

ETHNOMEDICINE OF THE MAGICAL PAPYRI

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Abstract

Many aspects of the relations among medicine and religious ideas in late antiquity remain to be explored from a fresh perspective, particularly regarding those ideas classed as so-called "magic." Much of the previous scholarship of these relations was doubly-biased by the ethnocentrism of the Western biomedical model and a traditional societal prejudice against private ritual. The successful application by John Pilch of anthropological concepts and models to the healings in the New Testament showed an ideal way for similar analyses to other texts from the same world. This study is an attempt to apply Pilch's method to the so-called "Magical Papyri" and overcome these biases. In this aim it was successful by showing that these methods do bear out on the papyri. This study proved the fruitfulness of this methodology by succeeding in highlighting a series of symbolic healings among the rituals in the corpus with aspects that under examination appear to have been a complex, powerful, and likely very effective combination of therapy and ritual that was the product of a carefully-developed traditional system. This work takes some first steps towards using the papyri to show how the medical system was related to the religious system to which it was attached in late antique Egyptian society. It shows that Egypt, perhaps unusually among traditional societies, had a class of symbolic healers who operated in the professional sector of the health care system; it thus begins to account for aspects of the healing system or systems represented in the papyri.

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Introduction

This is an investigation of the Greek and Demotic Magical Papyri edited in a new collection by H. D. Betz.¹ The goals of this study are to isolate and analyze medical rituals in this corpus using methods and concepts developed in the fields of medical and Mediterranean anthropology, if possible to uncover the features of a "health care system," after the manner successfully modeled by John Pilch in his analysis of healing in the New Testament. It is earnestly hoped that this study will raise new questions to contribute to ongoing research² into the complex relations between medical and religious ideas and rituals in late antiquity, among different cultural, religious, or social groups, as well as help to delineate more of the social context of the users of the papyri rituals.³

I will follow the lead of the scholars who have been ceaselessly debating the status of "magic" as an interpretive term and a label and will only use it with quotation marks.⁴ I will endeavour everywhere to refer to the ritual practitioners of these instructions not as *magicians* but as *ritualists*, a neutral and descriptive term, if slightly vague and evasive. "Magic" or "magician," if used at all, is meant to convey *emic* self-understanding, and should never be taken to intend an *etic* interpretive meaning.⁵

To speak at all of *ritual* requires definition, and this study will follow Evan M. Zuesse's *Encyclopaedia of Religion* article in understanding "ritual" as "those conscious and voluntary, repetitious and stylized symbolic bodily actions that are centred on cosmic structures and/or sacred presences."

1 Based on the previous collection of Preisendanz with additional materials, including the Demotic corpus. The writer apologizes in advance if material referred to appears unduly mysterious; in order to follow, the reader should have a copy of Betz to consult the references and should be familiar with the material by pre-reading the whole at least once.

2 If only my own.

3 The provenance of these manuscripts can only be specified as the region of Thebes (Luxor-Karnak) in Upper Egypt, and the major part of them came to light over a century ago as they were probably hidden and preserved: through the efforts of a collector.

4 See especially Naomi Janowitz, Rebecca Lesses, Marvin Meyer, and Richard Smith, who all have published recent books, helpful to this study, describing what used to be known as *magic* in terms of *ritual power*.

5 Kenneth L. Pike coined the terms *emic* and *etic* to describe and distinguish respectively the subjective insider and outsider perspectives. These terms are derived from the words phonetic and phonemic in his 1969 article, "Language as Behaviour and Etic and Emic Standpoints for the Description of Behaviour." Pp. 114-31 in *Social Psychology: Reading and Perspective*. E. F. Borgatta, ed. Chicago: Rand-McNally.

(Verbal behaviour such as chant, song, and prayer are of course included in the category of bodily actions.)"⁶ The sub-field of ritual theory⁷ at the intersection of religious studies and anthropology provides concepts to interpret the spells of the papyri as rituals in text form, or as scripts for their performance,⁸ that are distinguishable on the basis of *response*, *imitation*, and *embodiment* from ethical acts (which are marked by *decision* and *choice*). Naomi Janowitz and Rebecca Lesses both bring the tools of ritual theory to bear upon the (largely so-called "magical") textual materials they studied, basing their theoretical approaches to ritual power primarily upon the work of Stanley J. Tambiah, Michael Silverstein, and Richard Parmentier, all noted anthropologists of ritual.⁹ As the present author relies on Janowitz and Lesses for his introduction to the interpretation of ritual texts, these scholars are the basis for the author's approach to ritual in the present study as well.

This study is intended, while adhering closely to the text, to look at the 'health care system' in the world of the papyri as far as it can be determined. Recognizing the challenges of dealing with a culture far removed from that of the contemporary West, this writer is trying to resist biomedical *ethnocentrism*¹⁰ ("*medicocentrism*"), by applying Pilch's adaptations of models from medical anthropology¹¹ to these texts of late antique Egypt as they have already been successfully applied by him and by other biblical scholars as well as by historians of antiquity.¹²

According to Peter Worsley¹³ in a discussion of non-western healthcare systems, what human beings worry most about are good fortune and misfortune, and health or well-being and sickness are only aspects of this dichotomy. In fact, notes Pilch, "outside the Western world, the concepts of health and

6 Evan M. Zuesse, "Ritual," *Encyclopaedia of Religion* V. 12, Pp. 405-422.

7 For an overview, see Ronald L. Grimes' article "Ritual Studies" in *The Encyclopaedia of Religion*, V. 12, Pp. 422-425.

8 The problem of distinguishing these two is unresolved. This author views the spells as scripts referring to the performance of real world embodied actions, and not as rituals-in-text alone.

9 For references to the work of these scholars, please refer to the bibliography. We will also discuss some of the background research to the study at hand in the section "The State of the Question" ahead in Part B.

10 And "temporocentrism," if a more suitable coinage for such a concept does not already exist

11 Pilch, p. 2.

12 Ibid: For biblical, see Pilch, 1991a and 1991b; For antiquity, see Shultenover.

13 Worsley, 1982.

sickness ordinarily include much more than bodily or physical health."¹⁴ The papyri clearly convey such conceptions: the overwhelming majority of the purposive rituals reflect the basic truth that "everyone wants to know how to maintain good fortune and avoid misfortune."¹⁵

According to Pilch and Worsley,¹⁶ since "at a high level of abstraction, misfortune including illness is commonly attributed to some kind of offence against cultural values and social norms," it is "important to know well the cultural values and social norms of a society in order to understand its concepts of illness, health, and healing."¹⁷ This recommendation applies to this study of the papyri of Greco-Roman Egypt. This study begins with a model developed with anthropological and sociological data from Palestinian society of the period, which initially will be accepted as generally representative of late antique East-Mediterranean culture. As we proceed, the background of secondary scholarship will assist in the assertion of Egyptian culture into the model molded initially upon Palestinian culture.

The major advantage of ethnomedical and cross-cultural research is to force biomedical practitioners (and scholars of established fields in classics and biblical studies!) out of narrow professional orientations to expose them to aspects of human health often hidden by the social space and role such practitioners hold in our modern Western culture. This thesis is based upon the hope that medical anthropology can work the same effect for the similarly specialized religious studies scholar; and especially for the researcher of private ritual or "magic," which has also been adversely affected by the constraints and denigrations of both biomedically and religiously ethnocentric perspectives.

In the traditional culture of the papyri it is not possible to separate medicine from the religious system, as we are accustomed to routinely doing in the West. This study chooses to view religion as "a culturally adaptive response to a much wider range of suffering and misfortune, of which," (as the papyri themselves make clear), "human sickness is only a small part."¹⁸

14 Ibid.

15 Ibid. p. 3; See for example PGM IV:2170-75, 1167; VII:496; XII 255; XIII: 800-806; PDM xiv:311-12, 325-56, 333, 386.

16 Worsley, 1982, p. 330

17 Ibid.

A. Methodological Background

This work is most inspired and indebted to the pioneering efforts of John Pilch to apply the conceptual and methodological insights of anthropology (medical and Mediterranean) to the New Testament (NT) healing pericopes.¹⁹ Essentially, this study intends to follow Pilch's lead, and his recommendation, by applying to the medical material in the corpus of the Greek Magical Papyri what he adopted and adapted as instruments applicable to an interpretation of the medical material in the Gospels.²⁰

Both texts do contain special descriptions of illness and healing practices, and in many cases very similar ones, for instance the descriptions of daimonic possessions and exorcisms.²¹ The arguments Pilch persuasively advanced for the value of this type of examination apply equally to other late antique texts (examinations Pilch openly calls for). It is the opinion of this writer that the corpus of the so-called "magical papyri" (henceforward simply referred to as the papyri or shorthand after Betz "PGM" or "PDM"²²) represents an especially rich and potentially rewarding text on which to undertake Pilch's desideratum.

18 Pilch, 2000, p. 35.

19 Indeed, I confess that owing to the constraints of time under which I had to operate, this study follows his example so closely that it risks being somewhat facile.

20 The anthropological, cultural, and historical contexts of the papyri are very close to those of the Gospels: the East Mediterranean of the first centuries C.E. Even if in actual fact the material of the corpus ranges over a longer period (1st C. B.C.E. to 6th C. C.E.), it is internally consistent enough to view it in general as belonging to "late antiquity," and moreover the majority of the corpus seems to date to the second-third centuries C.E., contemporaneous with the final Gospel redactions and touched by the expansion of Christianity.

There are certainly important differences in the cultural and religious contexts of these two bodies of text. The NT is didactic, and edited over time from various compendia to a few harmonized editorial purposes, for the use of communities. On the other hand the papyri are practical instructions, mostly unedited and separate unrelated units having many different purposes, and had probably been composed by, and subsequently collected together for the use of, single individuals.

21 Moreover, the papyri show occasional acquaintance with some of the Gospel healings, and in places (especially exorcisms) bear a certain Christian stamp: PGM IV:1227-64,3007-86; LXXX III1-20; CXXVIII:1-11.

22 Papyrae Graecae Magicae, the Greek Magical Papyri, and Papyrae Demoticae Magicae, the Demotic Magical Papyri.

Introducing Medical Anthropology

The discipline of medical anthropology is one of five sub-disciplines of that field²³ and one of the most highly developed.²⁴ It is also known as *ethnomedicine* by those seeking to further distance it from Western medicocentrism. Others prefer to reserve this latter term for the study of healing rituals, and since this is a study of precisely these, we will follow this nomenclature. This discipline aims at disentangling "closely interwoven natural-environmental, human-biological, and socio-cultural threads forming the behavioral and conceptual network of human responses to the experience of illness."²⁵ These are the aims and ideals guiding the present study of the *papyri*. Specialties in topic and methodology have been developed in this discipline with these aims in focus. Pilch presents a sample demonstrating the richness of medical anthropological sub-disciplines as reproduced in the following table:²⁶

Biomedical Studies Of Adaptation	Ethnomedical Studies of Health and Healing	Social Problems and Interventions
Genetics and disease	<u>Culture-bound syndromes</u>	<u>Mental health</u>
Medical ecology	<u>Folk therapies</u>	Clinical anthropology
Evolution of diseases	<u>Healing roles</u>	Addictions
Social epidemiology	Medical pluralism	Family violence
Nutrition	Ethnopharmacology	Birth studies
Demography	Ethnoscience	Disabilities
Paleopathology	Midwifery	Public health
Stress and disease	Shamanism	International health

Table 1. Sub-Disciplines of Medical Anthropology

Based upon the author's reading of the text, the boldfaced sub-disciplines indicate those for which the *papyri* demonstrate material that relates to or at least touches upon, while the underlined ones are those for which the material is richest and most fruitful to especially concentrate upon.

