore, 1945), i, T.587-608 = pp.

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Such a criticism is surprising, not only for its curious argument. Elsewhere, Galen is an enthusiastic supporter of Asclepius, prepared to carry out on himself and his patients therapeutic procedures recommended to him in a dream by the god. ⁷⁵ In a fragment of his *Commentary on the Hippocratic Oath*, he derives the divine origin of medicine from the universal belief in heaven-sent dreams and visions that cure diseases, whether they come from Serapis or Asclepius, and from the fact that such an exalted science as medicine cannot have been invented only by the intellect of man. ⁷⁶ But his loyalty to Asclepius is not total, for he criticises those patients at the shrine of Pergamum who reject all medical advice in favour of what the god himself prescribes (xviii. 137 K.). He himself is convinced that there are limits to the power of the god, who will never act against nature and nature's laws and, to encompass a miracle, effect what is naturally impossible. ⁷⁷ Hence, a one-sided and total dependence on Asclepius alone is inevitably bound to failure.

This explanation for Galen's attack on religious healing, however, resolves only part of the difficulty, for it does not make clear why he should have placed responsibility for this decline into superstition at the feet of the 'kings' (mulūk). If this represents an original $\beta \alpha \sigma i \lambda \epsilon i \varsigma$, Galen must be referring to the Roman Emperors, and, if the words were written in the 170s, to Marcus Aurelius, if not also to his immediate predecessors. Such an allegation is then strange, for in On prognosis, which may have been written shortly afterwards, Galen speaks of the Emperor in the warmest terms, not least because he accepted Galen's report of the divine intervention of Asclepius to release him from his obligations to embark once more on a military campaign with him.78 Marcus' reactions to Asclepius in this incident are no different from those of Galen. Nor, to judge from his letters to Fronto or in his Meditations, are the emperor's views of divine healing at variance with those of his physician. While Marcus acknowledged the power of the god to heal, he was equally aware of the natural limits of mortality. The god's orders were to be obeyed, even when harsh, precisely for the benefit they would bring, but, equally, it should be realised that they could not overthrow the natural order of things, with its concomitant suffering and death.79 It is hard to see in what way such a respect for Asclepius, or even an

326-37; R. MacMullen, *Paganism and the Roman Empire* (New Haven and London, 1981), pp. 15-20; and J. M. Bremmer, 'Greek Hymns', in H. Versnel, ed., *Faith, Hope and Worship* (Leiden, 1981), pp. 193-215. Apuleius, *Florid*. 18 = Edelstein, T.608, is an example of a contemporary Latin orator who composed a *carmen* in honour of Asclepius.

75 See F. Kudlien, 'Galen's Religious Belief', in V. Nutton, ed., Galen: Problems and

Prospects (London, 1981), pp. 117-30.

⁷⁶ Ed. Rosenthal, pp. 59–60, a passage confirming the Pergamene authorship of the commentary, which, despite Rosenthal's proper hesitations, can hardly have been written by anyone other than Galen. The comments, pp. 74–6, on the superiority of health to wealth, children or political power, which are similar to those in 1.1 and 9.14, are not noted by Iskandar. Kudlien, op. cit. (n. 75), p. 119, appears to confuse the divine origin and status of healing in general (which Galen undoubtedly accepts) with a development of (Hippocratic) medicine out of temple medicine and temple records (which he would not). The longer passage from the commentary on the Oath, pp. 56–9 Rosenthal, makes it clear that exactly what was implied in a divine origin for medicine was disputed, and Galen's own view would appear to be distinguished from that of 'people in general'.

⁷⁷ So, rightly, Kudlien, op. cit. (n. 75), pp. 118, 125.

⁷⁸ xiv.650; xix.18-19 K. For Galen's treatment of Marcus, see Pierre Hadot, 'Marc Aurèle, était-il opiomane?', in E. Lucchesi, H. D. Saffrey, edd, *Antiquité païenne et chrétienne*; mémorial André-Jean Festugière (Geneva, 1984), pp. 33-50, who shows that the idea that Marcus was a drug-addict is based on a gross misunderstanding of Galen's Greek.

