The Virtuous Physician
A New Translation of a Pseudo-Hippocratic Text and Its Implications for the History of Moral Inquiry; or, The Significance of an Insignificant Text

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The Virtuous Physician

A New Translation of a Pseudo-Hippocratic Text and Its Implications for the History of Moral Inquiry; or, The Significance of an Insignificant Text

Elliott Burton Martin jr. *

This article presents a new translation of the previously little-studied pseudo-Hippocratic text, Precepts, with commentary, and a broader discussion of the work in its context at a crossroads in the history of moral inquiry. A distillation of the schools of medical thought between the age of Hippocrates and the age of Galen, Precepts is not an oath, but a set of pragmatic, comprehensive guidelines for the comportment and practice of what the unknown author describes ideally as the ‘virtuous physician’. I propose a new way of interpreting the development of Greek ethical notions, as exemplified in our sample text, as the inevitable philosophic product of the religious influence of the Ancient Near East. Rather than suggest a conflict between the polytheists and the challenge of monotheism, I describe an interplay between the two belief systems. I propose that the Greek attempts at reconciliation between these systems were the critical impetus for the development of moral inquiry alongside the birth of ‘rationalism’. In other words, it will be seen that it was through the avenue of the Greek enlightenment that the ancient physician transformed from physician-priest to physician-philosopher.

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1. Introduction

“He hated not only Greek philosophers, but also Greek physicians. For he had heard, so it seemed, how Hippocrates had replied when consulted by the king of Persia—who had promised him a fee of many talents—that he would never lay his skill at the service of barbarians who were enemies of the Greeks. Hippocrates then asserted that this was a common oath sworn by all Greek physicians. Cato thus urged his son to beware of them all” (Cato the Elder, as described in Plutarch)¹.

Perhaps the earliest reference to an ‘oath’ of Hippocrates, this unflattering, sweeping, portrayal of Greek medical practitioners hardly describes what one may consider to be a ‘virtuous physician’. With no other evidence, one surely would conclude that Greek physicians were a powerful lot who selfishly swore to help only their own. It is certainly easy to find one’s self caught up in Plutarch’s swift-moving narratives. The revisionist historian, however, might counter that Cato’s account is a manifestation of the sort of ‘cultural jealousy’ Rome maintained toward its easily subjected—if thoroughly ‘enlightened’ and newly ‘rational’—predecessor and contemporary (Romans generally were not an imaginative lot, and like a bully bested in a game of wits, they often knew just enough to know when they were outwitted). Or moving along, the counter-revisionist might make the case that the referred to oath in this instance has simply not survived. This guessing game can continue *ad nauseam*. But the one obvious question that appears not to have been pondered at any length is why ancient physicians would swear an oath in any case. There is no precedent for any profession to have sworn an oath to itself in antiquity. In fact there is no evidence for the ‘Hippocratic Oath’ in its own time but for the above quote and oblique references to bits and pieces of a reputed oath in much later texts². Indeed, the medical historian who seeks to ground the

¹ Plutarch, *Life of Marcus Cato*, XXIII, 3-4, translated by the author.
² It is a curious thing that Galen makes no reference to the Hippocratic *Oath*. In fact no one makes reference to the *Oath* until the first century AD, when Scribonius Largus, court physician to Claudius, in his list of 271 *Compositiones* (65.175.17), refers to Hippocrates’
roots of medical ethics with the creation of the Oath of Hippocrates can go no further back, with confidence, than 1508 AD, the year the Oath was revived as a ceremonial attestation in Western medical education as part of the graduation ceremony at the University of Wittenberg.

If not neatly packaged and handed down from generation to generation, from where then did the blueprint for Western medical ethics emerge? And is there in fact a single text that best expresses the moral tenets to which the ideal ancient physician should ideally have subscribed? I contend that the best evidence for a more universally practicable, if not in fact universally practiced, code of ethics is to be found in the Hellenistic-era, pseudo-Hippocratic text, Παραγγελιαί. Transliterated as Parangeliai, from the root παραγγέλλω (parangello), the literal meaning is ‘to pass the word along’ (the English word ‘angel’, meaning ‘messenger’, is found within this root). Παραγγελιαί, the plural nominal form, is usually translated as Precepts. A distillation of the major schools of medical thought between the age of Hippocrates (460–370 BC) and the age of Galen (129-200 AD), Precepts is not an oath, but a set of pragmatic, comprehensive guidelines for the comportment and practice of what the author describes as the ‘ιητρός ἀγαθὸς’, the ‘virtuous physician’. In this paper I present some historical background, a new translation of the text, with commentary, followed by a discussion in which I attempt to place the work in its context at a crossroads in the history of moral inquiry.

More broadly, I propose a new way of interpreting the development of Greek ethical notions, as exemplified in our sample text, as the inevitable philosophic product of the religious influence of the Ancient Near East proscription against abortifacients. Soranus, a hundred years later, provides the next reference in his Gynaecologia, L.19.60, again in reference to abortifacients. Not until Jerome, 347-420 AD, do we have a reference other than abortive; in his Epistles, LII.15, he compares an unfounded regimen of devotion among the followers of Hippocrates, as witnessed by an oath, to the devotion expected of Christians. The oath was revisited throughout the Middle Ages, in Arabic sources, and even a Hebrew version, and into the Renaissance (see Thomas Rütten, trans. by Leonie von Reppert-Bismarck, “Receptions of the Hippocratic Oath in the Renaissance: The Prohibition of Abortion as a Case Study in Reception”, The Journal of the History of Medicine and Allied Sciences 51, no. 4 [1996]: 456-483), and, as noted, first codified as ceremony among medical school graduates in 1508, in its original form, at the University of Wittenberg.

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on a Greek rationalism more heterodox in character than is usually ascribed. Medicine was a branch of this early enlightenment, and specifically I consider the ‘magical’ context from which the physician, the healer, originally emerged. Rather than propose a conflict, however, between the Western polytheists and the challenge of Eastern monotheism that pervaded thoughtful inquiry at an especially fortuitous moment in intellectual history, I propose more of an interplay between the two belief systems. Examining polytheism as knowable ‘science’ and monotheism as the unknowable absolute, I propose that the Greek attempts at reconciliation between the two were the critical impetus for the development of moral inquiry alongside the birth of ‘rationalism’

Polytheism was in fact the scientific process of the day, operating under the assumption of a knowable world—with mythopoiesis contrived more as a means of abstract theory than as a fantastic means of projective identification. Mesopotamians and Egyptians both, long before the emergence of the Greeks, had contemplated the nature of the universe, the place of humankind. One certainly had to explain why things were the way they were, and abstracting to a supernatural being that made it so is in fact entirely reasonable in this regard. One certainly had to explain why things were the way they were, and abstracting to a supernatural being that made it so is in fact entirely reasonable. Should a more reasonable explanation come along, the ancient mind was perfectly willing to forsake previous theory. This would account for the vast and confusing array of deities, the multiple and recycled names, the fact that some were major and some minor, and the fact that these roles were frequently switched or made interchangeable. This would also account for multiple cults and priesthoods, multiple sacrificial and divinational practices.

¹ And these were not mutually exclusive. Rationalism, according to Greek standards, was not the same as reason. Reason was a tool toward acquiring rationalism, but rationalism itself was absolute. It did not allow for mistakes. One drew logical conclusions based on the best available evidence, whether empirical or reasonable.

² Divination is the practice that is the logical means to this end, an attempt at communicating with the absolute. See Jean Bottéro, Religion in Ancient Mesopotamia (Chicago: University of Chicago, 2004).


⁴ An example of the ancient understanding of the limits of reason would be the establishing

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Monotheism, historically refined in the Levant just as the Greeks were beginning to emerge as a cultural force, operated from a premise of an unknowable world, an absolute against which science suddenly found itself alongside, and through which humanity, perhaps ironically, came to view itself in relation to. This was arguably no more than the realization of the limits of reason. The Greeks, master logicians, quickly realized the limits of reason, and the limitations of divination thereby. And therein, among the ruins of the pantheons, at the discovery of the initial cause, lay the birth of apodeictic, or universal, morality. Defining ‘morality’ as the cautious interface between the knowable and the unknowable, it then becomes the guidepost for further investigation. Culturally developing in parallel, and often at intersection, with the Near East, it was the Greeks who distilled the seeming paradox, allowing a moral code to emerge as consequence of the scientific process. And who was this early ‘scientist’, this forger of the Greek enlightenment? He was the physician, or more properly, he was a physician-priest. What is examined next is how this physician-priest transformed into a physician-philosopher.

of law codes; that is, the recognition of a necessary balance between self-interest and public welfare, or, the recognition of compromise. Two of the earliest were the Sumerian king Ur-Nammu’s in the 22\textsuperscript{nd} Century BC, and the later Babylonian king Hammurapi’s in the 18\textsuperscript{th} Century BC. These were reasonable attempts at public safety, yet that still made appeal to patron gods for authority.

1 It is at this point that the zealot may then forsake reason altogether, and embrace all as unknowable for it. Or, the more rational mind may attempt to come to terms with its own limitations.

2 This then also renders untenable the anti-humanist theory that a return to Greek thought—by supposedly dismissing subjectivity and returning to a pure individuality untouched by religion—is a necessary step in deconstruction.