23 Pilch, 2000, p. 20, citing McElroy and Townsend, 1989, Pp. 13-17.

24 Ibid, p. 21.

25 Ibid, p. 21, citing Unshuld, 1988:179.

26 Ibid, p. 22, Table 2.1: Sub-fields of Medical Anthropology," cited from McElroy and Townsend 1989, 17.27 Ibid, p. 22, citing Kleinman, 1980: 18; 28.

The challenge of medical anthropology is to overcome Western medicocentrism by liberating itself from biomedical ideology in order to take the therapies of other healing systems into account - variously conceived as ancient, primitive, non-Western, folk, popular, and modern.²⁷ The papyri embody one (or even several) of such healing systems of alternative therapies, which have yet to be fully accounted.

Medical anthropology offers a fresh approach to studies such as this, that intend to investigate and write about sickness and healing across cultures. Of the three ways that Kleinman,²⁸ the preeminent spokesman for the discipline, lists this can be done, the best and most appropriate for this study is to "develop an evolving conceptual system centered upon the social and experiential peculiarities of sickness and healing." Luckily for this study, John Pilch laid most of the groundwork in this way for it in his study of the Gospel healings, though ongoing modifications will be required to fit it to the papyri.

In this enterprise of developing and advancing a particular ethnomedical paradigm, the task is to construct an "autonomous theoretical frame" maximally suited to the description and interpretation of a culturally unique pattern of human experiences of health, sickness, and healing.²⁹ The two equally important areas of healing to keep in mind are *efficacy* and *meaning*. Both refer to treatment outcome, but whereas the former term is empirical and dear to the biomedical perspective, it is the latter that comprises the hermeneutic dimension of healing and is of especial interest to medical anthropology. The papyri have their own peculiar ways of speaking about both efficacy and meaning.

²⁸ Ibid, pp. 22-23, citing Kleinman, 1988.

²⁹ Ibid. p. 23, (paraphr.) citing from Kleinman, 1980: 377.

Methodological Apparatus: Defining the Concepts and Models to Apply

Basic Terms and Definitions:³⁰

Ritual: Conscious and voluntary, repetitious and stylized symbolic bodily actions that are centred on cosmic structures and/or sacred presences; Such actions include verbal behaviour such as chant, song, and prayer.³¹

Health: "A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity" (World Health Organization).

Sickness: A blanket term used to label real human experiences of disease and/or illness.

Disease: An explanatory biomedical concept describing abnormalities in the structure and/or function of human organs and organ systems, including pathological states even if not culturally recognized. Operates by attempting to correlate constellations of signs and symptoms for the purpose of explanation, prediction, and control - using the jargon *diagnoses*, *prognoses*, and *therapy* - concepts leading into the field of power and politics.

Illness: An explanatory concept that describes the human perception, experience, and interpretation of certain socially disvalued states including but not limited to disease. It is both a personal and a social reality and thus in large part a cultural construct. Culture dictates what to perceive, value, and express, and then how to live with illness.

Curing: The anticipated outcome relative to *disease*. The attempt to take effective control of disordered biological and/or psychological processes.

Healing: The anticipated outcome relative to *illness*. The attempt to provide personal and social meaning for the life problems caused by sickness.

An expanded definition of healing has it as "a process by which (a) disease and certain other worrisome circumstances are made into illness (a cultural construction and therefore meaningful), and (b) the sufferer gains a degree of satisfaction through the reduction, or even the elimination of the psychological, sensory, and experiential oppressiveness engendered by his medical circumstances."³²

Placebo: A wholesome meaning created by the sick person from semantic and symbolic meanings during a process of healing. An inert or intrinsically innocuous item prescribed more for the mental relief of the patient than for

30 Many of these definitions are paraphrases from Pilch, p. 24.

31 Evan M. Zuesse, "Ritual," *Encyclopaedia of Religion* V. 12, Pp. 405-422.

32 Kleinman 1980: 265, cited in Pilch, pp. 13-14.

its actual effect on the disorder. The item is effective because of the patient's belief system.

Nocebo: The opposite: a noxious meaning created by the sick person in the same manner, during a failure of health. An inert or intrinsically innocuous item that can and does cause real damage.³³

Mediocentrism: A species of ethnocentrism that chooses to view texts about sickness and healing from other cultures and times in a Western biomedical perspective.

Folk-Conceptualized Disorders or Culture-Bound Syndromes: Culturally-constructed illnesses unique to a society.

Therapy: A treatment designed to bring about rehabilitation or social readjustment.

Therapist: Anyone who is recognized as capable of helping in health misfortune.

Value orientation: A concept defined by Kluckhohn and Strodtbeck in their model as a "generalized and organized conception, influencing behaviour, of nature, man's [sic] place in it, of man's relation to man, and of the desirable and non-desirable as they relate to human-environment and human-human relations... like values, they vary on a continuum from the explicit to the implicit."³⁴ Theoretical assumptions support this model, and it is necessary to explain them. According to Pilch:³⁵

1) There are only a limited number of common human problems for which all peoples in all places must find a solution. 2) Possible solutions are neither limitless nor random; there are three. 3) All solutions, including their variants and alternatives, are present in varying degrees within the total cultural structure of every society. Though one solution dominates, the other solutions are also available.

With regard to the first assumption, five common problems and their range of solutions experienced in each culture can be presented in a table (below). With regard to the second assumption, the range of solutions available to each problem in a given culture is listed to the right of the problem. With regard

33 Pilch, 2000, p. 157. He also adds, "In some forms of witchcraft, sticking pins in a doll or an image of a person one wants to harm can indeed cause harm if both people share that belief system." There are two spells in the papyri that describe how to do just this! (PGM IV:321-329, XXIVb:1-15). Moreover, an actual figure with pins was discovered from the period, and is reproduced on the cover of *Magika Hiera* by Faraone and Obbink (1991. New York: Oxford U. Press).

34 Quoting Papajohn and Spiegel, in their report of clinical applications of this model. 1975, p. 20.

35 Ibid, pp. 3-4.

to the third assumption, while each culture selects one of the three solutions as primary, the other two are also available as second and third choices either for different circumstances or for different subgroups within the same culture.

<u>Problem</u>	<u>Range of Solutions</u>			.
Principal Mode of Human Activity	Being	Being-in-becoming	Doing	
Interpersonal Relationships	Collateral	Lineal	Individual	
Time Orientation	Present	Past	Future	
Relationship of Humans to Nature	Be subject to it	Live in harmony with it	Master it	
View of Human Nature	Mixture of good and evil	Evil	Good	

Table 2. Value Orientation Chart

These concepts are very useful in comparative *ethnomedicine*. Our Western culture of healthcare faces the same personal problems as any other, but whereas we tend to emphasize the solutions in the extreme right hand column, non-Western and ancient societies like the Hellenistic-Roman Egypt of the papyri generally tend more to the right hand and center columns for their solution orientations.

The Health Care System: This is a scholarly construct describing a collective view and shared pattern of usage in societies. As these operate at a local level, the system will be seen and used differently by different social groups and individuals. A general structural model of a health care system proposed by Kleinman as useful for analyzing any society or culture looks like this:

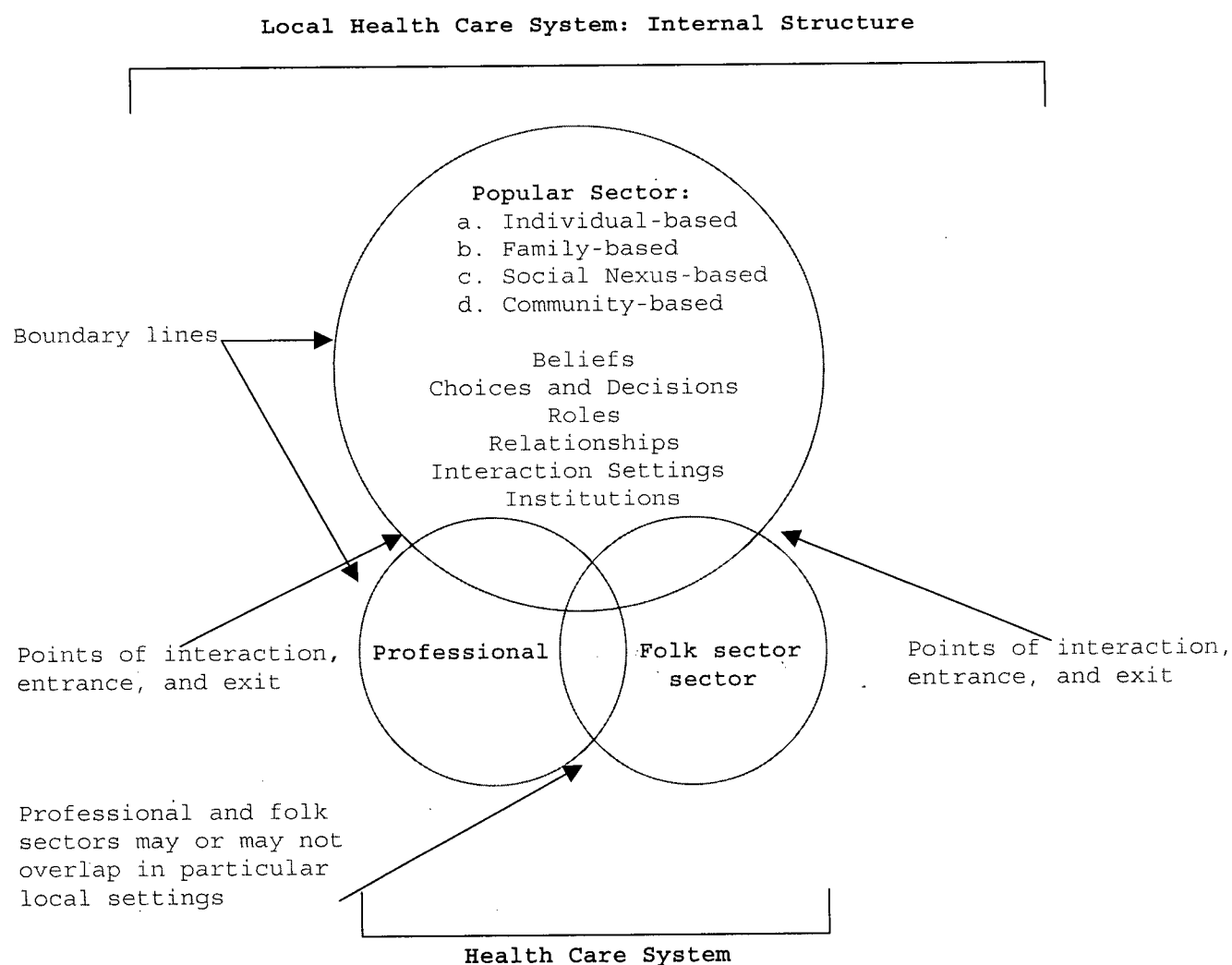


Figure 1.: The Health Care System³⁶

³⁶ From Kleinman 1980, p. 50; As adapted by Pilch, 1985, p. 144, and 2000, p. 26

Healing is produced by the whole system and not just by the healer.³⁷ Investigators of healing must thus consider both micro and macro-analyses to look at how small-scale events within the three sectors of a healing system might relate to large-scale social structure and process.³⁸

Deducing the beliefs about the causes of illness and how to treat illness will be assisted by a consideration of the element of power and the search for knowledge of the chief sources of power in a culture: whether political, social, mythological, religious, technological, or others.³⁹ A concern for several sources of power is evident in the papyri (see below).

Core Clinical Functions: These are five major functions of health care systems that work together to construct and define health and illness.⁴⁰ Together, they provide a "comprehensive basis for understanding healing and health care in any given culture and allow for more appropriate cross-cultural comparisons."⁴¹ They need to be defined before looking at them in the papyri:

1) **Cultural hierarchies of health values:** A society organizes the health values, which individuals internalize during socialization, into a hierarchy. It finds expression in *semantic illness networks*, which tend to cluster a variety of values, concepts, and experiences. The core values in the Mediterranean world to attend to have been shown to include honour and shame, gender-based social division, client-patron relations, belief in spirits, attitudes toward pain, and many other concepts and values.⁴² The task at hand will be helped by a search for semantic illness networks in the papyri to uncover these concepts and values and delineate their hierarchy.

