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HIPPOCRATES

VOLUME VII

Edited and translated by

WESLEY D. SMITH

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HIPPOCRATES
VII

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EPIDEMICS

2, 4–7

CONTENTS

INTRODUCTION

The five books of *Epidemics*[1] presented here have generally been less well known and studied than books 1 and 3. In Roman imperial times they were judged by Galen and his predecessors to be "less genuine" than books 1 and 3. Since then they have been less frequently copied, edited, translated and interpreted. W. H. S. Jones was following that tradition in volume I of the Loeb Hippocrates when he printed 1 and 3 only, and praised them as "the most remarkable product of Greek science." I hope to make some amends for that here, and, by making all seven books of *Epidemics* available, to help to restore these unique and interesting works to their proper place.

Books 1 and 3 were distinguished from the others at the time of the formal publication of the Corpus, in the first or second century A.D., about five centuries after the time when the works were probably composed. The editors who made the judgments were ignorant of the origin and authorship of the miscellany of works attributed to Hippocrates, as we still are, but from reading the seven books of *Epidemics* they easily judged that 1 and 3 were better, more finished, more ready for publication than the

[1] The word *epidemics* means "visits," and may refer to the itinerant physician's visits to the towns in which he practices, or more likely to the visitations of diseases in those communities. (This latter was Galen's interpretation.)

others, and more unified in style. Further judgments and conjectures followed: that *Epid.* 2 and 6 are notes made in preparation for revising them for publication, and that either 4 is such notes or 4 was composed by the grandson of the great Hippocrates. But 5 and 7 were judged to lack the reserved, theoretical bent of the others and to be more rhetorically elaborate. Hence they must have been written after the great Hippocrates wrote, and perhaps by his descendants. These conjectures by the editors reflected their own training and predilections, but strongly affected the way in which the various books were received and treated by Galen and thence by those who transmitted them to us. We are fortunate that these primitive works were copied and transmitted to us at all. But we must realize that antiquity's inferences from style and substance are not better than our own—in fact not as good in some respects.

A large part of their attraction is their freshness, one might even say innocence. They are technical prose from the time when prose was coming into being and authors were realizing its potential; unique jottings by medical people in the process of creating the science of medicine. In reading the Epidemics one seems to be present while they are first formulating their descriptions of the way the body is put together, the way it responds to disease, the things that make a difference for good or ill, the ways in which the medical men should intervene. One finds the authors musing about the nature of their experience, and planning how to extend and evaluate it, admonishing themselves, "study this," "think about that," and explaining "this is what I observed, and this is what I made of it." This intense intellectual activity is carried forward in primitive,

simple ways: the works have no developed language of science, no sophisticated methodology, no protocols for testing theories or correcting the inferences drawn from them. The *Epidemics* are also a unique genre. We know of nothing like them written before or after.[2] But because they differ from one another, it is not easy, especially if we include all seven books, to say what we mean when we speak of their genre.

In language and style they are simple, and at the risk of some awkwardness I have often tried to mimic them in my English rendering, though English is not well adapted to some of the effects of the Greek. To get a sense of the mind and the prose style of the *Epidemics* we need to recall how prose style was developing into a powerful tool of reflection and persuasion such as Plato and Demosthenes, for example, exhibit. They are opposites, one a self-conscious rhetorician, the other a philosopher who scorned rhetoric. But both as artists are in some ways at the opposite extreme from the writers of the *Epidemics*: both of them developed sentence structures into profound dramatic media for conveying complex thought and manipulating the audience, each of them working with long, leisurely sentences, sometimes difficult to understand, but whose individual elements or clauses are of a length to be readily comprehensible and are closely related grammatically to what precedes and follows; these clauses all lead the hearer from beginning through middle to end, using a series of promises and fulfillments whose effect is to

[2] They were in part revived in the seventeenth century by Guillaume de Baillou and Sydenham, who systematically recorded catastases in hopes of establishing statistical epidemiology.