3 In fact, one may argue that monotheism is merely polytheism reduced to a single theory.
2. History: the beginning of the division of the whole

So much of what is lost upon the contemporary mind with regard to the Ancients is due to a lack of perspective, especially regarding time. When an historian casually mentions that medicine progressed from Hippocrates to Galen, he or she dismisses five hundred years in three words¹. Similarly, perspective is lacking with regard to perception. Or in other words, ancient thought did not begin with the Greeks². Starting there, and keeping this very brief, part of what traditionally has separated the Greeks from their Semitic and Hamitic forbears is this notion of ‘Greek rationalism’; that is, with regard to medicine, the refusal to acknowledge the workings of any ‘supernatural’ elements within the disease process³. This is often, ironically, associated with Hippocrates himself⁴. Unfortunately, for patients, this willy-nilly wielding of logic and reason, in the Greeks’ own time, had the frequent consequence in medicine of ‘over-thinking’ the patient⁵. In other words, although religion and superstition

¹ Imagine your own world five hundred years ago, perhaps first hearing about some strange ‘New World’ across the great sea.
² There is a long written tradition of Mesopotamian and Egyptian medicine that pre-dates Greek writing by millennia, not to mention Mesopotamian and Egyptian religion and philosophy. Of course to the pre-Greek intellect medicine, philosophy, and religion were inextricable. See H. Frankfort, H.A. Frankfort, J. Wilson, T. Jacobsen, W. Irwin, *The Intellectual Adventure of Ancient Man: An Essay on Speculative Thought in the Ancient Near East* (Chicago: University of Chicago, 1946).
³ Ironically the *Oath* itself immediately calls upon “Apollo, the Healer, and Asclepius and Hugia and Panacea and all the gods and goddesses”, thereby “having them bear witness” to the rest of the *Oath*. There is little commentary in this regard, but to state again that the *Oath* bound few ancient physicians. Perhaps its revival says more of the state, or lack thereof, of rationalism among its revivers?
⁴ Again, Hippocrates was a Pythagorean philosophically. Pythagoras, famed for travels both East and West, was as much of a religious figure as he was a philosopher and mathematician. A believer in metempsychosis and transmigration, perhaps his most lasting contribution came by way of his establishing a priesthood based on Spartan principles of self-denial, literally creating a school of thought. In any case, to the Pythagoreans religion and science were inextricably intertwined. This is evident by the oddly specific proscriptions against abortifacients and urologic surgery in the *Oath*.
⁵ Charles Daremberg, *Histoire de sciences médicales*, vol. 1 (Paris: J.-B. Baillière et Fils, Libraires de l’Académie Impériale de Médecin, 1870). Daremberg states that the philosopher-
had become somewhat divorced from medicine¹, it is plain that philosophy and medicine, despite the claims of Celsus, remained inseparable². And it is among philosophical differences that we can appreciate the development of schools of medical thought³. Sticking to the accepted canon of Hippocratic works⁴, several writings appear to be of an earlier date than

physicians “tried to explain nature with closed eyes” (p. 82). See also Danielle Gourevitch, “Charles Daremberg, His Friend Émile Littré, and Positivist Medical History”, in Locating Medical History: The Stories and their Meanings, eds. F. Huisman and J.H. Warner (Baltimore: Johns Hopkins 2004), 53-73.

¹ ‘Somewhat’ being the key word here. Medicine appears originally, among the Greeks, to have been more of a consequence of philosophy rather than a discrete undertaking. Among the Pythagoreans especially, concerned as they were with the immortality of the soul, the condition of the body eventually had to be addressed. Here witness influence both from Sparta and from Egypt, and perhaps from the Indus Valley. But this is far from any rational practice of medicine. The concern is still with the well-being of the soul. Jones traces a thread from Pythagoras to Alcmaeon to Empedocles to Philolaus in an effort to extract the rational from the ‘superstitious’ (see W.H.S. Jones, Hippocrates, vol. 1, The Loeb Classical Library, [Cambridge, Mass. : Harvard University Press; London: W.Heinemann, 1955], XI-XII). Whether these were physicians or philosophers who happened to turn their attention to physiology is unclear. But the concept of the four humors that emerged from Greek thought at this point probably had less to do with empirical observation than the notion of opposites maintaining some sort of overall religio-philosophic harmony as appropriated from Near Eastern thought. Witness the teaching of the Milesian Anaximander regarding Creation as a separation of opposites.

² A.C. Celsus, De Medicina, The Loeb Classical Library, translated by W.H.S. Jones, (Cambridge, Mass.: Harvard University Press, 1971). See especially the preface where Celsus plainly asserts that “Hippocrates separated this discipline (medicine) from the study of wisdom”, whether this was derogatory or not is up to interpretation. However, as Jones points out, (Hippocrates, vol. 1, XIV-XV; XXIII), there are works among the corpus in which philosophy and religion are held at a minimum in favor of the observable. These include Prognostic, Regimen in Acute Diseases, and Epidemics I and III. The polemical works, On Epilepsy and Ancient Medicine, which specifically take the offensive against religious and philosophic elements in medicine, perhaps due to lack of imaginations (?), can also be included in this regard.

³ Galen himself refers to the three popular χοροί, or ‘choirs’ of the day, medical schools at Kos, at Knidus, and at Sicily. What he meant by ‘choir’ is the interesting matter, and it is a shame that snideness translates so poorly. See I.M. Lonie, “The Cnidean Treatises of the Corpus Hippocraticum”, The Classical Quarterly, New Series, vol. 15, no. 1 (1965): 1-30.

⁴ I agree with Jones that it is best to think of ‘Hippocrates’, with regard to his associated writings, less as an individual than as a ‘library’, containing “(1) Text-books for physicians; (2) Text-books for laymen; (3) Pieces of research or collection of materials for research. (4)
the years of the historical Hippocrates (460-370 BC). Two of these earlier writings, the *Prenotions of Kos* and the *First Prorhetic* are associated with the medical establishment at Kos (where indeed Hippocrates himself was trained) and are concerned foremost with the natural history of disease, and are a forerunner of the Empiricist school¹. The *Treatise on Seven* is the first tract, also likely before the historical Hippocrates², that discusses the Hippocratic concept of disease states occurring through an imbalance of four humors, and perhaps more importantly, the holistic concept of good health as a result of a balance among the humors³. Unabashedly philosophic, this became the forerunner of the Dogmatist school⁴. And a third medical establishment, the so-called Knidian school, exemplified in the

Lectures or essays for medical students or novices. (5) Essays by philosophers who were perhaps not practicing physicians, but laymen interested in medicine and anxious to apply it to the methods of philosophy. (6) Note-books or scrap-books" (*Hippocrates*, vol. 1, XXII). The Hippocratic canon was most likely codified at the library at Alexandria, where any unknowing librarian might catalogue any medical text as ‘Hippocratic’ based solely on the fame of the name.

¹ The Empiricists, associated with the physicians Philinus and Serapion, students of Herophilus, working in Alexandria in the third century BC, both enamored of Aristotle, developed as a school initially as a reaction to the sense-doubting of the skeptical Dogmatists. The Empiricists saw knowledge as gained through experience (hence their name, ἐμπειρία, ‘experience’). The famous ‘Empirical triad’ encouraged the physician to trust his own observations, to learn by history, and to learn by analogy, i.e. the case study. This limited medicine to the observable, and led to searches for cures rather than causes of disease. Eventually this led to the rise of pharmaceuticals, as patients demanded treatment of these physicians who were more than willing to treat, a sort of Big Pharma relationship of its day, and practitioners of the school for the most part descended into charlatanism.

² See W.H.S. Jones, *Philosophy and Medicine in Ancient Greece* (Baltimore: Johns Hopkins University Press, 1978), 6-10, for a discussion of Heinrich Roscher’s original assertion. Galen’s ‘Sicilian’ school, where philosophy was the rule rather than the exception, especially admitting of *a priori* assumptions.

³ Galen’s ‘Sicilian’ school, where philosophy was the rule rather than the exception, especially admitting of *a priori* assumptions.

⁴ The Dogmatists, associated with Diocles and Praxagoras, were the standard-bearers of the Hippocratic school, and thus the standard of medical care until the establishment of the Empiricists, viewing the physician in a quasi-religious, Platonic sense; that is, as a philosopher-healer (it can be argued that these practitioners took Plato much too seriously, especially his *Timaeus*). Sense-perception was always in doubt, making the presentation of the patient at times irrelevant. The cause of disease was a want of proportion in the body’s elements, and the search for a totality in medical knowledge led inevitably to an incomplete knowledge of the parts.

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tracts Diseases II and III, Affections, and Regimen in Acute Diseases, admits of phenomenological classification of disease with very few remedies. This then became associated with the Methodist School.

Thus we have the three major schools of medical thought that bridged the time from Hippocrates to Galen, a span of five hundred years, all traceable to the Hippocratic corpus. So where then does our current piece fit? Though most often linked to the Epicurean, or Methodist, school, the piece is unique in the corpus for combining the teachings of all three schools, culminating in the philosophic-medical lines: “where there is love of the art there is love of humanity”. Even the title, perhaps more appropriately translated as ‘Exhortations’, implies almost a desperation, a plea to fellow physicians, to set aside differences, to seek common ground, to treat patients with eyes wide open, so to speak.

3. Precepts

Precepts was last translated into English by the renowned classicist W.H.S. Jones in 1923 as part of Harvard’s Loeb series. The document, whose author is unknown, has been fairly universally ignored as a Hippocratic work, and not without reason. For what is most striking, compared to most other texts in the corpus, is the obscurity of the author’s

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1 The development of the Methodist school, associated with the Asclepiadae and Epicurus, coincides with the shift of Mediterranean medical scholarship from Alexandria to Rome. The approach here was more holistic, with a concerted effort to make medicine generally more palatable to the ‘manly’ Romans. Atomism was at the core, and health was determined by the state of one’s pores, either too relaxed, too contracted, or both. Pharmaceuticals were de-emphasized, and more emphasis was placed on food and drink, massages, and movement.  
2 Jones seems to have no doubt, most likely due simply to the later dating of the piece. Cf. W.H.S. Jones, Philosophy and Medicine in Ancient Greece, 310-311.  
3 Ibid., chapter VI, lines 6-7.  
4 Jones was apparently unaware of the previous English translation by John Redman Coxe in The Writings of Hippocrates and Galen: Epitomised from the Original Latin Translations (Philadelphia: Lindsay and Blakiston, 1846).
language, making translation a trying process at best¹, nearly impossible at worst. Though meant as a medico-philosophic text, the author’s use of seemingly randomly lyrical prose, combined with words, expressions, and grammatical constructions common to much later Greek than that of the Hippocratic era², presents an author either too comfortable or too uncomfortable with the language. In any case, it marks the author as most likely a non-native Greek speaker³. Add to this an arguably Latinized style at times, and fairly frequent hapax legomena⁴, and we have a philosophic author as confident in his style as his purpose⁵. Jones himself proposes the idea that the author may have been “a Roman who wrote in Greek an essay, compiled from Epicurean literature and fairly sound med-

¹ The two most famous translations prior to Jones’ were those of Émile Littré (1839-1861) and Franz Ermerins (1859-1864). Jones’ describes their efforts thusly: “Littré reserved it (Precepts) for his ninth and last volume of text and translation, and by the time he reached it even his untiring energy was beginning to flag; his edition is hasty, erratic, and in places unintelligible. Ermerins gives over the task in despair, and leaves whole chapters untranslated” (W.H.S. Jones, Philosophy and Medicine in Ancient Greece, 305).