2) **Experience of illness:** Culture defines illness, dictating "what to perceive, value, express, and how to live with illness," while also playing "a significant role in symptom formation, as well as the various

37 Ibid, p. 26, citing Kleinman, 1980, p. 72.

38 Ibid, Op. Cit.

39 Ibid, citing the proposal of Glick, 1967.

40 Ibid, p. 27, citing Kleinman, 1978, p. 417.

41 Ibid, p. 29.

42 Ibid, 27, citing Pilch, 1992a and b; Murdock, 1980; Saler, 1977; Zborowski, 1969; Zola, 1966.

psycho-physiological processes in, and reactions to, illness."⁴³ The greatest contribution of culture to the illness experience is the meaning given it. Being that "the experience can be acknowledged and recognized as something specific that charts the initial path toward and appropriate response,"⁴⁴ the experience of illness marks the first stage of healing.

3) **Cognitive response: ordering illness by means of labeling, classifying, and explaining:** General criteria are established in cultures for guiding therapeutic processes and for evaluating outcomes. "Structures of relevance"⁴⁵ are created to this end: evaluating the experience as major or minor, important or negligible. Determining a response involves knowing "the hierarchies of resort": family, friends, the village, the herbalist, the prophet, the professional, etc."⁴⁶ Some aspects of this hierarchy are apparent in the papyri; others are not.

Based on the work of Mary Douglas (1970), (who showed that illness and its consequences are disruptive social-communal events threatening essential values, behavioural norms, and conceptions of order), the therapeutic process can be reconceived as an attempt to restore order "by placing the threat in its proper framework, controlling the disruptive effect on the sick person and that person's network, and making the entire experience personally and socially meaningful."⁴⁷ The aim here is therefore to look for corresponding elements, and the material is rich. As we will see, the papyri do place threats into frameworks of meaning, especially by means of myth and exorcisms to control the disruptive effects.

Further exploration requires one to investigate explanatory models differing person to person. Cognitive responses to sickness and misfortune form the core of symbolic healing (see below).

4) **Healing activities:** As healing occurs across the entire system and in each of these five functions, "one must consider individual healing

43 Ibid. Pp. 27-28, citing Pilch, 1988b.

44 Ibid.

45 Ibid. p. 28.

46 Ibid. citing Piliusk and Parks, 1986; Romaniucci-Ross, 1969.

47 Ibid. p. 28.

practices within the total context of the system and indeed of society."⁴⁸ Important as demonstrable efficacy may be, healing entails much more than that.⁴⁹ There is a range of strategies in healing and preventive activities, from empirical remedies⁵⁰ and technological interventions to symbolic therapies like the placebo.⁵¹

5) *Potential outcomes: managing cure or treatment failure, recurrence or chronic illness, permanent impairment, and death*: Health care often overlaps with religion and other cultural systems, especially as regards the noted point that "much of traditional health care is dedicated to preparing for death and making the experience of dying meaningful."⁵² We cannot ignore this aspect of the papyri, with their emphasis on the underworld powers of death, and also their connection with a heritage of Egyptian priestly embalming traditions for afterlife preparation. While Pilch is right to also note that, "in the entire process, of course, constructing a meaningful life is equally important,"⁵³ it is questionable whether the distinctions between life and death that we use today can be applied to the Greco-Roman Egypt of the papyri.

Explanatory Models: These are formally structured coherent accounts of reality that attempt to understand illness and treatment. A reading of the papyri to understand their healthcare system will seek to locate instances of EMs in the texts, keeping in mind that they are typically mutable, ambiguous or even contradictory and rationally inconsistent (everyone, no matter their culture, has multiple belief systems to turn to in a crisis). EMs comprise notions about "an episode of sickness and its treatment that are employed by everyone involved in the process (the sick person, family, friends, village healers)."

A healing ritual typical of the papyri is meant to be representative of one such episode, as a template for a typical type encountered. But in the papyri, the involved parties are conspicuously absent, with the exception of the ritualist-healer and the hypothetical patient-client. EMs are not isolated from larger cognitive structures but are embedded in them and

48 Ibid.

49 Ibid. Citing Frank, 1974.

50 Ibid. Citing Van der Geest and Whyte, 1988.

51 Ibid. Citing Moerman, 1983; and Dow, 1986.

52 Ibid.

anchored to the particular cultural and structural arrangements that have been identified above as the health care system sectors and sub-sectors.

Of great import to the medical anthropologist is not only grasping and understanding the EMs but also observing the interaction (see *Transaction* below) between sick persons and healers. This interaction is the central component of health care. One can learn about such interaction by exploring and recording the EMs involved. This then, is another goal to bear in mind while reading the PGM. EMs are structurally broken down into five questions that they seek to explain relative to each illness episode:⁵⁴

1. aetiology
2. time and onset of symptoms
3. pathophysiology
4. course of sickness, including the degree of severity and the type of sick role
5. treatment

"Whereas the healer's EM is concerned with all five questions, those of the family and sick individual usually answer only salient questions". In the papyri however, we only really have access to the healer's perspective. Contrasting professional and lay EMs, we are told that it is the latter that ordinarily disclose the significance of a given health problem for the patient and the family, along with their treatment goals.⁵⁵ One of the goals of this study is to determine whether the ritualists of the papyri are professionals, lay specialists, or folk therapists.⁵⁶ To review all the information about the EMs of everyone involved in a particular illness episode would be desirable and helpful to an investigator, but with the papyri this is just not possible. It is necessary also to realize that "efficacy always involves both symptom reduction and restoration of meaning to life."⁵⁷ Yet, the papyri almost never recount actual episodes; rather they

53 Ibid. 28-29.

54 Ibid. p. 29, citing Kleinman 1980, p. 105.

55 Ibid.

56 Keeping in mind that more than one type may be represented in the corpus.

57 Ibid.

present templates for typical or possible episodes, and hence they have only the one-sided perspective of the ritualist.⁵⁸

Transaction: This refers to the interaction with the healer. Despite being one of the most critical aspects of our investigation, this is also most difficult to extract from the rituals of the papyri. "All transactions between the sick person and the healer(s) should be considered hermeneutic,"⁵⁹ the interaction itself being made up of symbolic and semiotic interpretations in terms of "very particular interpretive schemata,"⁶⁰ which are themselves established in a particular healing transaction by the combined EMs of all actors. "The sick person and the healer are best understood as engaging in the interpretation of the context of the encounter, which is itself symbolic, and of the symbolic forms that are manipulated by the other during the encounter."⁶¹

Not everything of this comes through clearly in the papyri, but this last aspect is most richly attested: the rituals are themselves largely such *manipulations of symbolic forms* by the ritualist for the client. The rituals are guides to how this is done, and are made up at times almost entirely of symbols, which "include words, acts, events, and gestures."⁶² The ritual encounter typical of the papyri "spells" is recognizable as one distinct kind of encounter, but the effort at hand is to locate and define as far as possible another distinct kind of encounter within that type: the healing encounter. Specific healing encounters are "either a new form of interaction or a repetition of a previously known form of encounter." For the most part, the encounters indicated in the papyri are of the latter sort, simply because they are prescriptive (and also often explicitly empirical): "for this situation, you do this - because it works." What medical anthropology most stresses about the healing encounter is that it "produces *understanding* rather than new knowledge or explanation."⁶³

58 They are not accounts with many characters as are the stories in the Gospels and Acts. This may make the investigation easier, but perhaps also more difficult to argue from.

59 Ibid. Citing Good and Good, 1981; and citing Pilch, 1988b. If this is so, then this study is an hermeneutic of hermeneutics.

60 Ibid.

61 Ibid. p 30

62 Ibid.

63 Ibid. p. 31, citing Gaines, 1982, p. 244

Symbolic Healing: This concept includes religious healing, shamanism, and Western psychotherapy among its variants.⁶⁴ The specialty of the symbolic healer is in *mediating culture*, and this is accomplished and understood by attending to the *metaphorical structure* of the given culture. For healing, Pilch puts the metaphorical structure of culture on the same level of decisiveness for health outcome as physiological or pharmacological elements,⁶⁵ which to many in the biomedical paradigm will sound extraordinary. There are four essential processes comprising stages of symbolic healing and necessary for its accomplishment, which must be examined:

Stage 1. **Symbolic Bridge:** Establishing a link between personal experience, social relations, and cultural meanings. Systems of symbolic healing are all based on models of experiential reality termed the *mythic world*, which either derives from society's shared meaning or from initiation into a particular system of healing operating as a subculture. The mythic world contains experiential, rather than empirical, knowledge.⁶⁶ In constructing a symbolic bridge together, the healer and sick person reach agreement "to particularize a segment of the cultural mythic world for use in a particular case of symbolic healing."⁶⁷ The mythic world supplies the symbols necessary to connect the social system to the self-system of the sick person. For example, the first formulaic recitation in a papyri healing often recapitulates a mythic event that relates to the problem - such as the story of Isis seeking to mend and resurrect the dismembered Osiris (VII: 1000-1005; xiv: 10).

Stage 2. **Relating the Sick Person to the Mythic World:** The healer endeavours to do this by persuading the sick person that their illness experience can be related to some part of the mythic world, through an activation of symbolic connections. This activation is often accomplished in the papyri by the recitation of words of power and secret names. In this stage the participants in the healing transaction are often identified with mythic deities in the papyri as direct participants in the symbolic verbal reenactment (we shall look at this below).

64 Ibid. p. 32, citing Dow, 1986, p. 56; and Moerman, 1983; and Kleinman, 1988, p. 131.

65 Ibid. p. 32.

66 With regard to mental illness and consciousness states there is no way to tell the difference.

Stage 3. **Transactional Symbols:** These are mediating symbols often employed by a healer as particularized forms of the general meaning system. The healer uses them to guide the emotional reactions of the sick person undergoing therapeutic change. All participants in the healing process "share mutual experiences that name and shape the clinical reality, that is, the illness."⁶⁸ From this base, the healer can generalize the personal experience (the written "spells" are such generalizations) into the therapeutic meaning system (in our case embodied in a "magical" handbook), and thereby enable the sick person to particularize personal experience out of such symbolic meaning.

Stage 4. **Confirmation:** When the transformation of the particularized symbolic meaning has taken place, the healer pronounces it an accomplished fact by a symbolic act of confirmation. A common example from the papyri is an exorcism followed by attaching a prophylactic amulet to keep the daimon from returning. "In anthropological terms, the healing interaction fosters this transformation as a work of culture, the making over of psychophysiological process into meaningful experience and the affirmation of success."⁶⁹

Kleinman has designed another comparative model to examine symbolic healing systems; the following outline is a key-point summary of it. Following it will help this study in re-readings of the papyri materials, as it succinctly organizes a list of the many unknowns to watch for. Pilch recommends it for analyzing healing interactions in the first century era Mediterranean world (with the standard constructive procedure of modifying and fine tuning it appropriately):

67 Ibid. citing Dow, 1986, p. 61.

68 Ibid. p. 33.

69 Kleinman, 1988, p 134. Cited in Pilch, 2000, p. 33.

Summary Model for Examining Symbolic Healing Systems:

1. Setting: folk, popular, or professional
2. Characteristics of the interaction:
 - a. Number of participants
 - b. Time character: episodic or continuous, brief or lengthy
 - c. Quality of relationship: formal or informal, authoritarian or dyadic
3. Characteristics of the healer:
 - a. Personality
 - b. Training
 - c. Type of practice
4. Idioms of communication:
 - a. Mode: somatic, religious, moral, social
 - b. Code: nonverbal, verbal, special semiotic system
 - c. EM of a particular illness episode - for example, shared, conflicting, open, tacit, etc.
 - d. Rhetorical devices for narratizing illness and negotiating treatment.
 - e. Interpretation
5. Clinical reality: sacred, secular, disease or illness oriented, focus of treatment (sick person, family, etc.), symbolic and /or instrumental interventions, etc.
6. Therapeutic stages and mechanisms: process, mechanisms of change catharsis, confession, altered state of consciousness, etc.)
7. Extra-therapeutic aspects: social control, political implications, etc.