mesmerize and to convince of their inevitable rightness just as their syntax comes clear and their ambiguities are resolved. At their best, such sentences, along with brief connecting ones, cumulatively produce increased confidence that they are part of a worthy comprehensive design. The *Epidemics* do not exhibit such conscious prose style, whether from deliberate choice, or because their writers are unaware of it.[3] Some stylistic tendencies are particularly striking. The *Epidemics* generally deal in bursts of observation and judgment, reports of cases, statements of ideas, posing of questions. What they report or ask will have profound significance, but often it is stated simply, without indication of how it relates to a larger design, theory, or observation. "The patient's extremities were cool, his center burning hot." "Tongue peripneumonic." "Bilious excrement." Syntax is often only juxtaposition. An abstraction is a major achievement, e.g., "apostasis," a term that describes the movement of the noxious material of the disease towards deposit or excretion. Attaching appropriate verbs and adjectives to the abstraction is the test of professional competence as well as of compositional skill: "they [*apostases*] are best when they go down from the disease, like [meaning 'as in the case of'] varicose veins."[4] Much of the search for method is a search for patterns that will permit analogy, as in this passage testing how many notions can be transferred from the waning of the day to that of the year: "In autumn

[3] On these as on many other questions it is better to reserve judgment in consideration of our ignorance of date, authorship, and intended audience.

[4] The whole section, 2.1.7, is instructive in the studied attempt to attach the right evaluative adjectives to various phenomena.

there are worms and cardialgic ailments (heartburn), shivering, melancholy. One should watch for paroxysms at the onset; also in the whole disease: as is the exacerbation at evening, so is the year at its evening. Intestinal worms also" (*Epid.* 6.1.11).

Often the authors seek to reduce general structures and principles to aphorisms, "opposites cure opposites," "purge after crises," giving an air of confident knowledge, and making the principles memorable. Satisfactory presentational structure appears to be most easily achieved by offering a general truth followed by illustrations, some of which simply illustrate, but some of which qualify the statement. Sometimes a writer will venture a judgment that seems naive, e.g., "Intestinal gas is contributory to protruding shoulder blades, for such people are flatulent." Sometimes apparently hard-won inferences seem banal or tautological. But for the most part, however fumbling the expression is, the *Epidemics* give the impression of sincere, intense, and productive intellection. The rare methodological formulations confirm our impression that the particulars are being pursued in the hope of successful generalities, e.g., 6.3.12: "The summary conclusion comes from the origin and the going forth, and from very many accounts and things learned little by little, when one gathers them together and studies them thoroughly, whether the things are like one another; again whether the dissimilarities in them are like each other, so that from dissimilarities there arises one similarity. This would be the road (i.e., method). In this way develop verification of correct accounts and refutation of erroneous ones."

The freshness and directness of these works have produced various outrageous claims for them. In Roman

imperial times they were embraced, most eloquently by Galen, as early monuments of dogmatism, i.e., deductive rationalism like Plato's, which started from principles like "opposites cure opposites" and deduced the rest; by others they were embraced as models of empiricism, science based on observation of phenomena without preconceptions, and for this view one could adduce such methodological statements as the above, and reiterated statements of what "we must seek." It is easy to demonstrate that Galen and others were wrong to read sophisticated dogmatic theories into the *Epidemics*.[5] And yet there is a kernel of truth there: in part they aspire to the kinds of answers that dogmatism later produced. Equally, calling them Empirical is an anachronism. They are not "empirical" in the proper sense because they do not have the sophistication that empiricism developed when it was formulated in the centuries after these works, namely sceptical critique of dogmatism and systematic methods for dealing with observation and for evaluating hypotheses drawn from it. The *Epidemics* show great concern for developing effective method, but their concept of method is at the beginning. Their attention is on extending their theory, not on methods of testing and refining it. The Empiric's question, "How many observations make theory?" is far in the future, as is the terminology that developed along with Empirical analyses. Hence the *Epidemics* exhibit many wild leaps from observation to finished theory, of the sort that the method of the ancient

[5] My book *The Hippocratic Tradition*, Cornell Univ. Press 1979, gives an account of ancient and modern interpretations of Hippocratic medicine.