² These include generally replacing the aorist tense with the perfect, using numerous participial phrases, and replacing the older negative οὐ for μὴ.

³ Of course there is always the possibility of mistakes by the copyists, but given the sheer number of unusual occurrences, this is not likely to explain all.

⁴ The Greek ἀπαξ λεγόμενον, ‘said once’, a word written in the language only once. I make note of each of these as they appear in the text.

⁵ Something happened in the transition from Greek to Latin as the Mediterranean lingua franca. Actually two things happened; something was lost, and something was gained. Aspect, the peculiarly and eminently philosophically interesting pan-Ancient concept of speaking and writing in terms of complete or incomplete action, was lost. Tense, the unambiguous telling of time in speaking and writing, was gained. Metaphysically, the implications were vast: the invention of ‘time’ as we know it. It is well to keep in mind, too, that this transition from aspect to tense is essentially lost in translation. The English language, ironically, does accommodate both tense and aspect, but the aspectual nature of the language has devolved to the point that the difference is too fine to press. And for a culture that has now lived in the past, present, and future for multiple generations, the idea of removing time from the language is probably inconceivable. (Something else was lost in the transition from Greek to Latin; that is, the dual number. We are familiar with the singular and plural numbers, but the Ancients, both Greeks and pre-Greeks, specifically addressed the occurrence of two’s. Again, the philosophic implications are immense, centering the universe always about an axis framed by opposites. Cf. footnote 20, re: Anaximander’s theories of opposites.)
Jones then, however, goes on to dismiss his own contention based on two early scholia\(^2\) in which *Precepts* is referred to as Hippocratic. I fail to see how this earlier dating dismisses Jones’ earlier hypothesis\(^3\).

Regarding the overall structure, I take issue at least with Jones’ assertion that the entire piece is a *cento*\(^4\); that is, a sort of patchwork or amalgam of other works. He is not explicit in his reasoning other than to express analogously that many Hippocratic works are *centoes*\(^5\). But this work appears so idiosyncratic as to at least allow for the possibility that we are here dealing with an original work\(^6\). Otherwise I have re-arranged the structure from fourteen chapters of highly variable length to sixteen. I do not see any major subdivisions other than paragraph-length chapters. The piece does collapse into aphorisms in the latter chapters, and it is difficult to know whether these were perhaps pasted in from other works, or if these were meant as individual teaching points and the text has been cut off. There is certainly no real overarching literary structure to the piece, but for its stated purpose: to lay out exhortations to practitioners. The early sections assert medical principles, primarily defending empiricism—that is, limiting practice to what is observable—yet specifically allowing for the ‘thoughtful deliberation’ so important to the ‘hypotheses’ of the Dogmatists. There is also, within the very first chapter, specific reference to the phenomenology so important to the Epicureans. There is also language consistent with Epicureanism, key philosophic terms such as αἰσθήσις, or ‘sense-perception’, and ἐναργής, or ‘distinctness, clarity’\(^7\).

\(^1\) W.H.S. Jones, *Philosophy and Medicine in Ancient Greece*, 310.
\(^2\) Greek σχόλιον, a note or comment; these occur as glosses throughout ancient and antique manuscripts, usually in the margins, much like modern editing notes. These could be critical, grammatical, descriptive, or otherwise explanatory. In this case, Jones notes glosses by Erotian and Galen commenting on *Precepts* as Hippocratic.
\(^3\) I’ve already discussed the way accidents of library cataloguing readily occurred in antiquity, cf. note 4, p. 7.
\(^4\) W.H.S. Jones, *Philosophy and Medicine in Ancient Greece*, 305. A cento is essentially a compilation of quotations from different authors, a pastiche.
\(^5\) *Ibidem*, 305.
\(^6\) Jones does admit that the author "was no mere ‘paste-and-scissors’ man, but an author who stamped his characteristics even on his borrowings" (*Ibidem*, 307). Of note here is perhaps the earliest version of the currently ubiquitous expression, ‘cut-and-paste’.
\(^7\) Likewise, a key Epicurean term is conspicuously absent, προλείψις, or ‘a leaving behind’.

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One might surmise the unknown author is an Epicurean by training, but open to the ideas and methods of his fellow guilds. Whereas Jones entertained the notion only briefly, I might go so far as to agree with his dismissed suggestion that the writer was a Roman, or at least a Romanized Greek, a likely Stoic by nature. Jones’ counter-argument, essentially that reference is made to the *Precepts* in Erotian, Galen, Archigenes, and Chryssipus, as far as I can tell, does nothing to disprove this assertion other than to perhaps allow for an earlier dating of the work¹.

Regardless of the exact date, the piece dates more generally if not to the Hellenistic period *per se*, 323–31 BC², then as an imperial-age product of that period, the post-Alexandrian age of fractious kingdoms, long after the progression of Bacchus to Orpheus, of Thales to Pythagoras that saw the Greeks transform religion into philosophy into science. The great, but brief, democratic experiment of the fifth century was over, and with it the unprecedented intellectual freedom enjoyed by the early philosophers. There were as yet few constraints placed on thought, but with the might of Alexander shattered into numerous kingdoms, and Rome not having yet come to dominate, disorder, the result of an absolutely free market economy, was the general rule of the day, disorder subject both to royal whim and, perhaps more importantly, to chance itself. One’s fortunes might change daily, depending upon circumstance, and it is not difficult to imagine how, from such an environment, moral philosophy in general came to dominate this period of Greek thought³. Despite the intellectual neatness of the formal logic forged by their predecessors, the world itself had grown increasingly illogical. ‘Fortune’ determined one’s fate far more than any predictable course of one’s work, and fortunes changed rapidly. The world, therefore, was a random place, often dangerous, and life, for most, became a trial, less to be lived than endured.

How then does the ‘scientific’ mind proceed in a chaotic world? We have one major source in this regard that survives from antiquity, the He-

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² If it dates to the first century AD, regardless it is still a product of the Hellenistic Age.
³ See Bertrand Russell, *A History of Western Philosophy* (New York: Simon and Schuster, 1972), 228–270, for a neat synopsis of the era from a point of view that dismisses the influence of the Near East with a wave of the hand, in proper Classical bias of the day.
brew Bible. The Israelites (radically) acknowledged the unknowable. And with Jewish scholars pouring into Alexandria in the Hellenistic era, their influence is striking. It can hardly be coincidental that there developed at this time less a striving toward some sort of perfect political harmony\(^1\), and more a striving toward a self-absorbed inner happiness or satisfaction. This was a pre-Christian notion of salvation that would come to appeal—via a charismatic leader—to an exhausted mass consciousness a few short centuries later. In fact, subjectivity came to dominate the generally declining state of literature of this period; that is, if one defines subjectivity as the loss of individuality\(^2\). Witness the corruption of the Greek tongue amid the onslaught of reckless trade and mass education of consumers, and the disappearance of Hebrew altogether (culminating in the royally sanctioned translation of the Hebrew Bible into the vulgar Greek of the time; this in desperate effort to preserve it). Medical texts, generally easy to write, especially so in watered down Greek, and never on par with other literary texts, proliferated among a proliferation of newly educated 'physicians'. These were generally the offspring of the nouveau riche of the day, sent off to the universities of the day; in other words, the type of profit-seeking medical crowd that, in lieu of officially mandated education and practice guidelines, would made the codification of medical ethics a necessity.

Here is my translation, based on the Greek text as edited by Jones\(^3\).

\(^1\) As Plato and Aristotle would have had thinkers toil. But the era of democracy was over. Of course Plato’s standard was yet carried forth through the Hellenistic Age by Plotinus, Porphyry, and Iamblichus, and eventually, if not ironically, by Augustine. Aristotle’s logic of appearances, on the other hand, was co-opted by the Peripatetics philosophically and the Empiricists in medicine.

\(^2\) And the antihumanist claim that a return to Greek thought is a return to pre-subjective, or pre-religious, morality is problematic to say the least. See Luc Ferry and Alain Renaut, *French Philosophy of the Sixties: An Essay on Antihumanism*, translated by M.S. Cattani (Amherst: University of Massachusetts Press, 1990), 117-119. To be fair, despite the implications otherwise in both their philosophies, Heidegger and Foucault consistently denied such a return to antiquity would be useful for the progression of thought, “The solution to a problem cannot be found in one proposed by other people in other times”.