N.B.* It may be useful to mark or separate this page for reference.

Efficacy: This is "the perceived capacity of a given practice to affect sickness in some desirable way,"⁷⁰ but can mean a range of things "from total symptom reduction to some physical sign, like fever, vomiting, or the like, which can be interpreted as a required proximate effect indicating that the ultimate anticipated outcome is on the way."⁷¹ Medical anthropology views curing as efficacious when biomedical changes take place, but healing as efficacious "when the people who seek it say it is;"⁷² an *etic/emic* distinction.

In evaluating efficacy it is crucial to understand the cultural expectations and the biological outcomes at various stages of the therapeutic processes, because efficacy is always a cultural construct.⁷³ Healing is effective "when the bonds between the sick individual and the group, weakened by disease, are strengthened, social values reaffirmed, and the notion of social order no longer threatened by illness and death."⁷⁴ But healing is also effective if it makes an individual's experience of illness meaningful, shares personal suffering, and transforms the marginal situation of sickness by a re-incorporation of the individual into the social body, whether in health or even death.

70 Young, 1982, p. 277.

71 Etkin 1988, pp. 301-2, cited in Pilch, 2000, p. 34.

72 Pilch, 2000, p. 34.

73 Ibid, citing Kleinman, 1974a, p. 210.

74 Ibid.

B. Analysis of the Healthcare System in the Papyri

Background Scholarship and the State of the Question

In this section I will comment on the most relevant background secondary scholarship bearing upon this study, (leaving aside medical anthropology research which is already being attended to). It falls into several categories. For medical history studies, there are those treating ancient Egyptian medicine, Hellenistic medicine, or general studies of the relationships between religion and medicine in ancient societies. Another body of scholarship looks at the social-cultural and intellectual changes taking place in late antiquity, a subset of which concentrates on Egyptian history before and during the period of the papyri. Studies of Egyptian and Greek religion are required to contextualize the religious milieu in this time of rapid change and syncretism. Lastly, there are a few important studies that treat aspects of the papyri or of more general late antique rituals of power. All of these are listed in the bibliography.

In the history of medicine, there are many books and studies of Egyptian medicine, but all of them deal almost entirely with the pharaonic period. Still, they are very useful in revealing a major source of the papyri in the indigenous tradition to help contextualize them. These works include essential overviews such as La medicine Egyptienne au temps des Pharaons by A. P. Lega, which includes an interesting discussion in chapter IV, "Magie, Religion, Medecine," (pp. 57-103); John F. Nunn's Ancient Egyptian Medicine is also good for his contextualization of healers and his discussions of the medical papyri as "textbooks" and the *per ankh* "house of life" as a "medical school". (p. 131). Of especial relevance is chapter 5 "Magic and Religion in Medicine," (pp. 96-113) in which he discusses the therapeutic value of magic (p. 97), and chapter 6 "The Healers," (pp. 113-136). Paul Ghaliounghui is another authority, whose The House of Life: Magic and Medical Science in Ancient Egypt offers similarly enlightening discussions in chapter 2, "Magic and Sacerdotal Medicine" (pp. 13-26) and chapter 6, "The Healers" (pp. 63-79). All of these and similar works suggest that the papyri were grounded in ancient traditions in which healers were specialists with sometimes multiple qualifications, practicing multiple types of medicine, closely associated with the priesthood or sometimes even priests themselves, who passed their knowledge and careers on to their offspring. The debate, unresolved, among

these scholars⁷⁵ between viewing the *per ankh* as a "medical school" or as a "scriptorium" is most apposite to the similar challenge to interpret the precise original context of the papyri.

Hellenistic medicine, which includes Greek and Roman Medicine, is well-served by a long history of scholarship. General background works consulted in the preparation of this study include Benjamin Lee Gordon's Medicine Throughout Antiquity; James Sands Elliott's Outlines of Greek and Roman Medicine; John Scarborough's Roman Medicine; E. D. Phillips' Aspects of Greek medicine; and Ralph Jackson's Doctors and Diseases in the Roman Empire. There are others, but each of the above include relevant chapters on the important role of the Alexandrian medical schools in Ptolemaic Egypt and discussions of the religious interactions and manifestations of the Hellenistic medical tradition. These bear on this study by demonstrating the close interest that Hellenistic healers had with ritual and symbolic healing techniques in both their own and in foreign cultures, especially but not only concerning healing cults at temple sanctuaries.

For Graeco-Egyptian religious ideas in Late Antiquity, Garth Fowden's The Egyptian Hermes: A Historical Approach to the Late Pagan Mind is truly inspiring in its effort to explain the intellectual aspects of a long tradition of cultural interaction. C. Jacq provides a sensitive introduction to traditional Egyptian religion as "magic," and includes a chapter on medicine, in his Egyptian Magic. Peter Brown's Making of Late Antiquity and Jonathan Z. Smith's Map is not Territory are both valuable providers of general religious climatic information for the period and region in general to which the present author is indebted for awareness of major forces and trends.

Studies that treat aspects of the papyri or of more general late antique rituals of power or of "magic" include works like Magic and Magicians in the Greco-Roman World by Matthew W. Dickie, which discusses the place of "magicians" in society; Paul Mirecki and Marvin Meyer have edited two collections of essays, Ancient Magic and Ritual Power and Magic and Ritual in

⁷⁵ Strouhal (1992) and Reeves (1992) both argue for a view that doctors received training in the *per ankh* "house of life," suggesting that it was a place analogous to both modern medical schools and to those of Greece and Alexandria. Gardiner, (1938), on the other hand, concluded that the *per ankh* was neither a school nor a university

the Ancient World, containing studies especially relevant to the one attempted here: in the former volume Roy Kotansky examines "An Early Christian Gold Lamella for Headache" (pp. 37-46), Sarah Iles Johnston examines "Sacrifice in the Greek Magical Papyri" (pp. 344-358), and Lynn R. LiDonnici in "Beans, Fleawort, and the Blood of a Hamadryas Baboon: Recipe Ingredients in Greco-Roman Magical Materials" (pp. 359-377), identifies and classifies many of the *materia medica* of the healing rituals. In the second volume, Roy Kotansky looks again at "Greek Exorcistic Amulets" (pp. 243-278), Leda Jean Ciruolo examines "Supernatural Assistants in the Greek Magical Papyri" (pp. 279-296), and David Martinez focuses on the afflicting love rituals in "'May she neither eat nor drink:' Love Magic and Vows of Abstinence" (pp. 335-360). Peter Schafer and Hans G. Kippenberg edited Envisioning Magic, which contains useful essays on aspects of the papyri: H. D. Betz, "Jewish Magic in the Greek Magical Papyri" (pp. 45-64), Richard Gordon's "Reporting the Marvellous: Private Divination in the Greek Magical Papyri" (pp. 64-92), Fritz Graf's "How to Cope with a Difficult Life: A View of Ancient Magic" (pp. 93-114), and especially David Frankfurter's "Ritual Expertise in Roman Egypt and the Problem of the Category 'Magician'" (pp. 115-136), which looks at the PGM as a collection of discrete text-books and argues for a contextual reconstruction of the magicians as priests who functioned as local all-purpose ritual specialists.

Other works of this type that were consulted in the preparation of this paper include: Magika Hiera, a collection of essays edited by Christopher Faraone and Dirk Obbink, which includes John Scarborough's look at the *materia medica* in the papyri, "The Pharmacology of Sacred Plants, Herbs, and Roots" (pp. 138-174), and H. D. Betz's "Magic and Mystery in the Greek Magical Papyri" (pp. 244-259). In another collection of essays, Magic and Divination in the Ancient World, edited by Leda Ciruolo and Jonathan Seidel, Anitra Bingham Kolenkow examines "Persons of Power and Their Communities" (pp. 137-144), in an interesting attempt to recover the social context of ritual practice. Christopher Faraone's book Ancient Greek Love Magic examines the affliction spells of the papyri. The World of Ancient Magic contains useful discussions of theory, and another helpful article contextualizing the ritualist/scribe by Matthew Dickie, "The Learned Magician and the Collection and Transmission of Magical Lore" (pp. 163-194). Most helpful were the

but rather a scriptorium where books connected with religion and cognate matters were compiled. See John Nunn for discussion of this debate.

aforementioned texts by Naomi Janowitz, Icons of Power, and Rebecca Lesses, Ritual Practices to Gain Power, both of which bring together ritual theory to powerfully reinterpret late antique ritual acts from many religious traditions.

This foregoing material is of assistance in the reading of these texts, especially in the ongoing effort to contextualize the magician-healers of the papyri. Several of the studies that discuss social context look to the healing role of the ritualist as a powerful interpretive anchor. However, as can be seen, very few deal with the healing aspects of the papyri as the central topic of concern - these have rather a very limited focus upon single aspects such as the *materia medica*/pharmacology.

In sum, the state of the question in respect of key ideas of this paper sketches out features of the surrounding landscape, but has less than one would hope to offer directly to the challenge of the question at hand.⁷⁶ And none of them apply medical anthropology to the text in the manner attempted here.

Secondary scholarship can situate the papyri in a late and declining period of temple scribes holding on to what they can, of folk medical practice attached to ancient lineages of priestly authority; in an Egyptian society that in this period was losing its religious culture in the urban centres but retaining it - for a time - in the peripheral townships. In the larger world forces sweeping over the urban centres and surrounding areas, the shift in worldview and religious outlook from "locative" temple traditions was taking place as it was in the rest of Roman east to a "utopian" and rootless religiosity emphasizing the power of charismatic individuals.⁷⁷ In upper-Egypt, it is suggested in the literature that there was a more gradual change that allowed the traditional cultural institution of the village ritual specialist and healer to adjust to the changes coming, to become more mobile, and eventually to make the transition to the monastery.⁷⁸

⁷⁶ Guy Stroumsa suggested this topic to me as a thesis because he thought it to be understudied.

⁷⁷ Concepts coined by J. Z. Smith.

⁷⁸ Unfortunately I cannot include a reading of Egyptian Christian materials as well at this point, although the richness of what is available would probably give a great light to shine on the situation of the papyri which was so near in time and content to Coptic Christian ritual papyri.

The importance in Hellenistic medical history of the Alexandrian medical schools in Ptolemaic Egypt is well-known, as is the persistent but ambiguous religious interactions and manifestations of the Hellenistic medical tradition throughout late antiquity, which allows us to speculate about contact in Egypt between Greek physicians perhaps interested to learn from Egyptian ritual healers, or vice versa. It is also known that the papyri are grounded somehow in an ancient cultural tradition of specialization in which healers could be qualified to practice several different types of medicine, even as priests specialized in different types of ritual; that healers were closely associated with the priesthood or sometimes even priests themselves; and that they passed their occupations on to their children. The interesting unresolved debate whether the *per ankh* was a "medical school" or as a "scriptorium" shows that the acute problem of interpreting the papyri as products of a textual tradition or of a practical healing tradition is also a chronic problem.

