Dear Friends,

We would like your cooperation in expanding our circle of friends.

Today, the whole field of archaeology is at a crossroads. The expanding illicit traffic in antiquities and the plundering of ancient sites make present scientific investigation, recording, and preservation urgent. Greater participation by members of the Institute will enable us to continue our work in the Near East. As we increase our membership, we can also broaden the base of support for our programs and services as well as decrease the proportionate cost of our membership program.

I turn to you because your response to our appeal last year was warm and enthusiastic. We received over 300 names of prospective members and invited them to join the Institute. Of these more than 90 persons became members, a gratifyingly large percentage of those invited.

Would you take the time once again to consider persons who might be interested in joining the Oriental Institute? We would like to invite them especially to become members.

Enclosed is a stamped self-addressed envelope for your convenience.

Thank you very much for your cooperation and assistance.

Sincerely yours,

John A. Brinkman
Director

The Oriental Institute Training Course for volunteer guides will begin Monday, March 4, 1974. Registration can be made by contacting Mrs. David W. Maher, 753-2573 or 753-2471. Members may attend the eight history lectures, given by Institute faculty members, for a fee of $30.00 for materials without any obligation to do volunteer service.
A LOOK AT BABYLONIAN MEDICINE
by Robert D. Biggs

Herodotus, the great historian whose *Histories* include observations on the Near East, was certainly aware of the achievements of the Babylonians in the fields of mathematics and astronomy, and of the debt which Greek mathematics and astronomy owed to their predecessors in the east, but he had a low opinion of Babylonian medical practice. In fact, after describing the Babylonians' wisest custom (that of finding husbands for young women), Herodotus considers their next wisest custom thus: "Having no use for physicians, they carry the sick into the market-place; then those who have been afflicted themselves by the same ill as the sick man's, or seen others in like case, come near and advise him about his disease and comfort him, telling him by what means they have themselves recovered of it or seen others so recover" (Herodotus, *Histories*, I, 197, translation of A. D. Godley, Loeb Classical Library).

Herodotus's opinion of Babylonian medicine went unchallenged until the very end of the nineteenth century A.D., when scholars who had learned the recently deciphered cuneiform script of Babylonia first began to understand the Babylonians' own medical writings. Comprehension posed a formidable challenge since the technical medical vocabulary was virtually unknown and was frequently obscured by abbreviations in Sumerian. Much progress has been made in the past seventy-five years, but there are still many aspects of Babylonian medicine that we fail to understand, not only because of the fragmentary condition of many of the sources, but also because the medical texts themselves sometimes posed problems that were almost as difficult for the Babylonian scribes and scholars as they are for us. A very good example of this was found at Nippur in the last season's excavations: a perfectly preserved medical commentary from the Seleucid period, written by a Babylonian scholar who obviously used all the dictionaries and synonym lists available to him to interpret difficult passages in a text dealing with childbirth and gynecological problems. Despite the limitations of our comprehension, we can understand enough now to say that Herodotus was seriously misinformed. It seems, in fact, that Babylonian medicine was held in some repute centuries before Herodotus since there were Babylonian (as well as Egyptian) physicians at the court of the Hittite kings in Asia Minor.

The written medical tradition goes back to at least 2000 B.C., though most of the known Babylonian medical texts come from the ruins of the library of King Assurbanipal at Nineveh, destroyed in 612 B.C. The texts from Assurbanipal's library reflect a frozen tradition and were probably copied and handed down from one generation of scribes to another, without any indications of modernization except in the spelling. In fact, it seems unlikely that these texts formed the basis for actual medical practice in the time of Assurbanipal. There is not even any evidence that physicians could read them!