\(^3\) I have based my translation on Jones’ edition of the Greek, which itself was based on Littre’s and Ermerins’ texts as compiled primarily from the codices Paris C’, D, E, F, H, I, J, K, S’, R’, and Barberinus I. 5 (MSS) and codex Marcianus Venetus 269 (M).
4. Translation

As preface to my translation, I present a brief word on the task of the translator, especially as regards an idiosyncratic ancient text corrupted by centuries of copy, emendation, and misinterpretation. There are at least as many schools of thought regarding the technical skill and quasi-artistry of the translator as there are written languages. Generally, when the question is addressed around ancient texts, it boils down to a simple old Danish conundrum: to be (literal), or not to be (literal). One person’s tragedy is another person’s comedy, so to speak. And when the text is part of a manuscript tradition, amended and emended many times along the way, then a literal translation becomes nearly untenable. Of course the sides of the conundrum really are not mutually exclusive. My translation, for example, began life as a quite literal rendering of the text before me. Very little logic emerged from this exercise, however. Next, I mixed and matched by grammar, seeking sense, fair or not, in my native English. What tended to emerge at that point was a pseudo-linear narrative, though with too many holes to patch up seamlessly via the text itself. I turned next to the historical tradition, including the commentaries and the emendations. All of this material, like mine, is technically hearsay, and so where the patches just did not fit, I opted for more of a “spirit of the law” approach. This approach had the benefits both of allowing a measure of artistic freedom, and of creating a more logical narrative. In general I do not believe such license has in any way muddled “the spirit” of the piece, and obviously I have noted the many sections in which I differ significantly from the tradition. In these cases I have, minimally, presented the Greek, often with the commonest, and not-so-commonest, emendations, along with available commentaries, ancient through more modern, in order to make my own thought process transparent to the reader. I agree with some emendations, and not with others. I propose some of my own. In such cases as well, I have often proposed a quite literal translation so
as to facilitate thoughtful inquiry among the non-Greek readers. In other cases, where the meaning is eminently clear, but the translation of technical vocabulary into English would be overly stilted, or the rendering of a Greek idiom into literal English would be nonsensical, I chose ‘proximal’ words that allow for a (hopefully) more pleasurable read. Metaphor after all translates most poorly at times. I like Walter Benjamin’s description of the process: “Fragments of a vessel which are to be glued together must match one another in the smallest details, although they need not be like one another. In the same way a translation, instead of resembling the meaning of the original, must lovingly and in detail incorporate the original’s mode of signification, thus making both the original and the translation recognizable as fragments of a greater language, just as fragments are part of a vessel”¹.

Precepts

I.

Time affords opportunity, but opportunity does not afford much time. Healing occurs by way of time, but also by way of opportunity². Indeed with this in mind one ought not to practice medicine by attending too staunchly to the prevailing theory of the day, but by means of clinical experience combined with thoughtful deliberation. For what is a theory³ but a shared recollection of those things grasped through sense-perception⁴. And sense-perception, brought most vividly⁵ to one’s awareness through actual suffering⁶—that is, the experience of many things—and thereby conveying to the

² Hence the need for physicians at all, i.e. to hasten ‘time’.
³ λογισμὸς—The choice of this term especially leads me to believe the author at least had some regard for Stoicism despite his overall Epicurian leaning, for this is more consistent with the teaching of Zeno who made a point of distinguishing the ‘logos’ from the ‘nous’, that is, reason from the mind.
⁴ αἰσθήσιος
⁵ ἐναργέως
⁶ προπαθή; hapax legomenon
intellect over and over those things now subjected to it—that is, having experienced them so many times, having afforded them so much attention in the past, repeatedly making incursions into itself—has these things well stored in memory. Now, I agree with a theory provided that it has created its foundation out of what remains after the chaff; and that, by its method, has drawn its conclusions out of what is plainly observable. For when a theory has distinctly created its foundation out of clearly observable facts, then it is certainly within the grasp of the intellect, the intellect itself having inherited each of its understandings as derived from outside sources.

II.

One need then suppose that the natural order indeed must be stirred up and taught under many and variegated considerations, even against one’s will. And the intellect, having gained its experience from the natural order, as I have said before, will lead thereafter to truth. But if the intellect works not from a clear approach, but rather from a credulous, malleable pretense, then it will often spread burdensome and grievous conclusions. And make no mistake, some do go on along such an impassable road. But what

1 περιπτώσιος
2 καταφορὴν; hapax legomenon
3 Note the circular argument, reminiscent of Plato’s Meno, in which knowledge is equated with recognition, a sort of instant familiarity, ‘Of course!’; cf. Pythagorean re-incarnation; also, firmly Empiricist: the intellect can only understand what it sees. Again, cf. Kant’s a priori assumptions.
4 φύσιν
5 Or perhaps better paraphrased: ‘In order for the intellect to grasp as much as possible, it must experience as much as possible’.
6 παρ’ αὐτῆς
7 The passage is noteworthy as a challenge to the physician and philosopher both to consider oppositional views. To my mind, the passage smacks of the Heraclitian doctrine of perpetual flux, and the inescapability of time; time not as a metaphysically endorsed Parmenidean eternity, but time as a harsh duration of successive changes. In other words, the ‘science’ against which a clinician is faced. Another dig at the Platonists?
8 This ‘pretense’, of course, to an otherwise reasonable human being, represents the problem with formal logic, i.e. one may drawn reasonable conclusions from reasonable, but untrue, hypotheses.
harm would one speak if⁴ those who perform poorly the work of the physi-
cian earned their just reward? It is the innocent, however, who are afflicted,
those whose quality of life did not appear to be sufficiently bereft until they
encountered the inexperience² of their physician.

Now, having discoursed enough concerning these things, I shall go on.

III.

It is not possible that conclusions drawn solely from deliberation be fruit-
ful³, but those (conclusions) based on the evidence before one’s own eyes are.
Firm conclusions, however, when combined with frivolous talk are precari-
ous at best, dangerous at worst. Therefore generally one ought to hold firm
to the things one has come to know through experience, and to gain knowl-
edge not least through these things; that is, if one intends to take hold of that
easy and unfailing habit that we call ‘the art of healing’⁴. Indeed this would
provide a great advantage both to the sick and to those who tend to them⁵.

IV.

Do not shy from inquiring of laymen⁶ if so doing seems to be expedient
to timely treatment. In such wise I suppose the entirety of the art⁷ has been

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¹ Following Ermerins’ emendation of ἢν to εἰ; Jones does as much without editing the text.
² ἀπειρίη, ‘inexperience’, opposite of ἐμπειρία; inexperience thus equated with lack of
knowledge.
³ μὴ εἰη ἐπαύρασθαι, ‘it is not possible to be fruitful’; cf. Oath, line 33: εἰη ἐπαύρασθαι , “it
is possible to be fruitful”; this is not the only dig at the Oath.
⁴ ἰητρικὴν; cf. Oath, τέχνης, lines 6, 22; τέχνης, line 34. It is of note that τέχνη, traditionally
translated as ‘skill’, often translated in Hippocratic texts as ‘art’, has much more of a pejo-
rative sense in Plato specifically, and Greek philosophy in general. The author of Precepts
does, however, like several Hippocratic authors, use the term in the sense of ‘art’ as well, cf.
ch. 2, line 12, τὴν σύμπασαν τέχνην, ‘the entirety of the art’.
⁵ δημιουργοῖς; this has more the sense of ‘artisan’, or ‘craftsman’, in a guild or union sort
of way, i.e. δῆμος, sort of ‘the common man’, originally a term to describe a ‘district’ for
election purposes. It is interesting in light of the rise of τέχνη, another ‘hands on’ term, in
medical writing.
⁶ ἰδιωτέων
⁷ Cf. note 66.
set forth: that a bit of the end¹ is observed in each of its constituent parts², which parts are then assembled to that end³. Accordingly, one ought to pay attention to what generally is free of chaff, both with a willingness to help and with modesty rather than with the empty promise and inevitable excuse that accompany purely business transactions⁴.

V.

The predetermination of what contributes to the illness is both most useful and most complicated—since it is not⁵ only what has been administered previously that will be of any use. Accordingly, there is no place for hasty assertions. For all suffering, by way of many turns and changes, settles down into some sort of fixed pattern⁶.

VI.

And, too, the following piece of advice is in need of consideration, for it does contribute in some measure to the bigger picture⁷: that is, if you start

¹ τέλους
² διὰ τὸ ἐξ ἐκάστου τι τοῦ τέλους τηρηθῆναι; ‘τι’ is a likely insertion, with reason.
³ Cf. The Dialectical method: Parmenides to Zeno to Socrates.
⁵ I follow Ermerins’ emendation of οὐ; Jones does not: ‘since it is only what has been administered...’
⁶ I consider this third section as part of the theoretical introductory portion of the text, still concerned with overall observation; Jones places it with chapters IV-XIII, concerning the, as he sees it, mostly random “remarks on medical etiquette, fees, patients’ whims, quacks, consultants, lecturing to large audiences, late learners” (W.H.S. Jones, Philosophy and Medicine in Ancient Greece, 307).
⁷ I agree here with the emendation of Coray, from “Emendations on Hippocrates”, Museii Oxoniensis literarii conspectus et specimina, ed. T. Burgess (Oxford: 1792); the Paris manuscripts place this clause after the next clause, likely a transposition mistake of the copyists.

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with the discussion of fees, then you will have your patient thinking not that you will abandon him lest an agreement be reached beforehand, but that you will neglect him, that you will not prescribe any relief from his suffering. Consider, therefore, whether one ought to set a fee. I believe this to be a useless consideration to the troubled patient, and especially so in acute illness. The very swiftness of disease, not allowing any opportunity to turn back the clock, exhorts the good physician not to seek profits, but more so to grasp reputation. Therefore, it is better to reproach those whom you have already saved than to prick those with one foot already in the grave.

VII.

Still, some patients deem as worthy treatment that which is conspicuously strange, preferring the unknown. Those requesting such are worthy indeed of not having their requests heeded, but not of out and out chastening. In such cases it is your duty to oppose them, for they are traveling upon an angry sea of uncertainty. For who, by God, among the brotherhood of physicians practices medicine with such unwavering insensitivity so as not right from the beginning to examine well the entire suffering of a patient; this lest one presuppose some expediency in treatment. He would do

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1 The Paris manuscripts have οὐκ; most editors emend to ὅτι; I here use οὐκ.
2 The Paris manuscripts have καί; most editors have ἢ.
3 The Paris manuscripts have ὑποθήσεις, which I follow; Jones emends to ὑποθήσει.
4 Littré and Jones both add οὐ, ‘not’.
5 Cf. Oath, lines 34-35, ἐἰς ἐπαύρασθαι καὶ βίου καὶ τέχνης δοξαζόμενῳ παρὰ πᾶσιν ἀνθρώποις ἐς τὸν αἰεὶ χρόνον, “may I gain reputation for all time among all men for my life and for my art”.
6 Following Coray’s emendation of προμύσσειν, a hapax legomenon, to προσνύσσειν, i.e. adding insult to injury.
7 I agree with Jones, ἀξιοῦσι, as opposed to Littré’s ἀλλάσουσι, ‘to make other than it is’.
8 I agree with Jones and Littré, ἄδηλον, vs the Paris manuscripts’ εὔδηλον, ‘very clear’.
9 ἠδελφισμένος ἰητρὸς, literally, ‘having been adopted as a brother among physicians’; hapax legomenon.
10 I here follow the Paris manuscripts’ πίστει ἢ; Jones emends to τοσαύτῃ—‘to so great an extent’.
11 μὴ οὐχ is a double negative, which likely here enhances the negativity of the statement rather than canceling it.
well to seek to cure—rather than merely to treat—the patient and not to pay attention to any gain without making the desire for learning paramount¹.