Text-Critical Issues: Cautionary Reservations, a Disclaimer

The papyri are not a unified text but rather represent an assembled collection of fragments in various stages of editorial redaction.⁷⁹ But the papyri are not merely lately assembled fragments of separate "spells" conceived as a scholarly project; among them are whole "handbooks" which display at times patterns of certain order and an editorial intention, particularly where medical materials and healing are concerned. It is even possible that most of the fragments come from such handbooks as well.⁸⁰

Moreover, the Betz edition is a compendium of English translations made by disparate scholars from the Homeric and Koine Greek, Demotic, and Coptic,

79 As a comparative aside, the papyri are not as unified a text as the NT or even the separate gospels are, but rather represent an assembled collection of fragments which could compare to an early stage in the well studied process of NT redaction (with appropriate reservations about imputing such an evolutionist theory on texts in general).

80 Furthermore, as such, the papyri are comparable in NT terms to the hypothetical pre-Gospel source materials (aretologies, parable books, and so on), which considerably lessens the distance between the texts as comparable entities. In fact, since the papyri are so 'unedited' and hence, immediate, they represent a snapshot of practice that we mostly lack for the earliest Christian textual strata, and lack almost absolutely in early rabbinic strata. As a neophyte, this writer is thankful that as such, the material to hand is not burdened with the same degree of critical problems faced by the scholar of Jewish magic trying to unravel the rabbinic texts.

and a few scraps of other languages. It is unfortunately not a critical edition with parallel text in the original, and gives very little discussion to the particular word choices of the translators, which cannot have been standardized to all the material, and do not often render number or gender specifications in the translation of pronouns. Although the writer is not fluent in any of these languages, a dictionary and a grammar can go a long way to entering into the possibilities of meaning that are unavailable when presented with English alone.

Healing in its cultural context

Appropriate therapies in different cultures vary as the definitions of health and sickness vary. In contemporary western culture, the focus on disease drives therapy in an aetiological direction: toward a cure. Medical Anthropology tells us that in non-scientifically oriented cultures, therapies are rather *symptomatic*, (aimed at alleviating or managing the symptoms). Pilch describes how this becomes a process of creating new meaning for the sufferer, (and that the healing activity of Jesus in the NT was only of this kind). In the papyri, we see indications of symptomatic healing similar to that of Jesus,⁸¹ with similar daimonic aetiological theories,⁸² but some therapies also possibly reflect a type of disease theory⁸³ (though not strictly biomedical). In most cases, the therapy is nameable as *healing*, but in some it must include *curing* also, as defined above.

Those therapies in the papyri that do not fit the NT model refer sometimes to physical remedies and afflictions and to empirical "testing," and maintain distinctions between the physical remedy (cure) and the

81 Take, for example, the many amulets that ask for fevers and headaches to be taken away, especially PGM XCIV:39-60, "...to you I speak, pounding headache; don't throb, don't rage, don't shake the teeth, don't produce mucus, don't produce a 'black-out,' don't stir up convulsions. For if there is throbbing, raging, shaking of teeth, producing of mucus, producings of 'black-out,' or stirrings of a convulsion..." See also PGM LXXXVIII, LXXXVII-XCI, etc.

82 See amulet PGM LXXXIX:1-27 "I, Abrasax, shall deliver. Abrasax am I! ABRASAX ABRASICHOOU, help little Sophia-Priskilla get hold of and do away with what comes to little Sophia-Priskilla, whether it is a shivering fit - get hold of it! Whether a phantom - get hold of it! Whether a daimon - get hold of it!..."

83 Such disease theories include for example mechanical obstructions (PDM xiv:574-85; 620-26), contamination by a noxious substance, such as venom, pus, or poison (PDM xiv:554-62, 563-74, 585-93, 594-620), or disordered organs (famously, the uterus, PGM VII:260-71).

production of meaning (healing).⁸⁴ In fact, there seems to be at times in the papyri at least a *proto-scientific* orientation. Additionally, and connected with aetiology, is the fact that the papyri are not just concerned with illness in relation to healing, but also in relation to intentionally afflicting it: symptoms in targeted individuals are produced by a variety of techniques, both symbolic ones (e.g. sending daimons⁸⁵ or using "pin-dolls"⁸⁶) and straightforwardly "biomedical" ones (e.g. poisoning⁸⁷). The flip side of *placebo*, we are in the realm of *nocebo* (except where the poisons worked biochemically, which seems - with my limited knowledge of toxicology - to be quite often⁸⁸). This is rich material almost totally absent from the NT material Pilch uses. It exposes an entire set of explanatory models and symptomatology, and guides an entire distinct field of healing: the undoing of and defense from ritual attacks coming from enemies. Aetiologically, such a system is very similar to the "witchcraft" so famously described by Evans-Pritchard in his study of the Azande.⁸⁹

84 See PDM xiv:232 "it has been tested nine times;" And also "tested" in xiv:711,1110; PGM III:440; IV:160-62; 2450-55.

85 E.g. PGM I:99, 213-4; IV:321-329, 1520-30 (esp.), 1167 and ,2076.

86 For pin-dolls, see PGM IV:321-29; XXIVb:1-15.

87 PDM xiv:563-74, 711-749, 911-919.

88 In the potions for "evil sleep," the presence of potent herbs and poisons like mandrake, apple seeds, or narcotics like opium suggests strongly the induction of catalepsy or coma. See the appendix below.

89 Evans-Pritchard, Edward Evan, *Witchcraft, Oracles and Magic Among the Azande*. Oxford : The Clarendon Press, 1937.

Reading the Papyri as Healing Texts in Cultural Context

Modern interpreters have even more difficulty respecting "magicians" as healers than they do Jesus, but that has been changing. Just as insights of modern medical anthropologists (initially intended to allow an understanding interpretation of other contemporary cultures) can and have been discovered as serviceable to biblical scholars, so can they assist scholars of the PGM in a similar enterprise. Such insights will teach us that, as healers, the "magicians" need to be regarded as *cultural mediators*.⁹⁰ The burden obligating the scholar is "to become enculturated into the Mediterranean world to properly understand and interpret ancient... texts."⁹¹

From basic definitions distinguishing that culture generally from our own, refined definitions more suitable to the textual data of the papyri can be proposed, just as they have been for the biblical data. It is a sensitive process of evolving and adapting the concepts, and of thereby developing more respectful interpretive strategies. This is the process that Pilch advocates and which is also "generally followed by other biblical scholars who incorporate social-scientific insights into their interpretation of biblical texts."⁹² There is every reason to try it with the PGM too.

There are many categories for evaluating methods, and models vary in their utility. The challenge for the scholar is to select or develop a method best suited to the papyri text at hand and its late antique Egyptian Mediterranean culture.

90 Pilch, p. 15

91 Ibid.

92 Ibid, citing Hollenbach, 1982; Kazmierski, 1992; Neyrey, 1986b.

Selecting Appropriate Test Cases from the Papyri

Embarrassed in the face of the riches of relevant material in the papyri, a study of this size sadly cannot address every ritual related to illness, nor even every case example of healing they provide.⁹³ Some accounts of symbolic healing ought to be selected as test cases for an analysis that will be hopefully fruitful. They should be "representative," but in a collection such as this it is impossible not to be at least somewhat arbitrary in one's choices of what to address. So, choosing a selection of medical materials to attend more closely to, hopefully with sufficient care and deliberation; they are grouped into six types:⁹⁴

Most important groups in series:

PDM xiv: 554-669: series of symbolic healing

PDM xiv: 935-1227(end of papyrus): series of non-symbolic healing, plus materia medica dictionaries/reference handbooks.

PGM XII: 1-343: "unique 8th book of Moses:" (242-250;280;284;320)

PGM XXa: 1-17: series; "patient"

PGM XCIV: 1-18: series.

Therapeutic Remedies-Amulets:

PGM XVIIb: 1-7

PGM XX: 1-4/4-12/13-19

PGM XXXIII: 1-25

PGM LXXXIII: 1-20

PGM LXXXVII: 1-11

PGM LXXXVIII: 1-19

PGM LXXXIX: 1-27

PGM XCV: 14-18

PGM CVI: 1-10

Prognostication and diagnosis

PGM I: 42-195: assistant for diagnosis foreknowledge

PGM I: 262-347: assistant for diagnosis foreknowledge (328-331)

PGM III: 424-66: (460-65) invocation

Healing God Invocations

PGM VII: 628-42: (640) invocation

PGM XVIIb: 1-23: Hermes prayer as source of power for a healer

PDM xii: 21-49: (esp.) invocation of Iymhotep to secure a remedy

PDM xiv: 239-95: vessel divination invocation for healing

PDM suppl.: 168-84: invocation of Iymhotep

Other special spells informing on healing and sickness:

PGM IV:1227-64,3007-86: healing exorcisms for a "patient"

PGM VII: 191-214: series of amulet treatments

PGM LXX: 26-51: against afflictions caused by spells

PDM xiv:239-95: vessel inquiry for "healing" and "saving"

PDM xiv:1097-1103: symbolic healing of ophthalmia

PDM xiv:1219-27: fever symbolic healing, mythic correspondence

⁹³ See the appendices: I tried to look at them all.

⁹⁴ For an attempt at a complete treatment of the entire corpus, see the "statistical" appendix.

Spells to produce afflictions:

PGM IV:321-29; XXIVb:1-15: pin-dolls.
 PDM xiv:563-74, 711-749, 911-919: "evil sleep" poisons
 PGM IV:1520-30: sending daimon
 PGM IV:2076 sending daimon

The foregoing selection is still large, within the corpus as a whole, it comprises a selection of the most salient healing-related materials to study more closely and supply exemplary material. While it will form the wider focus upon which the overall analysis will primarily draw, it is impossible to treat it all in depth. A more restricted selection will be the focus of detailed analysis and the core of this paper: the most interesting series in the papyri comprising a group of symbolic healing instruction spells (the first in the list above, highlighted in bold: PDM xiv: 554-669: series of symbolic healing). From the perspective of ethnomedical research, these are absolute gems unto themselves. For the benefit of the reader to be able to refer to them easily, here they are in full, right out of Betz, Pp. 226-229:

PDM xiv 554-669: series of symbolic healing scripts

PDM xiv. 554-62

*[Spell] to be said to the bite of a dog: / "My mouth being full of blood of a black dog, I spitting out the redness of a dog, I come from Alkhah. O this dog who is among the ten dogs which belongs to Anubis, the son of his body, extract your venom, remove your saliva from me also! If you do not extract your venom and remove your saliva, I shall take you up to the forecourt of [the temple of] Osiris, my watchtower (?). I will do for 'you .../ according to the voice of Isis the magician, the lady of magic, who bewitches everything, who is never bewitched in her name of Isis, the magician."

You [should] pound garlic with gum (?), put it on the wound of the dog bite, and speak to it daily until it is well.

*Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XIX/1-9. Words preceded by ' are written in the text in Demotic with Old Coptic glosses inserted above.

PDM xiv. 563-74

* [Spell] to be said in order to extract the venom from the heart of a man who has already been made to drink a potion or poison (?): "Hail, hail, IABLY, O golden cup of Osiris! / From you have drunk Isis, Osiris, and the great Agathodaimon. The three gods drank and after them I myself drank in order that you will not let me get drunk, you will not let me list, you will not make me fall, you will not make me be thrown down, you will not make me be troubled of heart, you will not make my mouth curse. May I be healed of all poison, pus, [and] venom. They shall be removed from my heart. When I drink you, may I vomit them up in her name of 'SARBITHA, the daughter of the Agathodaimon, for I am SABRA BRIATHA BRISARA. HER is my name. I am HORUS SHARON coming from receiving greetings. IAHO, 'the 'child, is my name, being my real name" [to be said] to a cup of wine. Add fresh rue; add it to it; speak to it seven times, and make the man drink it at dawn before he has eaten.

*Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XIX/10-21. Words preceded by ' are written in the text in Demotic with Old Coptic glosses inserted above.