⁷⁹ Marcus Aurelius, *Ep. ad Front.* 3.9; *Med.* v.8; vi.43. His attitude towards the natural order of illness and death is evinced by *Med.* vi.33; x.2 and 36; iii.3.

occasional visit to a shrine, would have resulted in a decline in the status of medicine and its practitioners. Even if one accepts the very plausible suggestion of Manfred Ullmann, that the word 'mulūk' should be translated as 'the leading citizens', not 'kings', the curious argumentation still remains.⁸⁰

Galen, one might think, has simply been carried along by his own oratory. Yet, while exaggeration is typical of Galen's rhetoric, there is usually some scintilla of truth behind the verbiage. In this instance, those who wish to save Galen's credit may detect an allusion to an incident familiar from the pages of Lucian, the rise to prominence of Alexander and his cult of Apollo and Glycon, 'the new Asclepius', at Abonouteichos in Paphlagonia. The shrine's business was largely medical, giving advice on childbirth and on plague, and may be linked to earlier local cults of Asclepius. Its influence spread around the Black Sea and into central Phrygia, and even to the Roman court, where the prophet established a sort of information bureau. The shrine's activities were supported by governors and other notables, and a Roman senator, Rutilianus, was eager to have Alexander as his son-in-law. According to Lucian, one oracle, sent to the court from Abonouteichos c. 170, resulted in a ridiculous sacrifice of a pair of lions at the Danube, and in an ensuing heavy defeat of the Roman forces at the hands of the Marcomanni and Quadi.81 Galen, as an inhabitant of Asia Minor, could hardly have failed to have heard of the rise of this healing shrine from backwoods obscurity to rivalry with Pergamum, and, as a passage in his commentary on Epidemics II reveals, he was familiar at least with one aspect of Lucian's literary activity.82 The apparent involvement of the court (Alex. 48) in the promotion and success of Alexander and his 'New Asclepius' is altogether a more likely target for Galen's rage than any personal opinion of Pius, Lucius and

Yet even if the rise to prominence of this remote shrine is not a target of Galen's wrath, it confirms another of Galen's observations, the universal availability of healing cults and shrines dedicated to Asclepius or Apollo (1.4). There is an implication, too, that their increase in popularity is in some way responsible for or counterbalances the decline in the reputation of secular healing. Such a vague statement is, however, difficult to corroborate, especially in the absence of any up-to-date catalogue of healing shrines. The Edelsteins deliberately excluded numismatic and archaeological evidence from their valuable list of Asclepieia, and Thraemer's

⁸¹ Lucian, Alexander. For the local background of the cult, see Louis Robert, A travers l'Asie Mineure (Paris, 1980), pp. 393-421, and for an attempt to peer behind Lucian's tendentious rhetoric, R. Lane-Fox, Pagans and Christians (Harmondsworth, 1988), pp. 241-50.

⁸² Galen, In Epid. II comm. VI: CMG v.1.1, pp. 402-3. See the discussion by C. P. Jones, op. cit. (n. 69), p. 19, who dates the incident to the 170s, which would perhaps strengthen the case for an allusion to Alexander and his shrine, but the Galenic context suits better a date in the late 150s in Egypt.

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survey is both old and confined to the Greek world. So Yet the impression gained from reading Pausanias' guide to Greece, or from perusing a catalogue of coins from Asia Minor, would appear to agree with Galen. Whether we are dealing with new temples and cult centres, or, as at Pergamum, with a massive refurbishment of an already existing shrine, the second century is an age of religious building, a reflection at least as much of material prosperity as of any spiritual crisis. Modern studies of religious cult in this period have shown only too well the vitality (and the diversity) of paganism at this time in the Greek world, a vitality in which Asclepius shared. A Galen's perception of the ubiquity (and growing importance) of healing shrines may thus not be wide of the mark, even if he is wrong to associate this with a decline in respect for more orthodox healing.

VIII. THE RHETORIC OF MEDICINE

This discussion of Galen's criticisms of Antonine society, in Rome and elsewhere, has centred upon the validity, or otherwise, of his observations. Such an approach, however, does not do full justice to the complexities of the text, or of Galen himself. All too often one is left with the impression that Galen is making the broadest of generalisations on the basis of a few instances at best, or setting out a programme that is remote from reality. His recommendations to the prospective patient demand of him a theoretical understanding at least equal, if not superior, to that of his practitioner, to say nothing of time, leisure, and an opportunity for choice. Even if it is allowed that the patient would be able to derive his information on medicine and the right questions to ask (not to mention the correct replies) from his reading of an introductory handbook on medicine and surgery couched in the question-and-answer form, to follow all Galen's advice to the letter would be long and difficult, if not downright impossible.85 At best, Galen's treatise reveals the enormous range of expertises that could be classified as medical, and, above all, the extreme fluidity of any line separating a layman from a medicus.86 But, as a practical solution to the problem of finding a good physician, it is far from ideal, not only in its often hurried descriptions of what the doctor and the surgeon ought to know or be able to do.

In all this, two things, closely related, stand out, the necessity for Hippocratic prognosis, for both patient and practitioner, and the superiority of its most notable exponent, Galen himself. Indeed, the significance of this new text may lie less in what it says about medicine and about Antonine society than in what it reveals of the life and, in particular, the personality of its author. It is filled with reports of Galen's own cases and achievements, and, even if it was not always Galen's intention to set himself

⁸³ E. J. and L. Edelstein, op. cit. (n. 74), i, pp. viii, xi, for the omission; their list of sites is i, pp. 370-452 = T.707-861; K. Thraemer, RE 2, 1896, cols. 1662-77. Alessandria Semeria, 'Per un censimento degli asklepieia della Grecia continentale e delle isole', Ann. sc. norm. sup. Pisa, ser. 3, 16 (1986), 931-58, shows what can be done for a limited area.