VIII.

I encourage physicians not to be overly insensitive, but to consider carefully both a patient’s wealth and lack thereof, and if providing services gratis, to recall a prior memory of gratitude or of one’s current fame². And if³ the opportunity exists to play the benefactor to him who is a foreigner, and/or without resources, then give to him all you can. For wherein dwells the love of humanity, therein dwells the love of the art⁴. For some patients, though keenly aware of their misfortune and suffering, and as yet far from being in a safe place, when they do acquiesce⁵ to the charity of their physician, become healthy once more. And it bodes well to look after one’s patients, both for the sake of their continued good health—remaining ever thoughtful as to their well-being—and for the sake of wellness in general. And be respectful of your own good health, at least for appearance’s sake.

IX.

Certainly those practitioners who are utterly without skill might not pay attention to what has been laid out above⁶. For those who are ignorant of medicine—should they be somehow highly thought of⁷—will become shamed.

¹ I follow Jones’ and Ermerins’ emendation of τῆς ἐπικαρπίης μὴ ἄνευ to τὴν ἐπικαρπίην, ἄνευ. Note again, the motive appears to be enlightened self-interest, cf. Locke.
² I follow the Paris manuscripts with εὐδοκιμίην; Marcianus Venetus has, and Jones agrees with, εὐδοκίην, ‘present satisfaction’; hapax legomenon.
³ Again we have ἢν for εἰ; cf. note 9, p. 16.
⁴ ἢν γὰρ παρῇ φιλανθρωπία, πάρεστι καὶ φιλοτεχνίη; easily the most famous line of this text.
⁵ I follow Jones’ and Littré’s emendation, εὐδοκέουσι, vs. εὐδοκιμέουσι, ‘to be in good standing’, of the Paris manuscripts.
⁶ This implies a planned thesis, and less a mere compilation of aphorisms. In fact, all these ‘middle’ paragraphs, IV-XII, logically follow one from the other.
⁷ ἐκ ποδὸς ύψετέμενοι; hapax legomenon.

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By their continual wanting of good luck. For let’s say these practitioners profit from the easing of the suffering of a wealthy man here and there; whenever they succeed, it is true, they do add to their reputation. But let’s say things turn out badly; then they stand insolently behind their technical ability, repeatedly neglecting the irrefutability of the higher art. It is in these cases, however, that a virtuous physician, summoned to the art by a higher calling, would be at his best. For he who accomplishes seemingly faultless cures has no need to overstep these artful ways, at least not for any want of power. For it is not as if he is not otherwise trusted, at least on the ground of any apparent injustice. But when they consider a serious condition, these ‘physicians’ do not lean toward treatment, guarding against the bringing in of other physicians, feeding on their utter disdain of help. All the while the distressed patients are left to swim upstream against twice the affliction, this on account of not having given themselves over completely to the more wholesome treatment as found within the artful. For even some remission of illness provides at least a modicum of relief to he who is so afflicted. In this regard it is also well to keep in mind that those in want of a sound mind and body by no means will always acquiesce to the same means of treatment, thereby co-conspiring with the ready cunning of their physician-of-the-day. But such patients eventually will find themselves in

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¹ καταχλιδεῦσι; hapax legomenon.
² ἱητρὸς ἀγαθὸς; this may perhaps be the best title for this piece.
³ Such physicians have no need to transgress any standards of medical care, as long as all goes well for them.
⁴ This is Erotian’s famous scholia, cf. note 2, p. 11. Erotian suggests φλεβονώδεα for his manuscript reading of φλεδονώδεα. He describes φλεδονώδεα as deriving from τὰ μετὰ φλυαρίας καὶ πνευματώδους ταραχῆς έκκρινόμενα, ‘the secretions that accompany the babbling and breathing of a disorder’, and φλεβονώδεα as deriving from τὰ μετ’ ἀλγήματος οἴδήματα, ‘the tumors that accompany pain’. See Erotiani: Vocum Hippocraticarum Collectio cum Fragmentis, ed. E. Nachmansun, “Collectio Scriptorum Veterum Upsaliensis” (Upsala: 1918), 90. Jones translates as ‘alarming’. I see no reason not to go with Erotian’s older reading of φλεδονώδεα, as derived from φλέω, ‘to gush forth’, i.e. serious wounds. The Paris manuscripts emend to φθεγγώδεα and φθογγώδεα, from φθίω, ‘to waste away’. In all readings the general meaning is fairly clear.
⁵ αἰνοῦντες; Jones suggests μένοντες, ‘standing firm’.
⁶ μοχθηρίῃ; the term has more of a moral sense than a medical one.
⁷ ἵτηροι ποικίλητα; this is an interesting statement in that it places burden on the patients
need, through their own extravagance\(^1\), having prostrated themselves before ineptitude, and showing no gratitude when they come up hard against it. Those with the means to be well off will soon exhaust themselves\(^2\) haggling over nominal fees, in reality wishing to be healthy more for the sake of their profits, or their usury, or their crops, without a care to any greater understanding of anything else\(^3\).

\(\chi\).

This is enough concerning such things. The remission and the exacerbation of disease both utilize\(^4\) widespread medical care. For indeed it is not shameful that a physician, having trouble with the presentation of a patient, or befuddled by inexperience, urge the calling in of other physicians in order that, by means of this consultation, he learn more about the patient, and allow these collaborations to provide a great measure of assistance. For having been racked by misfortune in the sheer stubbornness of one’s plight, and with lack of resources on top of this, many things simply fall apart for the troubled patient. In such a critical moment one should take care not to be overly confident\(^5\). For never have I beheld such that the art of medicine be judged over the necessity of consultation. And let not consultants quarrel or mock one another\(^6\). For I shall swear under oath that never should the conclusion\(^7\) of one physician cause jealousy within another\(^8\). Indeed a physician who does as well as the doctors, at least those patients who are hereby accused of frequently changing doctors. This is also an interesting counterpoint to the earlier ἰητρὸς ἀγαθὸς, ‘virtuous physician’, cf. note 97.

\(^1\) πολυτελείης
\(^2\) διαντλίζονται; hapax legomenon.
\(^3\) Jones believes this chapter to be ‘hopeless’, unable to integrate the first part of the chapter with the second. He fails to see the connection between ‘quacks’ and difficult patients. As a physician, I have an easier time seeing it.
\(^4\) I follow the Paris manuscripts κέκτηνται; Jones emends to κέχρηνται, ‘to be in need of’.
\(^5\) I emend, following Jones’ suggestion, to the negative, οὐ θαρρητέον.
\(^6\) κατασιλλαίνειν; hapax legomenon.
\(^7\) I here translate λογισμὸς as ‘conclusion’, cf. line 3, note 50, the ‘logical’ consequence of ‘reasoning’.
\(^8\) Again, a call to multi-partisanship, and perhaps another jab at the Oath, or at least those practicing medicine in guilds, or other exclusive, cult-like manners.

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this reveals himself as weak. For it is those more attuned to the marketplace,
to business generally, who attend to such practices with relative ease. Indeed,
one should never consider the calling in of a consult to be a mistake. Even in
a state of relative abundance there is always want of something¹.

XI.

Certainly by means of all these things it may be shown as proof positive of
the essence of the art² if a physician—be he well-deserving of his title—not
refrain from exhorting his patients not to be too out of sorts mentally in
their efforts to hasten to reach that critical moment of deliverance³. For so it
is that we, the physicians, show the way to good health. As for him having
been placed under doctor’s orders, he will not fail. But those patients who
have been renounced on account of their miserable condition will disavow
themselves⁴ and quit this life. The physician, however, who has taken the
sick man by the hand, should he be invested in the revelations⁵ of the art,
preserving—not altering—the natural order, will bear off the current despon-
dency⁶, the momentary loss of faith. For the sound state of humankind is a
condition possessed of movement; it breathes, not out of sync, but very much
harmoniously. Humankind accomplishes things through breath and activ-
ity, tempered, crafted in every way by a total lifestyle, by the sum of all its
parts—unless there be some deficiency from birth or early childhood. And
given that such a state exists, if a patient starts to fade away, then endeavor
to align the deficiency to the natural order. For weakening⁷, even over time,
is against nature⁸.

¹ Or, it never hurts to have an extra pair of eyes look at the patient.
² τῇ οὐσίᾳ τῆς τέχνης; Jones translates as ‘reality of the art’.
³ σωτηρίης; has more the sense of ‘saving’, as in ‘saving souls’. Jones translates as ‘recovery’. I prefer to keep the term ambiguous.
⁴ I follow here Littre’s emendation of a broken text, ἀπορρίπτοντες.
⁵ ἐξευρήματα; the ‘evidence’?
⁶ I follow Jones’ emendation of a broken text, ἀθυμίην.
⁷ μινύθημα; hapax legomenon.
⁸ The Epicurean/Stoic philosophy is plain here; i.e. Romans do not get sick, and if by some mistake of nature they do, the cure is action, ‘movement’.

The Virtuous Physician
XII.

And he who would effect cures, in order to master conceit, must also, throughout his career, avoid excess. For he will gain only slander on account of excessive aloofness (though judicious bits of excess will gain the physician a certain grace of manner; just as suffering is slight in a portion, but excessive in the whole). But I do not wish to strip away attempts to please¹ as unworthy of the rank of physician.