PDM xiv. 574-85

*[Spell] to be said to the man, when a bone is stuck / in his throat:
 "you are SHLATE LATE BELATE the white crocodile, which is under the foam of the sea of flame whose belly is full of bones of every drowned man. Hail, you should spit out this bone for me today, it acting as a harpoon head, it making a point, it acting as a sack piercer, it doing everything, without change, for I am a lion's forepart, I am a ram's horn, I am a panther's tooth. / Griffin is my real name, for Osiris is he who is in my hand. The man named is the opener of my neck" (seven times).

You should speak to a little oil, you should put the man's face up; you should put it down in his mouth; you should move your finger and your thumb [to the] two sinews of his throat; you should make him swallow the oil; you should make him rise up suddenly; and you should eject the oil which is in his throat immediately. / The bone comes up with the oil.

*Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XIX/21-32.

PDM xiv. 585-93

*Spell to be said to the bite of a dog: the fury of Amoun and Triphis: "I am this strong Arab SHLAMALA MALET secret one, the black, the dog which has bewitched this dog, he of these four bitch-pups, the wolf son of Wepwawet. O son of Anubis, seize by your teeth! Put down your secretion, your face being that / of Seth against Osiris, whom Isis bore [is the one] with whom you filled your mouth, NN whom NN bore [is the one] with whom you filled your mouth. Hear this speech of Horus, who stopped heat, who went to the primeval water, who established the earth; listen, O IAHO SABAHO ABIAHO by name!" You should cleanse the wound and grind salt with Nubian hematite. Apply [it] to it.

Another: You should grind rue with honey. Apply to it and say it also to a cup of water and make him drink it.

*Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XIX/32-40.

PDM xiv. 594-620

*[Spell] to be said to the sting. / "I am the King's son, greatest and first, Anubis. My mother Sekhmet-Isis comes after me all the way to the land of Syria, to the hill of the mound of Heh, to the nome of these cannibals, saying 'Hurry, hurry! Quickly, quickly, my child, King's son, greatest and first, Anubis,' saying, 'Arise and come to Egypt, for your father Osiris is king of Egypt; he is ruler over the whole land; all the gods of Egypt are assembled to receive the crown from his hand.'

/ "At the moment of saying these [things] she jumped at me. My strength fell from me. She coiled and she came to me with a sting; I sat down and I wept. Isis, my mother, sat near me, saying to me, 'Do not weep, do not weep, my child, King's son, greatest and first, Anubis! Lick from the edges of the wound up to the limits of your / strength!' What you will lick up, you should swallow it. Do not spit it out on the ground, for your tongue is the tongue of the Agathodaimon, your tongue is that of Atum!"

You should lick it with your tongue while it is bleeding. Immediately afterwards, you should speak to a little oil and you should speak to it seven times while putting it on the sting daily. You should dye a strip of linen and put it on it.

/ [The spell] which you should say to the oil to put it on the sting daily: "Isis sat speaking to the oil, ABARTAT, and lamenting to the true oil, saying, 'You are praised. I am going to praise you, O oil; I am going to praise you. By the Agathodaimon you are praised. By me myself you are honored. I am going to praise you forever, O oil, O vegetable oil'" (another [manuscript] says "true oil"), "O sweat of the Agathodaimon, amulet of Geb. Isis is the one who / is speaking to the

oil. O true oil, O drop of rain, O water-drawing of the planet Jupiter which comes down from the sun bark at dawn, you should do the good [deeds] of the dew of dawn which heaven cast to the ground upon every tree. You should heal the limb which is paralyzed and you should act as remedy for him who lives, for I shall employ you for the sting of the King's son, greatest and first, Anubis, my child, in order that you fill it and make it well. For I shall employ you for [the] sting of NN, whom NN bore, / in order that you fill it and make it well'" (seven times).
 *Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XX/1-27.

PDM xiv. 620-26

*Spell to be said to bring a bone out of a throat: "I am he whose head reaches the sky while his feet reach the primeval waters, who awakened this crocodile ... in Pidjeme in Thebes, for I am 'SA 'SIME. TAMAHO is my correct name, 'ANYG ANYG, for a hawk's egg is what is in my mouth, and ibis egg is what is in my belly, saying, 'bone of god, bone of man, bone of bird, bone of fish, bone of animal, bone of everything, there being nothing besides, for let that which is in your belly come to your heart; let that which is in your heart come to my hand here today, for I am he who is in the seven heavens, who is established in the seven shrines; for I am he who is in the seven heavens, who is established in the seven shrines, for I am the son of the living god!" [Say it] to a cup of water seven times and make the woman drink it.
 *Tr. Janet H. Johnson, following the editions and translation of Griffith and Thompson, *Demotic Magical Papyrus*, recto, col. XX/27-33.

Application of the Models and Concepts Discussed in part A.

The Value Orientation Model⁹⁵

This model permits us to look at the way in which particular value orientations influence how illnesses are constructed in a given society. This is generally as true of the Egyptian society of the papyri as the Palestinian one of the NT: "In the ancient Mediterranean world, we find a totally different perception of problems and solutions... primary value orientation preferences tend to emphasize a blend of the perspectives under the left and the middle columns of the chart above" (please refer back to p. 13) For first-century Palestine, these are: "being (spontaneity), collateral relationships, the present, subjugation to nature, and a view of human nature as a mixture of good and evil." The world of the papyri is only a little different. The "key insight" that this model gives us to begin with is "that Mediterranean culture would view health as a desirable state, while Western culture would view it as a restored ability to function."⁹⁶ Going through the five parts of the model with the PGM in mind:

⁹⁵ The model of Kluckhohn and Strodtbeck given above in the methodology section.

⁹⁶ Ibid, citing McGoldrick.

1. Human activity: Being-in-Becoming

In common with ancient Egyptian religion, there is in the papyri an emphasis on being and becoming in transformation; this emerges in the papyri forcefully in the rituals for initiation and "immortalization" (PGM IV: 771) as in this "Mithras Liturgy:"

"O lord, while being born again, I am passing away; while growing and having grown, / I am dying; while being born from a life-generating birth, I am passing on, released to death - as you have founded, as you have decreed, and have established the mystery." (PGM IV: 719-723).

What of *doing*? Doesn't the expensive performance of rituals demonstrate a commitment to doing? Of course it does, but the ritualist is a special and liminal figure on the edge of society, and the ritual doing is often a last resort, and is ultimately oriented toward the goal of being, and not of doing. Nevertheless, with regard to human nature it is more action that determines good and evil, and not being (see below).

2. Human relationships:

This aspect seems to differ in the papyri from the NT, for there is little evidence of collateral or group goals in the relationships described. Rather than emphasizing cooperation, the majority of the spells emphasize competition and individual goals, as is well-known. Even so, it may be due to the nature of the genre (secret and illicit) that there is little description of collateral social relationships in the papyri, except that interpersonal relationships which are inferable between the ritualist and his/her client and the latter and his/her enemies or wished-for lover (and the spiritual participants who had their own society).

3. Temporal focus of life:

A present-orientation appears time and again in the papyri as it does in the NT. This is most recognizable in the urgency that present needs be met without delay: "...now, now; immediately, immediately; quickly, quickly..." (PGM IV:1590-95).⁹⁷ There are many expressions of desire to know the future in the papyri (yet very impatiently so!), but very few references to the past at all, aside from the mythic 'past,' which is more properly outside of time and

⁹⁷ Various versions of this formula and other expressions of immediacy appear in all types of materials throughout the entire corpus of the papyri: See PGM I:261; III:258; IV:153, 1920-25, 2449-55; V: 185-195; VII:195, 745, 246-49, 253-4, 259, 373, 410, 472, 993;

thus ever-present. The few exceptions involve references to the past miraculous power displays of pharaoh Psammetichus, Jesus, and Appolonius of Tyana, and other famous "magicians."⁹⁸

Some slight if vague future orientation is apparent in prayers for general well-being, and in promises of spells for relationships with attendant spirits or divination theophanies. But this proves the unreliable and vague uncertainty of the future. There is also some, perhaps residual, traditional focus on afterlife.⁹⁹

Unlike in the cultural context of the NT, there seems to be much less need "to affirm the past as a primary time value orientation"¹⁰⁰ in the papyri. These ritualists were not so much elites like the ancient priests who "needed to know their pedigree."¹⁰¹ If true that "the past legitimates important status in the present, hence people of status keep a steady eye on the past,"¹⁰² then perhaps the ritualists of the papyri were not people of status or were otherwise unconcerned with it; satisfied to be concerned instead with power, perhaps.

4. Relationships of Human Beings to Nature

This aspect is mixed. While on the one hand there are clear expressions of being subject to nature, there are numerous expressions indicating intentions to mastery of it. Overall, it is a delicate and dangerous *harmony* with nature that is sought.

There is great concern with fear of vulnerability and protection from natural dangers, as shown for instance in amulets against scorpions. But nature supplies the resources supplying many rituals: animals are used for their substances and parts in charms and potions;¹⁰³ plants are harvested to the same end.¹⁰⁴ It is not clear where and how the natural and spiritual worlds are distinguished, or even if such a distinction is truly valid in this

VIII:53,63; X:50; XIc:10; XV:21; XXIIb:25-26; XVIIb:7; XIXa:16,54; XXXII:19; XXXIIa:25; XXXVI:85,111,133; XXXVI:360; XLIII:27,11; PDM xiv:1122,1140.

98 PGM IV:154; XIa:1; XII:96,107,121,123,351.

99 E.g. PGM IV:10; LIX:1-15; XXI:16.

100 Ibid, pp. 10

101 Ibid.

102 Ibid.

103 Re: Living and dead animal parts, e.g. PGM VII:652-60; XII:376-96; XXXVI:232,235; PDM:xiv:882,940.

104 E.g. See plant-picking spells: PGM IV:286,2967-3006.

culture. On the one hand natural hazards are distinguished from spiritual ones in prayer litanies and prophylactics,¹⁰⁵ while on the other the plants and animals of nature share in divine powers and bear the forms of gods.¹⁰⁶

There are a few spectacular miraculous spells to master nature: including most daringly, a spell (PGM XIII: 283) for riding crocodiles across the Nile! But could the very miraculousness so ostentatiously demonstrating the power of the ritualist show the non-mastery felt normally; the exceptions that prove the rule?

Whatever the case, and it is complex, the view of nature in the PGM differs from the NT, showing some manipulation and mastery but harmony rather than submission. Natural forces in the narrow confines of the Nile sustained life, but in the vast desert of the threatening periphery were deadly. It generally seems that natural forces were attributed with a spiritual agency and power (useful and indeed essential for the ritualist) above that of human society but subservient to the higher spiritual beings and deities. There is overall a great deal more interaction with nature in the PGM than in the NT, which may correspond with the theriomorphic and theriohieratic religious heritage of Egypt as opposed to the Israelite one.

5. Assessment of Human Nature

In the papyri, ordinary human beings are seen to be capable of good and evil. Some of the spells ask unashamedly to accomplish evil and unjust things for egocentric ends. Such include "love" spells that include slanders and contain provisions for serious harm-doing, even killing.¹⁰⁷ In other cases, legal disputes even between family members acknowledge the evil done and curse the doer.¹⁰⁸ There are spells that are also very (self) righteous and claim to goodness on behalf of the petitioner to the gods and ask for justice.¹⁰⁹

The different deities to whom the ritualist and his client appeal or even identify with can also be either good, like Osiris and Horus, or evil,

105 E.g. PGM IV:2170-6.

106 E.g. PGM VII:780-85.

107 E.g. PGM IV:2622-2707.

108 E.g. PGM LI:1-27; LVIII:1-14.

109 E.g. also PGM LI:1-27.

like Seth-Typhon.¹¹⁰ The orientation to alignment is instrumental: good or evil are potentials for all: something you do, not something you are.