Empirics was developed to avoid. Yet, indeed, the *Epidemics* are full of reports of actual observations, and they show concern with the problems of creating a method, like the following: "For good physicians similarities cause wanderings and uncertainty, but so do opposites. It has to be considered what kind of explanation one can give, and that reasoning is difficult even if one knows the method"[6] (*Epid.* 6.8.26).

Besides sharing a general outlook about what medicine is and what the physician concerns himself with, the individual groups of *Epidemics* have their own personalities.

As has often been observed, *Epidemics* 1 and 3 are most finished in composition, though still structurally very loose. Primarily they present *catastases*[7] with accounts of the illnesses they produced, and individual case histories, along with a few methodological observations.

Epidemics 5 and 7 are collections of case histories,

[6] Galen indicates that there were many interventions by editors and commentators in the text of this section of *Epid.* 6, which indicates to us both great interest in Hippocratic methodology on the part of the ancients, and great confusion. For example, Galen tells us that he is not even reporting Capito's reading of one sentence, since no one else knows of it. In the physiognomic example that follows the theoretical statement Galen gives us the "plausible" reading and interpretation of Rufus of Ephesus but says that it was Rufus' own, different from those of the other texts and interpreters. For modern discussions, see Manetti-Roselli ad loc., and Volker Langholf, *Medical Theories in Hippocrates*, Berlin and N.Y.: Walter de Gruyter, 1990, p. 206.

[7] Catastasis means condition or situation. In medicine it became a technical term for a description of the dominant weather and characteristic diseases of a period of time, usually a year.

often grouped by type and subject matter to illustrate various subjects of interest. For example, the series 7.64ff and 5.7ff aim at evaluating therapeutic procedures. Some, especially in 5, express indignation or remorse at the fate of patients who could have been helped.[8] The group beginning at 7.35 is prognostic (what will happen in head wounds with denuded bone, what will happen in tetanus), as are others, e.g., 7.56 and 58. Many of the cases in 5 and 7 seem to be sorting out the course of disease in relation to critical periods and sequences of symptoms. It is worth notice that the author of 7 leans towards drama in his case histories.[9]

Epidemics 2 and 6 show a preoccupation with the way in which the body is organized and part communicates with part. Evidence of that concern is shown by *Epidemics* 2's unique anatomy of veins and nerves (*Epid.* 2.4.1–2). Both works concern themselves with the ways in which the various parts affect one another: sympathy between lungs and testicles (2.1.6 and 7), between breast, womb, and consciousness (6.5.11; 2.6.32), between mucus and semen (6.6.8). Similarly the works pay much attention to pains and flows on the same side of the body as the disease (the catch phrase for it is **κατ' ἴξιν**, 6.2.5 etc.) and they are also concerned with exits from the body which the physician

[8] 5.15 and 17 report deaths of patients from medicine, 5.27–31 report deaths from failures to treat properly.

[9] Tendencies are shown by the vocabulary; e.g., *Epidemics* 7 uses **ἐπιεικῶς** ("reasonably," or "somewhat") 18 times, while *Epidemics* 5 uses it 4 times and the other *Epidemics* never use it. It uses **σφόδρα** ("extremely") 39 times, while the other *Epidemics* use it very rarely (it does not occur in 2, is used once in 4 and 6, and 5 times in 5).

can exploit, including the skin (2.4.22) *Epidemics* 2 and 6 are not simply interested in mapping such things, they want to create a technical medicine that will take control of them. A clear example is given by 2.3.8, in which the author builds on the assumption that a disease progresses towards an apostasis, a deposit or excretion of the noxious disease material, and he considers that his medical craft should learn how to control it and make it happen: "Create apostases, leading the material yourself. Turn aside apostases that have already started, accept them if they come where they should and are of the right kind and quantity, but do not offer assistance. Turn some aside if they are wholly inappropriate, but especially those that are about to commence or are just begun."[10]

This urge to a strong, invasive approach to therapy was congenial to Galen and to many others, including Empirics, in later antiquity. It has generally been discounted in post-renaissance times, when, in accord with contemporary movements in medicine, a picture was developed of Hippocrates as an advocate of restrained, expectative therapy, who trusted in the healing power of Nature. It is important to appreciate both tendencies in these works. *Epidemics* 6 reaches a climax of listing all the kinds of things that need investigation (6.8.7ff). Galen, the voluminous writer, read that section as a list of topics to be expanded in rewriting. Modern interpreters, all academics by profession, tend to read it as a list of lecture topics. Thus, we read ourselves into these works.