XIII.

And it is always well to keep in mind the proper use of medical instruments, as well as the common presentations of signs and symptoms.

XIV.

And if, for the sake of those assembled, you wish to hold a lecture, just bear in mind that your desire is not a glorious one, and certainly not if you cite the poets as your evidence². Nothing shows lack of due diligence more than this. And I absolutely forbid from sound medical practice any means other than the rigid inquiry³ engendered by hard work, which in and of itself maintains⁴ a most agreeable quality. Otherwise you will achieve only laziness and the provisions procured by idleness⁵.

¹ εὐχαρίην; hapax legomenon.
² Perhaps the most 'Hippocratic' line in the text. One may argue that this chapter, with its suddenly stricter exhortations than previously, is evidence that the work is indeed a cento. However, there are two more hapax legomena in this chapter, cf. notes 5-6, p. 25, which is twice the evidence against it. Indeed, chapters IX-XII are linked by a common pro-Roman thread.
³ ἱστοριευμένην; hapax legomenon.
⁴ I agree with Littré’s emendation of ἐοῦσαν to ἔχουσαν.
⁵ I again agree with Littré’s emendation, ματαιοκοπίην; hapax legomenon. The Paris manuscripts have ἑτοιμοκοπίην, ‘hard work’, but this makes little sense.

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And too, it is desired to maintain a condition free from the faults of the procrastinator¹. Just being present accomplishes nothing; being absent—if one is such a late-comer—is at least a more tolerable option. Otherwise such a ‘physician’ tends to bring upon himself only false triumph, spurred on by youthful pestering², with little thought as to what is seemly. For bluster with declarations and promises, invoking oaths for the sake of oath-making³, he who stands thusly before the attending physician⁴ is then lost in never-ending rhetoric and instruction. All the while the audience, laymen—who otherwise delight in trials⁵, passionate only for the metaphors of language—are gathered together long before they are even ever troubled by disease⁷. Therefore, whenever I attend such cases, I should never confidently ask for assistance⁸ from such a gathering of supposed medical professionals. For among them the comprehension engendered through elegant inquiry has been obliterated. Hence, with their being ignorant by virtue of their own necessity, my recommendation is that one allow experience to be most telling, the inquiry into opinion⁹ coming only much later¹⁰. For who, if he is truly willing to learn by inquiry, sets his heart rather on the diversity of opinions as taking precedent over the cool-headedness and skill of experience?¹¹ And

¹ This is my translation of ὀψιμαθής, literally, ‘late student’, and most often translated, taken from Jones, as ‘late-learner’. I am still not sure what that means, an older student? A perpetually tardy student?
² Jones and Littré both emend the Paris manuscripts’ λοιμής, to λύμης, ‘arrogance, destruction’; λοιμής in Latin is ‘pestis’, and this is perhaps an attempt by the author to translate some colloquial Latin into Greek?
³ The author is probably less making fun of the Dogmatists than again of any exclusive guild.
⁴ ἱητροῦ…νούσου; literally, ‘the physician in charge of the disease’.
⁵ φιλαλυστέων; hapax legomenon.
⁶ διαξηλευομένων; hapax legomenon.
⁷ I follow Littré’s emendation, collapsing κατάπορεως ἡμερομενών of the Paris manuscripts to κατάπορεως ἡμερομενών.
⁸ I follow Jones’ emendation from βούσθην to βοηθείην.
⁹ δογμάτων; mentioning the Dogmatists by name.
¹⁰ μεθυστέρησιν; hapax legomenon.
¹¹ Again this idea of the philosophers treating patients with eyes wide shut, so to speak.

The Virtuous Physician
so I suggest that you attend to the words of these ‘physicians’, but that you be wary of their actions.

XVI.

When placing restriction on the lifestyle of the afflicted, do not make as your target some great, long-standing desire of the patient. For it is possible to rejuvenate even in chronic disease, viz. if one pays the necessary attention even to the blind man.

As great fear is to be guarded against, so is excessive pleasure.

A sudden change in the weather is to be guarded against.

The prime of life holds all things pleasurable; the falling off of life holds only the opposite.

Difficulty with speech results either from disease, or from a defect in the ears themselves—blurt ing out one thing before full account of those things prior, or thinking something out loud before one’s thoughts are properly organized. Of course this can happen without any visible or previously documented affliction, often occurring in those overly fond of art.

Youthfulness, too, especially when the matter at hand be more trifling, can be an exceedingly powerful cure.

Disorder of the mind indicates a long illness, while crisis signifies the break from disease.

Something of a seemingly trivial nature often becomes the cure, unless a critical part be taken ill.

Just as sympathy is distressing on account of pain, so some become overly distressed through this sympathy for another.

¹ Another chapter that gave Jones fits, it is probably best arranged as a concluding series of aphorisms.

² As a psychiatrist especially this passage intrigues me as a conflation of several psychiatric symptoms, notably some of those of bipolar disorder and the psychotic disorders, and their perceived association with the artistic realm.

³ ἀταξίη is Littre’s and Jones’ emendation; the Paris manuscripts have ἀταραξίη. I like Jones’ very plausible theory that an Epicurean word may have slipped from the scribe in a very Freudian way.

⁴ συμπάθησις and συμπαθείης, both in this passage, are hapax legomena.
Complaining only causes more pain.  
He who labors excessively is best overcome by gentle dissuasion\(^1\).  
A place such as a sacred grove\(^2\) is therapeutic.

5. Discussion: the virtuous physician

So what then is the great ‘effect of truth’ brought about in this new translation? Perhaps it is that the original text of the Παραγγελιαι, to the extent that it can be reconstructed through the repeated process of translation, tried most of all to put down in words a sense of moral inquiry, a sense of moral responsibility even at a time when philosophy, fresh off its victories over religion, now found itself entangled for the first time with science. Written at a time when several philosophic schools vied with each other, and when medicine itself had settled into a speculative morass as more of a philosophic byproduct than a science, the piece—beyond the debate—leaves one ultimately with the impression that at the very least there existed some men at that time, a brotherhood even, who saw it as their moral duty (sworn duty, in some cases) to provide succor to their fellow human beings. One is also left with the impression that at this time there was recognition, at least among these apparently scholarly men, of a state of good health, as opposed to poor health, and more importantly, that ‘good health’ could at times be restored with proper care and attention. It would appear, too, that there were several of these ‘philosopher-physicians’ about, and that there were likely several ways of approaching

\(^1\) ὑποπαραίτησις; hapax legomenon.  
\(^2\) Jones suggests emending the unknown, likely corrupt, ἀλυώδης, to ἀλσώδης, and so I have.
the problem of ‘poor health’. Indeed, it seems there was often disagreement on just how best to do this. One senses a bit of disdain toward some approaches, a bit of out and out sarcasm at times. Overall, however, the impression is one of a longing for common ground, of a goal not always of easing suffering, but of seeing the suffered through their suffering. Supernatural elements are utterly absent in this work, and there is a sense of instruction about the piece, of guidance, of the audience as student. Again, I propose the timeless philosophic inquiry: so what of all this? Is there a bigger picture here?

This piece does indeed present a tiny—so tiny it was probably as irrelevant in its day as most speculative pieces are today—snapshot of a spectacularly bigger picture here, that of the legacy of the Ancient Near East on Greek thought¹. Greek culture after all was a melting pot. The Greeks, as a loose confederation of city-states, having evolved through colonization and frank piracy², stood less at a crossroads than along the fringes of empire. At the very end of the world, as far as the Assyrians, Egyptians, and Persians viewed the world, the Greeks benefitted early from this lack of centralization. The ‘Greeks’, it is probably useful to qualify the inhabitants of the loose collection of city-states of the region with quotation marks, have no definable origin³. There were no early kingdoms but for oblique references in the later literature to a very creatively imagined past⁴. Rather, the ‘Greeks’ emerged less as a purebred, roman-

¹ See Francis Macdonald Cornford, From Religion to Philosophy: A Study in the Origins of Western Speculation (London: Arnold, 1912) for the traditional Classical party-line account of how Greek thought did in fact develop in a cultural vacuum. It is fair to keep in mind regarding much of this discussion that, historically, Classicists, those trained in Greek and Latin, had little or no training in the languages of the Ancient Near East; whereas those scholars who pursued studies in these tongues most often had prior training in the Classics.


³ Hesiod’s cosmogony, the Theogony, is far more concerned with the relegation of the gods than to the genesis of humankind, and is practically devoid of human personality much less any sense of ethnic identity.

⁴ Witness Sparta’s mystical founder, Lycurgus, and Athens’ even more mystical half-snake

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ticized ethnic identity, than as a motley amalgam of the successive invaders, immigrants, refugees, émigrés, and native populations of the Near East from the East and South, as well as probable waves of Northern invaders¹. There does appear to have been an unprecedented freedom of thought that resulted from this quite literal ‘Wild West’ development, but those Greeks who took the time to think were certainly not contriving in isolation². The Greeks, like the Israelites, like the Assyrians, like the Babylonians, like us, saw the world through lenses colored by the media of the day. The Assyrian empire was collapsing to the East, the Persians were becoming the dominant political and military force, the Egyptians were still a major colonial, monarchical, and cultural presence, the Phoenicians were spreading the alphabet, and general information and gossip, throughout the Mediterranean, and the Israelites were dispersed into exile eastward or as refugees westward. The great Milesian thinkers were grounded in Asia Minor, Pythagoras was famed for his travels East and West, and it should not be lightly dismissed that the educated Hebrew prophet and chronicler, Jeremiah, lived in exile at an Ionian Greek colony in coastal Egypt³. Again, I mention perspective. When Thales, traditionally acknowledged as the father of Greek rationalism, made his famous claim that water is the universal substance he merely drew a conclusion based on the mythologies all about him. Every creation story in the Near East has a universal first substance, a ‘fundament’, and every creation story has the world emerged from water⁴. That Thales would make what

¹ I have to agree at least with Martin Bernal’s assertion that ancient Greece is probably best thought of as the westernmost edge of the Near East. Compare Bernal’s account of the settlement of Ancient Greece (Martin Bernal, Black Athena: The Afroasiatic Roots of Classical Civilization, vol. 1: The Fabrication of Ancient Greece 1785-1985 [New Brunswick: Rutgers, 1987], 75-120), with Russell’s, in A History of Western Philosophy, 3-24. The truth is likely somewhere in between.