In sum, the PGM idea of health emphasizes: 1) A state of being-in-becoming, not of active doing; 2) Individualistic human relationships, more than collateral ones; 3) A present, and sometimes past, time orientation, not a future one (exception: some traditional focus on afterlife); 4) An uneasy harmony with nature, including concern for protection from the feared uncontrollable factors in tension with a traditional religious concern with the divine power of natural forces, and the desire by the ritualist to use, manipulate, and master them; and 5) Human nature is both good and bad, not neutral and correctable.

110 PDM xiv: 675-94.

The Process of Symbolic Healing in PDM xiv 525-669

The "spells" of this series are extraordinary. They clearly follow the four-stage processual model of symbolic healing previously outlined, in clear order supplying 1) a symbolic bridge from the personal experience to a symbolic reality; 2) a relating of the illness experience to the mythic world; 3) transactional symbols particularized from the mythic world to the personal therapeutic experience; and 4) an act or event of confirmation that the healing has been successful.

Examining Healing in the Papyri with Kleinman's Schematic Model

(Please refer to page 25 to view the outline)

While going through the points in Kleinman's summary, a list intended to direct further inquiry into the symbolic healing process, especial and primary attention will be paid to the above symbolic healings. However, the other medical selections and the overall corpus will also be given a secondary consideration. It is hoped that this will contribute to the contextualization of PDM xiv 554-669 within the healing materials, and those in turn within the text as a whole.

1. Setting: folk, popular, or professional

The setting of the specific selections above is definitely professional. They were both professionals and symbolic healers. Pilch tells us that "most symbolic healing around the planet takes place in the popular sector, that is the non-professional, non-bureaucratic, specialist-sector especially in societies that lack professionalization"¹¹¹ But Egypt was unique, and had many professionals in the ancient and complex bureaucratic priestly and governing establishments. Priests of the temples had engaged in symbolic healing, but in the late Roman period they were becoming de-professionalized, unemployed, and finally outlawed, thus forced into a folk disguise and subsumed there. The ritualists of the papyri seem not to be the typical "ordinary folk, considered to be especially gifted to heal."¹¹²

¹¹¹ Pilch, Pp. 33-34.

¹¹² Kleinman 1988, p. 117, cited in Pilch, Pp 33-34.

Even though it may be true that "most healing (besides ours) is not long-term, divorced from everyday life encounters between participants, psychologically minded, secular, or oriented to the needs and rights of the individual vis-à-vis those of the family and community," that does not mean that the ritualists in the papyri are typical; in many of these respects they seem to have in fact been exceptional: the participant encounter does seem to have been divorced from everyday life encounters and oriented to the needs of the individual. But as in nearly all cultures except the West, the therapeutic relationship in the papyri is authoritarian; these "magicians" refer to themselves as prophets or even divine authorities talking not only to, but also as, gods. Authoritarianism is "what one would expect in the socio-centric or collectivistic non-Western cultures as contrasted with egocentric or individualistic healing Western culture,"¹¹³ but the social perspective in the papyri displays quite often an extreme individualist egocentrism!

Can we say anything about their relation to other professionals or folk healing specialists in the papyri? There are notable mentions of herbalists and plant-sellers¹¹⁴ as well as to "physicians"¹¹⁵ in the papyri that could be worth comparing.¹¹⁶ With the degree of literacy and time required there were probably not many types of people who could have used these spells. Some of the spells claim a "sacred scribe" as their source,¹¹⁷ or a "priest."¹¹⁸ Others in the corpus claim to be "a prophet."¹¹⁹ One caveat to remember is that the spells comprising the papyri are not monolithic, not only having been collected by different people, but probably having passed through many hands before reaching the current state of collection. This situation makes it very hard to say anything about the general users of the papyri - maybe there are nonesuch.

113 Pilch, Pp. 33-34.

114 PDM xiv:142 "the garland-seller/lupine-seller."

115 However, it must be borne in mind that the "physician" of the ancient world is not the same as our modern physician.

116 There will be a post-scripted discussion of Thessalus the Magician that will return to these passages.

117 PGM I:42 "The spell of Pnouthis, the sacred scribe..."

118 PDM xiv:232 "Paysakh, priest of Cusae..."

119 PGM VII:325 "For I am a prophet..." See also IV:2455.

There is a professionalism of techniques, such as pill-making,¹²⁰ and of the jargon used: "a prescription for...", "do the usual," "add the usual for what you want."¹²¹ There are even a few hints of professional ethics.¹²² But it is the reference to "physicians" that are most intriguing. Why label some sources of the spells as physicians but call the rest "magicians?" The editor seems to have meant either to distinguish these occupations or to describe the physician as a subdiscipline of "magic." A "physician from Oxyrrhynchus" (a "suburban" interzone between Hellenic Alexandria and the Egyptian interior) is responsible for passing on two spells, PDM xiv 1-92 and 528-53, both vessel divinations and have little to do directly with healing. A group of recipes (PGM XII:96-106) is credited to a famous fourth century physician, Himerios. It seems to make the most sense to see physicians as a distinct class of professional healers, originating in Hellenistic culture, who were interested in ritual spells and took part in their collection and transmission.¹²³ This is supported by no less an Hellenistic physician than Galen, who is reported by Alexander Trallianus (11.1) to have said:¹²⁴

Some think that conjurations are fairytale inventions [maintained by] old wives. This was also my opinion in the past. On the basis of the evidence of my own eyes, I have gradually been convinced that they have power. I examined their usefulness relating to scorpion bites and to the case of a bone which stuck in the someone's throat and was coughed up by means of conjuring. The conjurations performed their own aim.

The only way for Galen to have seen it with his own eyes would have been by attending a traditional healing ritual. Note especially that the healings he reports are the very ones we are examining from the papyri!

120 Pill-making: PGM IV:2894,2681,2691.

121 "Prescription:" PDM xiv:935,953,961,970, etc. "The usual:" PGM V:489; VII:310,315,358,380,384,389,393,395,404,406,410,415,420,450,461,427,685,702; PGM X:42.

122 PGM IV:851-55 = an oath to do no harm; 476 = a promise "not for gain but for instruction."

123 To compare more traditional upper-Egyptian culture, a good hypothesis might be that the professional healers there were not physicians, but the traditional ritualists who came to be called "magicians," but who were recognized as kin by some Hellenistic physicians. Supporting this is the impression that the Demotic material contains more of an explicitly *medical* nature than the Greek.

124 Quoted from Veltri, p77.

2. Characteristics of the interaction:

a. Number of participants

In the symbolic healing selections highlighted, there are only the two participants: healer and patient. The mythic world has other characters, but these are symbolically tied to the two human characters and the illness entity alone; no character refers to anything in society beyond the private therapeutic relationship.

There were few human participants in the majority of the rituals (in many only the ritualist alone). To go by the texts, in healing encounters it was the ritualist and the sick person by themselves. Quite often, a boy or youth was employed as a medium in divinations, who may have been an apprentice-assistant of the ritualist. When the sick person was bedridden, presumably his/her family would have been the ones to summon the ritualist and would be on hand as observers, but they receive no mention as ritual participants in the papyri. On the other hand, a great many spiritual beings are personified and characterized in the rituals, including gods, ghosts, daimons, and other spirits including the ritual materials themselves (e.g. PGM LXI:1-38 has Myrrh addressed as a daimon of love affliction). These non-human characters are addressed and interacted with as though they were human participants.

b. Time character: episodic or continuous, brief or lengthy

In the symbolic healings of our concentration, the time duration seems to have been brief. However, it was also episodic, and provision for daily return visits as follow-ups to continue therapy and monitor progress is explicitly recommended (PDM xiv:562, below).

The ritual process in most healings seems likely to have occurred over a span of several minutes to an hour, not long.¹²⁵ But the preparation "homework" for a ritual would have been lengthy, and hence expensive: the ritualist had to collect the materials, often performing rituals for these collections (in the case of herbs), or to prepare

¹²⁵ Although longer than most doctor's visits today in the West.

ointments, potions, and powders, also ritually done.¹²⁶ Ritual healings are sometimes episodic: as indicated there is mention of return and repeat visits to check on the progress and to repeat ritual attendance to certain wounds daily until healing is complete: "You should pound garlic with gum (?), put it on the wound of the dog bite, and speak to it daily until it is well."¹²⁷ This would have meant that a good ritualist would have had a busy schedule to manage, including rounds to patients' homes throughout the day.

Many rituals are also time-specific, to draw on the significance or power of particular diurnal and calendrical astrological/astronomical events.¹²⁸ This is clearly an inheritance from ancient Egyptian religion. Thus, mornings at break of day are key times, and also the solar zenith.¹²⁹ Seasonally too, the annual flood and its immediate cessation is a potent time for gathering and concocting Nileside,¹³⁰ the solstices and equinoxes were significant and useful,¹³¹ among the key heavenly bodies were the sun, moon, and Ursa Major.¹³²

c. Quality of relationship: formal or informal, authoritarian or dyadic

The transactions in the symbolic healings of note have a definite formal quality that is also very authoritarian and paternalistic. Practical evidence of the confident authoritarianism of the ritualist as therapist is apparent in the direct manipulations of the patient's body, as for instance when removing a bone stuck in the throat:

You should speak to a little oil, you should put the man's face up; you should put it down in his mouth; you should move your finger and your thumb [to the] two sinews of his throat; you should make him swallow the oil; you should make him rise up suddenly; and you should eject the oil which is in his throat immediately. / The bone comes up with the oil. (PDM xiv:581-85).

126 PGM IV:286, 2967-3006.

127 PDM xiv:562.

128 PGM XCV:7-13; PDM xiv:237-8, 1005-14, suppl:184.

129 PGM IV:94; PDM lxi:30-41.

130 PGM IV:26-30.

131 PDM xiv:878.

132 PGM VII:686-702; LVIII:15; PDM xiv:237,684,1005-14, etc.

As mentioned, the ritual relationships on the papyri are formal, which makes sense given the formality of ritual! The same goes for the authoritarian quality of the ritualist as therapist, which is held in common with nearly all cultures except the West. They refer to themselves as prophets or even speak with the divine authority of a god. Authoritarianism coexists in the papyri with egocentric individualism because the ritualist is uniquely able to fulfill private personal wishes for health as well as other benefits.

There are a few places in the papyri that refer to the patient as a bedridden sick person "the sick one took to bed,"¹³³ or as a "demoniac,"¹³⁴ and in two rare cases as a "patient:"¹³⁵ in the first case a "demoniac" is receiving an exorcism and is completely passive and bedridden. But the second is most fascinating, for it gives a picture of the relationship expected by the healer: it has a provision in case "the patient recovers [from 'bloody flux'] and shows ingratitude;" and follows with a curse for pain!

133 PGM XII:351.

134 PGM XII:281.

135 PGM IV:1254 and XXIIa:5-6.

3. Characteristics of the healer:

a. Personality

Those symbolic spells do not reveal the personality of the healer. And generally, throughout the entire corpus very little of the personality of the practitioners come across, perhaps due to the apparent formalism of the papyri. This situation may reflect the professionalism of the craft of the ritualist-healer, or that of the scribe as an outcome of scribal conventions for symbolic spells. It is difficult to be certain and both may be possible.

b. Training

The symbolic spells on which we are concentrating are themselves our best evidence of healer training. They are books meant for the study of the therapist in a phase of practical training perhaps corresponding to "internship." Such an interpretation finds an echo in John Nunn (p. 131) and other scholars of ancient Egyptian medicine who view the medical papyri as "textbooks" for education and practice. They have been composed by masters with experience and were obviously redacted into compilation by someone who had access to several written sources: In PDM xiv: 614 the scribe interrupts the script in mid quotation for an aside " "...O vegetable oil'" (another [manuscript] says "true oil"),..." Such editing demonstrates the great care taken in study and the added care to show it, at least as a manifestation of scribal transmission.