[10] Apostasis is used only once in *Epidemics* 5 and once in 7. From this we can infer that their authors know the subject but are not preoccupied with it.

Epidemics 4 is closely related to 2 and 6. It mentions some of the same cases and discusses some of the same material, but it has its own personality and style, different from theirs. Its author seems to emphasize prognosis especially, collecting numbers of similar cases that differ in small ways. One of his fascinations is chlorotic coloring. And he reports how his predictions of the outcomes of cases fared (note, e.g., 4.35). In 4.25 the author tries to worry out the variations in tooth and gum infections as related to sex, age, and differences in timing. He manages to articulate questions, but he is not explicit about conclusions.

Overall, we get from *Epidemics* 2, 4, and 6 the impression of numbers of physicians working in proximity and communicating with one another. Similarly from *Epidemics* 5's comments on other physicians' errors, we get the sense of the author in a medical community. But the relations among, and the dating of, the various groups of Epidemics remain doubtful. Apparent coincidences between the patients of *Epidemics* 1 and the names of magistrates in documents on stone found on Thasos make it seem reasonable to date *Epidemics* 1 around 410 B.C. The other books of *Epidemics* could be earlier or later, though their points of view and assumptions are so similar that one assumes that they were composed close in time to 1 and 3. There is nothing except later unreliable tradition to associate the writing of the *Epidemics* with Cos and Hippocrates.

Manuscripts

	Symbol	*Date*	*Contents*
Marcianus graecus 269[11]	M	saec. X	*Epid.* 5.14–7
Vaticanus graecus 276	V	saec. XII	*Epid.* 2–7
Parisinus graecus 2140	I	saec. XIII	*Epid.* 2–7
Parisinus graecus 2142	H	saec. XIV	*Epid.* 2–7
Vaticanus graecus 277	R	saec. XIV	*Epid.* 2–7

The oldest and best, the only independent manuscripts which contain the *Epidemics*, are M and V. M has many descendants. For the text of M in *Epidemics* 2, 4, and 5, where M itself is defective, I use HIR, recentiores of the M tradition.[12] For *Epidemics* 2 and 6 there are richly

[11] M is mutilated, and after folio 408 has lost all of the *Epidemics* preceding 5.14.

[12] For descriptions of MIVH, see *Ippocrate, Epidemie Libro Sesto*, a cura di Daniela Manetti e Amneris Roselli (Florence 1982, *Biblioteca di Studi Superiori* LXVI) xxv–xxxviii. Cay Lienau, ed., *Hippocratis De Superfetatione, CMG* I.2.2 (Berlin 1973) distinguishes older and younger parts of manuscript V, to the younger part of which (V^b) the *Epid.* belong, and similarly older and younger parts of H (H^a and H^b) are distinguished by Hermann Grensemann, *Über Achtmonatskinder, Über das Siebenmonatskind (unecht)* CMG I 2, 1 (Berlin 1968). For a study of the relations of the recentiores to M, and the scribal corrections and conjectures that they exhibit, see J. Irigoin, "Le rôle des recentiores dans l'établissement du texte hippocratique," *Corpus Hippocraticum, Colloque de Mons*, ed. R. Joly (Mons 1977) 9–17, and S. Byl, "Les recentiores du traité pseudo-hippocratique *Du Régime*; quelques problèmes," *Hippocratica, Actes du Colloque Hippocratique de Paris*, ed. M. Grmek (Paris 1980) 73–83. Jacques Jouanna, *Scriptorium* 38 (1984) 56–9, establishes that H^b and G were copied from ms. I after it had lost a number of folios.