² One does not become legendary, after all—i.e. Thales, Pythagoras, even Socrates—in isolation.

³ In the garrison town of Tahpanhes; see Jeremiah 43:7, 44:1.

⁴ Contemporary with Thales, the other two great Milesian thinkers were the earlier men-
appears to be one of the earliest ‘scientific’ conclusions is perfectly logical in context. To say that Thales had divorced himself from myth-making is sweeping and almost certainly not true. To say that Thales and his disciples were beginning to rethink, rather than dispel, mythology is more likely closer to the truth.

How does this then take us from point A to point B? What has our much later piece to do with myth-making and myth-destroying? Although numerous Hippocratic texts offer case histories and disease theories supposedly free of supernatural elements, indeed at times aggressively denouncing the inclusion of such elements, *Precepts* is the only ethics-centered text from among the corpus to remain free of magical elements. Thus, it is a landmark text in the history of moral inquiry, freeing the practice of medicine from religious constraints all the while considering sound practice to be solidly grounded in philosophy. This is self-evident in the text. The question that especially interests me is how, in a world dominated by mythology, did this come about?

First of all, I do not necessarily believe that the author was a solitary genius who, like the creator of the alphabet, single-handedly created an intellectual revolution overnight. I do not believe the author is necessarily a genius in any case; in fact, and more importantly, I believe he is merely representative. For the work itself reveals the still-coming-to-fruition of a much grander, and slowly developing, evolution in thought; that is, the interplay of polytheism and monotheism as representative of the continuous interplay of myth-making and myth-destroying prevalent across the Ancient Mediterranean Basin and Near East. Another term for this process might be ‘scientific method’, or perhaps more palatably, ‘scientific spirit’. The Ancients, after all, believed in multiple gods not necessarily for faith’s sake—they stood just as ready to mentioned Anaximander, with his *apeiron*, or ‘first substance’, and Anaximenes, who pronounced that air was the fundament.

¹ The view is decidedly Popperian. What is a myth but a theory, and generally falsifiable at that. Science thereby begins, or began, as myth, and truth yet remains elusive. See Karl Popper, *Conjectures and Refutations: The Growth of Scientific Knowledge* (New York, London: Routledge, 2002).

² *Precepts* in fact is so modern at points we hardly are aware that the text is ancient. Read in isolation one might even guess the piece to date from recent years.

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forsake a god disproved as to follow a god proved—but for reason’s sake. The gods were theory\(^1\). They provided explanations, quite often proven false\(^2\). ‘Faith’ is another matter altogether. Suffice it to say, for our purposes, it is difficult to imagine one placing one’s ‘faith’, say, in a carousing, brow-beaten, lazy Zeus. The gods, frankly, across the region, though at times clever, generally were not shown to be smarter than, in fact were often portrayed as much dimmer than, their human counterparts\(^3\). For our discussion, especially with regard to applied ethics in medical practice, I will consider that Greek ‘rationalism’, defined at its simplest as the conquering of the irrational, was indeed the result of the conflict between polytheism and monotheism of the time. And what allowed the Greeks to develop this line of thinking was their very ‘fringe’ status, creating a relatively ‘free’ environment amenable to the objective consideration of all arguments\(^4\).

Polytheism otherwise had been the rule for centuries, abundantly attested to in the material and historical evidence of the entire Mediterranean and Mesopotamian regions. Polytheism, however, and perhaps ironically, was less an impetus for religious thought than for rational thought. It is interesting that the origin of monotheism has fascinated scholars for centuries, but that the origin of polytheism generally has not.

\(^1\) It is interesting that the word ‘theory’ derives from the Greek for ‘work of God’.  
\(^2\) Astrology and divination were the earliest sciences of the day, whence emerged medicine. Why would medicine displace these earlier theories? Medicine was shown to be generally more effective.  
\(^3\) It is illuminating for our discussion to note that Heracles, perhaps the dimmest of all Greek heroes, achieved the status of an Immortal, while Odysseus, renowned as the most cunning of Greek heroes, flat out turned down the freely proffered opportunity for immortality when offered ambrosia by the nymph Kalypso.  
\(^4\) Grammatically, the archaic dual number provides interesting insight into the very ancient mind; that is, conceiving of the environment in two’s, often as opposites, creates a natural tension in language itself, creates a natural debate. To think of the ‘heavens’ as opposed to the ‘earth’, or the ‘gods’ as opposed to ‘man’ implies an overall dimensional vision of totality designed to accommodate revision. In our case, to think of the body as ‘pairs’ of hands, feet, eyes, or as symmetrical in those parts that exist as one, implies a central axis, a certain something about which the body, the environment, the universe is irresistibly attracted. It is likely not an accident that the rise of monotheism coincided with the dispensing with of the dual.
Primitive man had little need for objects of worship. After all, he had an entire world of magic before him\(^1\). What he did need, upon gaining a modicum of relatively ensured sustenance, was explanation for why and how things were the way they were. Mythology is expedient as a means of providing logic to the universe\(^2\). As the world grew more complicated, a multiplicity of deities, of theories, then determined the structure of that world. That deities were anthropomorphic is more a consequence of their creators being anthropomorphic. Human traits allow a model for the unknowable to become knowable. It is impossible, of course, to know how long the process took, and where the process stood at the moment it became possible to record it in writing. But it is clear from what does survive that pantheons, or knowable collections of myths, conflated, expanded, and imploded over time, just like theories, like paradigms\(^3\). Explanations grew more refined; myths grew more elegant, as the gods became more known, as the world became better known. Astrology and divination, the earliest ‘sciences’, were at the forefront of this process, with the earliest written evidence from Mesopotamia and Egypt\(^4\).

Creating order from disorder was the purview of the ‘magic man’, the ‘scientist’, and writing was the great first technological innovation, a ‘gift’ from the gods, that allowed for the wide-scale ordering of disorder. The magic man then used this accumulated knowledge to predict the future, providing his services to others, seeking above all to outwit unpredictabil-

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\(^1\) It is illuminating in this regard that in grammar generally, at least among attested languages, the third person was the last to develop, indicating an earlier more personal commune with the world, i.e. a world of “I’s” and “you’s”.

\(^2\) How such a mind conceived of time, space, and language is likely inconceivable to us but for hints here and there. There is evidence in early Mesopotamian Sumerian, the oldest written language thus far deciphered, that early grammar in the region was affected by the nearness or distance of the speaker to the he, she, or it being spoken to, and that the third person was probably the last grammatical person to evolve. The issues of aspect versus tense have already been addressed; cf. note 46.

\(^3\) The study of ancient religion has traditionally been a scholarly headache due to its complicated, overlapping, and frequently contradictory history.

\(^4\) The early diviners and astrologers, the priests and the medicine men, the ‘scientists’ of the day, diligently catalogued the natural and supernatural worlds over the course of centuries, and likely millennia, creating and handing down empirical lists of every conceivable phenomenon. To what end? To create order.
ity; that is, to outwit ‘the gods’¹. Whether financial gain or priestly reputation was the ultimate goal is debatable. Either way, rules of decorum, primitive ethical standards, developed among the priestly classes throughout the Near East, notably an exclusivity regarding the guardianship and repository of their accumulated knowledge, and ‘virtuous’ behavior, whether utilitarian, pragmatic, or idealistic, served their purposes. We might view this progression as science, in a way, if the scientific process involves a steady progression of hypotheses based on an ever-expanding collection of the most empirical of evidence, dispensing with what appears to be useless, maintaining what appears to be significant, with frequent detours and returns along the way².

So then what happened? Monotheism is considered to be the first great ‘intellectual leap’ of humanity³, acknowledging the unknown and creating—or perhaps discovering—an absolute, an Absolute, maintained by faith, and against which humanity now could measure itself. This ‘leap’ is most often attributed not to any specific individual but to the ancient Israelites as virtually an ethnic identity⁴. Thus, out of the polytheistic search for knowledge⁵ a mounting body of ‘ruled out’ evidence arose essentially a negative belief system. Where formerly the universe was considered

¹ Unpredictability is a tricky word. It seems to contradict the notion of the knowability of the world. But in such a world, the ‘scientific’ assumption is that the unknowable eventually will become knowable.
² The rather cultural inbreeding, however, engendered and reinforced by the exclusivity of the fraternity, remained an early barrier to any sort of moral inquiry among these priest-scientists.
⁴ Compare the notion of monotheism as a distillation of the pantheon as espoused centuries prior to the establishment of the Israelites in the Levant by the Egyptian Pharaoh Akhenaten (*Ibidem*, 225). See also Sigmund Freud, *Moses and Monotheism*, translated by Katherine Jones (New York: Vintage, 1967) for an interesting discussion of the influence of Egyptian monotheism on Hebrew monotheism.
⁵ The Hebrew Bible and New Testament both are full of multiple gods and goddesses: Elohim, Yahweh, El-Shaddei, Asherah, among others, in the Old Testament; the ‘Holy Trinity’ and rampant hagiolatry in the New Testament. The gods change as representations in the progression of thought, but this does not change the essential monotheism. That is, that there exists an unknowable, an absolute, regardless of how much humanity comes to know.