The texts are usually staid, dry, and as unexciting as the *Merck Manual* is to a layman. The usual format begins, for example, "If a person suffers from ringing in his ears, moisten a wad of wool with oil and put it into his ears; he may have food and beer; continue the treatment for seven days and he will recover." Various other symptoms are usually given in the subsequent text. Even when the ringing in the ears is attributed to sorcery or to the nefarious activity of a ghost, a purely medicinal treatment is prescribed using, for example, pomegranate juice. We may surmise that physicians were much more successful in treating external ailments of the ears and eyes, and sores on the skin, where the effects of the medication could be observed, than in treating internal ailments.
Impression of a cylinder seal of Ur-Lugal-edin-na. The dedicatory inscription identifies him as a physician. It has been suggested that the items shown on the seal were part of a physician's equipment. From Tello, Iraq. About 2000 B.C. In the Louvre.

In some instances, as Mrs. Edith Ritter (who studied Babylonian medical texts with the late Benno Landsberger) has shown, an ailment was considered to fall outside the competence of a physician. When this occurred, an exorcist (a member of the clergy, as the physician was not) was consulted and an attempt was made to effect a cure through magic. While the physician employed a great variety of curative potions, suppositories, enemas, purgatives, lotions, and bandages, the exorcist attempted to bring about his cures through incantations, prayers, and libations. The fact that the so-called medical texts include instructions for both medical and exorcistic treatments has tended to obscure the fact that the two categories were actually distinct. There seems to have been a certain amount of common sense involved in choosing the kind of practitioner one wished to consult. Ringing of the ears, for example, was normally treated by a physician, whereas hallucinations and forgetfulness were mainly treated by an exorcist. The problem of loss of hair could be treated by either practitioner, as could sexual impotence. In the latter case, the exorcist often appealed to Ishtar, goddess of love, or invoked animals noted for their sexual vigor, such as the wild bull. On the other hand, the physician's prescriptions for curing impotence were, with the exception of including certain parts of male wild animals in the prescription, much like prescriptions for any other illness.

Some diseases were apparently considered incurable and neither a medical nor a magical treatment for them is ever mentioned. One of these is a dreadful skin disease usually thought to be similar to leprosy (evidence for true leprosy, Hansen's bacillus, has never been found in skeletons from the ancient Near East, however). Another is a disease traditionally translated as "dropsy."

While the medical texts themselves were compiled by scholars, probably for scholars, letters give us a glimpse into the lives of actual individuals. From Mari, on the middle Euphrates, come several letters from the early second millennium B.C. which comment on medical matters—treatment of a wound, of an abscessed (?) ear (which two physicians had failed to cure and for which a third physician was being summoned), a physician's order that no one drink from the cup, sit on the chair, or sleep in the bed of a certain woman because her disease was communicable. From Middle Babylonian Nippur (about fourteenth century B.C.) we have a number of letters about medical matters, including a series of frequent reports on the condition of young women in a music academy.

Some light is thrown on Babylonian medicine from other sources as well. The Code of Hammurapi has a section dealing with physicians, detailing the fees to be charged for lancing boils, treating broken bones, and the like. (The fees differed according to the social status of the patient.) The penalties which were imposed for malpractice are also detailed and are not substantially different from those imposed on the negligent builder who builds a house that collapses or on the boatwright whose boat sinks. It is known from documents that Caesarean sections were performed, but only as a last resort to save the infant of a dying woman. Evidence suggests that the operation was performed only on slave-women.

Even if we recover more texts dealing with medicine, and come to understand them more fully, our information will always be incomplete. For example, our knowledge of the medications that were used is very limited. Hundreds of names of plants that were used in medical prescriptions are known, but very few can be plausibly identified. Furthermore, the symptoms described in the texts are often inadequate for diagnosis by a modern physician. It appears, however, that the relatively new field of paleopathology (the study of ancient diseases based on human remains) holds the promise of providing more information on diseases of the Babylonians, information that would be most welcome to those of us who are interested in Babylonian medicine.

Dr. R. D. Biggs is Professor of Assyriology in the Oriental Institute, an Associate Editor of the Chicago Assyrian Dictionary, and the Editor of the Journal of Near Eastern Studies.
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by

Richard A. Parker
Brown University

Sunday, March 10, 1974 3:00 p.m.

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