⁸⁴ Robert, A travers l'Asie Mineure; MacMullen, Paganism; Lane-Fox, Pagans and Christians, from different vantage points, illuminate the situation in the areas of the Roman world that Galen knew best. A comprehensive survey of the evidence for Asclepieia at this time is a desideratum.

⁸⁵ For question-and-answer handbooks, see Kollesch, op. cit. (n. 50), pp. 35–46; and, for surgery, M. H. Marganne-Melard, 'La chirurgie dans les papyrus grecs de médecine', *Proc. XXX Int. Congr. Hist. Med., 1986* (Dusseldorf, 1988), pp. 862–4. G. Zalateo, 'Papiri di argomento medico redatti in forma di dimanda e risposto', *Aegyptus* 44 (1964), 52–7, sought a connection between such texts and the formal examination of civic physicians.

⁸⁶ See my From Democedes to Harvey, chs. VII and VIII, and D. Gourevitch, Le triangle hippocratique (Paris, 1984).

up as the ideal, his audience cannot have failed to take away that impression. It is an impression not entirely produced by Galen's constant assertion of his own merits or by his denigration of others. It involves a whole array of rhetorical skills. Galen is an excellent story-teller, capable of turning the daily life of the doctor into an epic struggle for professional survival. His cases fascinate not only because of their intricate medical detail; they are set in dramatic contexts. Patients reject Galen's wishes; friends, relatives, and opponents openly question his conclusions; one case seems to take an unusual turn; in another, the therapy is altered by Galen against all expectation.⁸⁷ The virtuous, philosophical, and practical Galen is constantly beset by fools and charlatans only too willing to misunderstand or oppose his message. It is a struggle in which his audience is equally involved. More than once their logical ability is contrasted with the blind stupidity of his patients and their friends.⁸⁸ To be on Galen's side, to accept his point of view, is thus a sign of merit, as well as a guarantee of good treatment to come.

The overall impression generated by On examining the best physicians, as by On prognosis, is thus less of the practical advice contained therein, than of Galen's own self-image. He asserts at length his own intellectual talents, his encyclopaedic learning, his practical expertise, his logical abilities, and his therapeutic precision, in all of which he is second only to Hippocrates. Why he should feel the need to express himself in this way and so often is a matter more for the psychiatrist's couch than for the historian's essay. Yet it cannot be denied that in a society like Antonine Rome, where success as a physician might depend on a whole variety of skills and accidents. and where rhetorical or sophistic excellence was a passport to fame, such selfpublicity was one of the ways of gaining notice. It had its disadvantages; not everyone would easily put up with the verbal battering of a Galenic harangue, and, at times, his flow of eloquence seems to lead him into wild exaggeration and curious argument. But, in a society where, as he himself demonstrates from the example of others, the choice of a doctor was not always determined by purely medical considerations, and where rhetorical skill was highly valued, it would be a foolish physician who relied solely on his ability to cure. Galen the orator and self-publicist is thus another face of Galen the physician. Paradoxically, therefore, On examining the best physicians, for all its assertions about the ideal doctor, reveals little that is new about medical education and about what Galen demanded of a physician or surgeon, although that is valuable enough. Instead, it is another essay in Galenic self-description masquerading as objective reporting, and, as such, confirms Galen's wider message of the dominance of non-medical over medical considerations, and of the ubiquitous power of rhetoric. On examining the best physicians is thus far more than a treatise on medicine. It is a prime document for the historian's understanding of the Second Sophistic movement, and of the values and personal links within Antonine Rome that supported it.89 If the new treatise provides a footnote to Philostratus' biography of Herodes Atticus, Philostratus, in turn, is essential to the understanding of all that it reveals about Galen.*

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⁸⁷ Respectively, 1.9: 6.4, 8.5, 9.5, 13.6, 13.8: 4.2, 6.1–2, 11.3–4: 3.5–7, 3.9, 3.15, 11.2.

⁸⁸ e.g. 1.13, 9.14, 13.5, 13.9.

⁸⁹ See, as well as my commentary on *On prognosis*, Bowersock, op. cit. (n. 59), pp. 59-75; Jutta Kollesch, 'Galen und die Zweite Sophistik', in *Galen: Problems and Prospects*, pp. 1-11; Lee T. Pearcy, 'Galen and Stoic Rhetoric', *Greek, Roman and Byz. Stud.* 24 (1983), 259-72.

^{*} I should like to thank my colleagues Amal-Abou Aly and Larry Conrad for their help with the Arabic.