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(potentially) knowable, the world suddenly changed. From an Israelite perspective, faced with repeated conquest and mass deportation¹, the universe, over time, became a very tenuous place. Canaanite gods conflated with Arabian and Egyptian deities, and much as ‘illogic’ came to dominate the lives of Hellenistic Greeks, the Israelites, too, came face to face with the philosophic conundrum of creating order from disorder. And faced with chaos, a primordial chaos even, a world made utterly unknowable, logic collapsed. That was the moment of intellectual clarity that characterized the Hebrew intellectual leap across a terrifying abyss of uncertainty, to the conclusion that god was no longer ‘god’, but ‘God’, an unknowable absolute. Where ‘science’ fails, He is what remains. Thereby God is not like humanity, and there is proscription against His depiction. Not unexpectedly this is a school of thought borne of slavery and rootlessness, a school of thought, once filtered ‘down’ to the ‘common man’, that may, perhaps inevitably, lead to messianic and paradisiacal belief systems. One thing for sure that it did not lead to, at least among its creators, was further advancement in scientific thought². Luckily others, namely the Greeks, were more objectively influenced by the intellectual potential unlocked in this critical step.

Polytheism, it may be countered, in its quest to know all, including the gods, may indeed someday reduce all gods to a single deity. But this would not change the nature of polytheism; this would only reduce the pantheon³. Monotheism is the opposite. There is an absolute that is universal and unknowable. (In fact, this is the only way I can see to reconcile the ‘polytheistic’ elements of the Old and New Testaments both; that is, whereas polytheism may have one god, so might monotheism have more than one without changing the essential nature of itself.) We, as humanity, stand in relation to this absolute, and inductive logic is allow-

¹ I of course refer to the successive conquests of Israel and Judah by the Assyrians and Persians, and the subsequent mass deportations of the citizenry to Babylon.
² The Hebrew Bible is really the only surviving account of Israelite thought, and the discovery, so to speak, of moral inquiry therein, became all-consuming for its compilers. This revolution in thought was then not applied to any other field.
able because of this great initial cause. It follows then, with the estab-
lishment of an ultimate cause, that ethics and morality, never concerns
of the pantheistic gods¹, should take root². The Greeks freely considered
the merits of both polytheism and monotheism, attempting at times to
integrate the two systems³. Thus we have Plato’s unknowable Forms side
by side with his Atlantean mythology. We have Aristotle striving to cre-
ate a unifying theory of ethics while simultaneously deriving his physics.
We have Hippocrates developing a ‘science’ of medicine from the priestly
proscriptions and prescriptions of Pythagoras. For our purposes we have
the development of medicine as a quasi-philosophic endeavor, less di-
vorced from the supernatural than emerged from it⁴.

¹ Compare, say, the law codes as espoused in Babylon by Hammurapi to those of the Book
of Exodus in the Ten Commandments. The much earlier Hammurapi’s code is a series of
conditional statements: ‘If one does this, then the penalty will be this’. The Ten Command-
ments are a series of imperative statements with a future sense: ‘Thou shalt not do this.’
There is a certain reasonable quality to the Babylonian code; the Hebrew code leaves no
room for interpretation.

² In fact Judaism as constituted today rests on an enormous compilation of Biblical inter-
pretation in this regard, and it is striking that other than some fragmentary inscriptions and
apocryphal variations of Bible stories, no other Hebrew document other than the Hebrew
Bible has survived from antiquity. There is not even any reference to other documents, and it
is clear that the Israelites, in rejecting polytheism, thereby rejected any attempt at scientific
inquiry. There is no evidence whatsoever of further investigation scientifically concurrent
with the rise of Greek medicine. Though their contribution then to moral inquiry is great,
the Israelite contribution to science was minimal.

³ It should be remembered in this regard that the Hebrew prophet, Jeremiah, remained
in exile at the Greek, more specifically Milesian, colony of Daphnæ, in Egypt, during the
sixth century BC, at about the time Greek rationalism was taking shape. I disagree with
Russell that the Greeks took nothing away from these encounters with Hebrew thinkers.
See Russell, op. cit. (note 38), 25.

⁴ This harkens back to the idea I introduced briefly in the background section, that a re-
turn to Greek thought had become a sort of rallying cry for the antihumanists, that Greek
thinking somehow represented a morality divorced from religion, a philosophy of pleasure-
seeking without guilt. Thereby, if one wished to deconstruct modern thought one would,
logically, seek to return to Greek thought in order to start over. This pleasure-seeking prin-
ciple theoretically reached its culmination among the Epicureans. But Precepts, a melding of
the Pythagorean and Epicurean, points less toward the search for pleasure as one’s driving
force than toward the search for good health. And the physician, as the arbiter of health,
found himself thereby in a priest-like role.

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And in the Παραγγελιαί specifically we have science combined with moral inquiry, creating a hybrid of ‘scientific inquiry’, divorced utterly from religious elements¹. Is this a return to paganism, so to speak? A reaction to the absolutism of monotheism? There is after all the apparent assertion that medicine is a science, that it is knowable, and more, that it is knowable by observation. And this is the progression in thought exemplified by this piece. That is, that scientific thought represents the steady progression of the unveiling of the knowable². One just has to remember to keep one’s eyes open. But again and again in the piece we see that the consequence of not heeding this path is the suffering of one’s fellow humanity. According to our author this is not just an undesirable outcome, this is the undesirable outcome. Generally the rest of the Hippocratic corpus does not proffer such ethical claims, including the Oath. There would seem to be a paradox here: if we equate reason with polytheism, should we not then equate non-reason with monotheism? Such of course has been wrestled with for centuries, but perhaps first addressed in our text, turning the corner on the Greek ‘enlightenment’, especially in the context of a rising new school of thought throughout the Roman empire, that of Christianity. And our author resolves the problem by appropriating the ethic of the ἰητρὸς ἀγαθὸς, the ‘virtuous physician’³. The ideal physician then, as philosopher-scientist, is a product both of his empirical training and his ‘divine self-revelation’⁴; he is motivated by a desire to be ‘good’ as measured against an absolute as yet vaguely defined. Whether he believes all is potentially knowable or not is unknown, but our author, when he states, ‘wherein dwells the love of humanity, therein dwells the love of the art’, implies a willingness to coexist with the as yet unknowable⁵.

¹ Unlike the Oath.
² As opposed to Heidegger’s notion of the continual veiling and unveiling of the essentially unknowable.
⁵ See Martin Heidegger, The Question Concerning Technology, translated by William Lovitt (New York: Harper and Row, 1977), 13, where Heidegger describes the Greek τεχνή as “the
Is this then a violation of rationalism? Full exploration of that question is complicated and the material for another paper. As an introduction to the text I have translated I will assert only that we have here the essence of the ‘virtuous physician’; that is, a philosopher-scientist willing to accept what he cannot know as the exhortation to comport himself with ‘goodness’ in the face of what he can know. Our virtuous physician-philosopher has moved far beyond the absolute proscriptions of the Oath-wielding physician-priest.

6. Conclusion

George Bernard Shaw first said, “If history repeats itself, and the unexpected always happens, how incapable Man must be of learning from experience!”¹ The psychiatrist and historian, Dr. Gregory Zilboorg, in his seminal work, The Medical Man and the Witch During the Renaissance, was the first medical historian to put quotation marks around the hallowed phrase, ‘scientific revolution’². In it he provides a brief, but eloquent, de-

term not only for the activities and skills of the craftsman, but also for the fine arts. Techné is a matter of bringing-forth, poiesis; it is something poetic (...). From earliest times until Plato, the word techné was linked with the term epistéme: both being names for knowing in the broadest sense: to be entirely at home in something, to understand and be expert in it. Such knowing provides an opening, and as such is a revealing (...). Thus what is decisive in techné does not lie at all in making and manipulating, nor in using of means, but rather in the aforementioned revealing. As revealing, not as manufacturing, techné is a bringing-forth”.

² Gregory Zilboorg, The Medical Man and the Witch during the Renaissance (Baltimore: Johns Hopkins University Press, 1935). Dr. Zilboorg, it should be noted, very much a non-reductionist, was using the term ‘biopsychosocial’ in its modern context decades earlier than George Engel.
scription of what he calls ‘the so-called scientific revolution’ and its implications—in 1935—for psychopathology relative to the rest of medical science. Dr. Zilboorg, of course, was referring to the ‘scientific spirit’ of the European Renaissance and Enlightenment, and the rise of Continental Rationalism. How was this particular epoch in Western Civilization different from the Ancient Greek Enlightenment and the rise of Greek Rationalism nearly two thousand years earlier? What we have in both instances is the wholesale tossing aside, one may even say rending asunder, of the formerly prevailing philosophical assumptions, and these as supported by centuries, perhaps millennia, of evidence. Dr. Zilboorg specifically refers to medicine when he says that the prevailing theories were less tossed aside than regarded “as irrelevant and often as non-existent”. To which evidence does he point? As he puts it, “the evidence for witchcraft, demonic possession, the existence of the devil”, that is, the religious evidence. Was this then, as has been claimed with regard to the Greeks, a wholesale refutation of the past that led to spectacular discoveries in the physical sciences? As the Greeks abandoned astrology and divination, so the scientists of the European Enlightenment abandoned alchemy; as Greek rationalism emerged from the interplay of polytheism and monotheism, so European rationalism emerged from the conflict between the new polytheists, the hagiolators of the Roman Catholic Church, and those wishing to return to a hard and firm monotheism, the Protestants.

I would compare Dr. Zilboorg’s relatively ‘minor’ text to the pseudo-Hippocratic text translated as part of this thesis. That is, both are really more like appendices to an era, moral reflections on the consequences of scientific progress that provide an ethical grounding after the revolution. For in the process of rejecting the accumulated knowledge of an era there is the inevitable widening of the divide, of the gulf even, that the Greeks first placed between physical science and psychopathology; that is, between antihumanism and humanism¹. The author of *Precepts* and Dr. Zilboorg both maintain an almost eerie philosophic tone as physician-scientists bearing witness to the ‘progress’ of their age, and the ‘virtuous physician’, whether virtuous through enlightened self-interest or genuine

moral regard, stands yet as the model of the physician-philosopher, this from among the ruins of all the ‘philosophies’ that lie in between.

Heidelberger Totentanz, Death and the Physician (Heinrich Knoblochtzer, Der doten dantz mit figuren, Heidelberg, ca. 1488, f. 6v, particular), Universität Heidelberg – Digitale Bibliothek (http://digi.ub.uni-heidelberg.de/diglit/totentanz1488/0012).