More generally, the training of one of these practitioners must have been lengthy, difficult, and expensive. Evidence pointing to this includes the high degree of bilingual and multilingual literacy evinced:¹³⁶ they went to scribal school for Egyptian materials but also succeeded in Hellenistic *paideia* to be conversant with, not only the Greek language, but Homer and the myths. There is a more than passing awareness shown of wider world cultures and their languages, including Jewish ("Hebraic,"¹³⁷), Babylonian, Arab,¹³⁸ Nubian,¹³⁹ and Ethiopian. (But

136 PGM IV:94-153; XII:262-267; PDM xiv:451-58 - and see Betz n.352, p. 221.

137 PGM IV:3085.

138 PDM xiv:585.

no reference, or reverence, is shown to the politically dominant Roman culture or the Latin language).

The familiarity with Egyptian temple traditions makes it likely that the training was based on an older tradition of priestly and scribal education attached to the temples. Temples receive rare mention in the papyri, sometimes metaphorically.¹⁴⁰ Such training is the "vertical" tutelage of a pupil under a master with office and title. We know that during the period the papyri flourished, these temples were being shut down and the dispossessed priests pushed out of work by aggressive Christian monks.

If it did not already exist alongside it, a new form of such "vertical" educational upbringing could have been emerging or rising to prominence without the temples in the form of a direct apprenticeship of the assistant by the ritualist who employed him. We know from abundant examples in the papyri that boys or young men who were virgins were used as mediums and visionaries in divination-oracles and theophanies.¹⁴¹ The ancient medical papyri also indicate inheritance of medical training and office. Although they are not referred to as disciples or successors, these assistants would have received quite an apprenticeship. And to speculate further, the easiest way to get such a boy was to employ a relative, and how better to provide for the future of the family than to pass on a career to a son or nephew?

But it is also clear that from references to the assemblage of spells that the training was at least in some cases no longer temple-based.¹⁴² There are editorial notes in the texts indicating that a certain spell was received from another collector, and one such (mentioned in two separate spells) was specifically identified as "a physician in the nome Oxyrhynchus."¹⁴³ Education in this case was by peers, maybe a horizontal sharing analogous to a college of membership for continuing education, if not merely an association of scholarly antiquarians.

139 PDM lxi:95-99.

140 PGM VII:326; X:2; XII:401.

141 See PGM I:86; II:55; IV:88; V:45; VII:348; PDM xiv:1-92,177,475-88,750.

142 It is possible that the ritualists returned to the derelict temples as powerful places to undertake rituals, as loyalists to the old order.

The acquisition of a divinely-granted power to heal, discussed as a goal in some of the rituals, granted qualification to a healer and should therefore be seen as a part of the training process, the culmination of education¹⁴⁴. Typically, in a divine autophany, the god grants special power and knowledge to the healer to make him of her uniquely qualified. For example, there are many invocations of the gods Thoth/Hermes and of Iymhotep/Asclepius,¹⁴⁵ some of which express a mysticism of identity, and there are spells to establish special relationships with assistant daimons that promise, as the last in a long list of marvelous services:

And he will tell you about the illness of a man, whether he will live or die, even on what day and at what hour of night./ And he will also give [you both] wild herbs and the power to cure, and you will be [worshiped] as a god since you have a god as a friend. These things the mighty assistant will perform competently." (PGM I:187-191)

Such invocations that establish relationships and acquire healing powers as divine gifts find valuable comparison in the autobiography of Thessalus the Magician. There, the same is apparent as the major theme. For he is also rewarded at the culmination of his education as a healer, when in a ritual produced by an aged priest of Thebes, Thessalus is given a long-sought theophany of Asclepius (Iymhotep) himself who says to him, "the time is coming soon when men will honour you as a god when your accomplishments become known."¹⁴⁶

143 PDM xiv:1,528.

144 This is how Thessalus also saw it, (see ahead).

145 PGM IV:2967-3006; V:249; VII:628-42, 1-63; XVIIb:1-23; PDM xii:21-49; xiv:93-114; lxi:63-78; *suppl*:168-84.

146 More on Thessalus again in the final discussion.

c. Type of practice

As for our precious symbolic healing scripts, the practice was most likely locally mobile. The acute nature of the conditions (still bleeding: PDM xiv:607), and the immobility of the patient so stricken makes it likeliest that the therapist was summoned to a house-call and was able to respond quickly. These healers would have had a bag of basic medications, tools and supplies such as bandages just like the proverbial doctor's bag, with the possible addition of ritual tools like miniature altars, tripods, and incense.

A range of possibilities for therapeutic practice types is suggested in the papyri. Since many of the healing spells required attendance on a bedridden sick person, as above, the practice would have been locally itinerant: the house-call in town or village. Other spells seem more likely to have required the client to seek the professional, perhaps at an "office" in or near the temple or at the home of the ritualist, where indeed many spells are prescribed to be done.¹⁴⁷ Other indications suggest that the practice may have been even more mobile, on the order of itinerancy established by Hellenistic physicians, and temporary rooms for ritual use could be set up almost anywhere.¹⁴⁸

147 E.g. PGM II:150 "your bedchamber;" IV:171 "the highest part of your house;" VII:490 "your quarters;" VII:727 "in a ground floor room without light."

148 On this, see Jonathan Z. Smith "The Temple and the Magician," in his Map is not Territory. C.f. PDM xiv:283 "a dark storeroom;" PGM II:50 "a bathhouse;" III:617 "a deserted place;" III:690, 700 "a solitary place... a pure and consecrated place."

4. Idioms of communication:

a. Mode: somatic, religious, moral, social

For the therapists of the symbolic series, most of the communication proceeds in a combined somatic and religious idiom. There are only hints of the moral or of social idioms, unlike in many other healing spells in the papyri. The somatic idiom describes the affected organs and injured tissues of the body, explicit about the mechanical physical problems of the condition: a bone stuck in the throat, a bite-wound, and a poison potion in the heart. The somatic idiom is present in the mythic script integrated with the religious idiom, while in the private instructions to the healer that follow, somatic terms appear more nakedly in the clear instructions for the physical treatment actions: apply the ointment to the wound, tilt the head up and massage the throat, etc.¹⁴⁹

The religious idiom is mythic, and describes events in the spiritual world that precipitated the accident (for instance the divine dog that bewitched the earthly dog to bite), as well as the mythic afflictions of deities and their treatments. Just as the mythic affliction preceded the personal one, the mythic healings establish the model for the therapy to take place.¹⁵⁰ There is very little moral discourse here or anywhere else in the papyri, but possible though vague manifestations of that idiom are present in the poison treatment in statement that the gods "will not let me get drunk, ... you will not let my mouth curse,"¹⁵¹ and maybe also in the comparison of the spiritual dog responsible for the bite with the (evil and contentious) gods Seth and Apophis.¹⁵² But these may better be classified as belonging to the social idiom (references to "drunkenness" in Philo and other ancient literature point arguably to more than a moral idiom). Otherwise, there is hardly any social idiom in the symbolic healing rituals, with the exception of the kinship relationships that are mentioned with regard to the great mythic gods.¹⁵³ Unfortunately, without a deeper and broader sociological or anthropological understanding of the society of the

149 PDM xiv:562,582-585,592-3.

150 See PDM xiv:602-606.

151 PDM xiv: 565-568.

152 PDM xiv: 590.

153 PDM xiv 556, 570, 590, 595-600, etc.

PGM, of the kind provided by ethnographies for living societies, these categories of idiom are very limited and arbitrary. (It is to be hoped that their potential utility as tools as new anthropological information is assimilated will justify their retention).

In different places in the corpus, the PGM therapists use all of these modes to varying degrees.¹⁵⁴ Somatic modes of discourse prevail with respect to the sickness entity: it is nearly always located in a specific bodily locale or organ, with the exception of such general conditions as fever, madness, insomnia, and anorexia. The most voluminous exemplars come from the love spells outside the realm of healing rituals, a realm I refer to as *rituals of affliction*. There are many more symptoms and sickness conditions described in affliction spells than in those intended to heal or prevent them. Religious modes of discourse, by which is meant references to spiritual and mythic entities, are also prevalent. The clinical reality most often has a spiritual aspect, either explicitly identified as the antecedent underlying cause or as the ultimate reality of the illness, and sometimes as both at once.

The simplest example given is the invasion and possession of the body by daimons, sometimes under the compulsion of an enemy's adjuring rituals. The daimon in the body may either attack specific areas or cause general conditions. Ghosts and phantoms attack and cause terror. Deities also afflict misfortune if they are convinced, even if unjustifiably, that a person is guilty of an infraction against them.¹⁵⁵ In these so-called "slander spells," legalistic parlance blends the religious and moral idioms. Prayers and charms to counteract malicious rituals such as these or to prevent misfortune and promote well-being sometimes appeal in the moral idiom to the good character and righteousness of the petitioner, especially in contrast to the opponent(s) upon whom ill is wished.¹⁵⁶ The social idiom is rarest, but clear in the case of prayers for general good fortune, favour spells, and certain love spells, where wishes are expressed for friends, wit,

154 Please see the summary in the Appendix below.

155 E.g. PGM IV:2622-2707.

156 PGM LI:1-27; LVIII:1-14

charm, and grace in the eyes of one or all in society,¹⁵⁷ or else expressed negatively as turning the anger of another away,¹⁵⁸ or both together.¹⁵⁹

b. Code: nonverbal, verbal, special semiotic system

In our symbolic series, the code of communication is mostly verbal, including the special verbal semiotics of secret names to prove authority and power for adjuring. This is not remarkable, but the interesting variations in the communication of this series regard the subject and the object of the speech: the healer speaks not as himself, but as a divine being or as the patient, and talks not to the patient, but to the illness condition,¹⁶⁰ the spirits behind it, and/or to the medication used to treat.¹⁶¹ There is no nonverbal communication to speak of in these examples, though such is common elsewhere in the papyri. (see below).

In the papyri generally, we can find examples of all sorts of codes of communication that represent different techniques of ritual power manipulation. Nonverbal types include the production of hissing and popping sounds¹⁶² and the recitation of vowels. Between nonverbal and verbal are the recitations of powerful but incomprehensible names. Verbal codes include the recitation of myth and declarations of identity with mythic beings, as well as the uttering of prayers and petitions, threats and commands (PGM XCIV:13-19; XX: 13-19 "flee, headache"), backed by the names of powerful spiritual entities and deities. Special semiotic systems, resorted to frequently in amulets, include writing with sigils,¹⁶³ written vowel permutations¹⁶⁴ and "wing formations" of comprehensible or mysterious words,¹⁶⁵ figurative drawings with or without labels,¹⁶⁶ box-tables,¹⁶⁷ writing in circles or spirals

157 PGM IV:469-70, 833-4; VII:1017-26; XIV:309-34; XII:182-9; XXXV:1-42; XXXVI:275-83, LXX:1-4, etc.

158 PGM XII:179-81; IV:831-32; VII:948-68; LXXIX; LXXX; XXXVI:1-34, 161-77.

159 There is no sense of anxiety as in the NT of the ostracism faced by lepers.

160 PGM XX:13-19 XCIV:39-60; PGM XXXVI: 35-68, 211-30.

161 PDM xiv:582, 611-620.

162 PGM XIII:89, 415.

163 PGM XXVI; XXXVI; XLIX.

164 PGM XII:905-914.

165 PGM CXXX; CXVI; CXX; XCI; LXXXVIII, etc.

166 PGM CXXIII; XXX.

167 PGM XCIV:39-60.

around peripheries.¹⁶⁸ Direct actions interpretable as communicative codes include the actual engraving or writing of text and images on papyrus or metal amulets and their placement upon the person,¹⁶⁹ an action, like the writing of a prescription in biomedical culture, that signals the end of a therapeutic visit and accomplishes the directive of healing.

c. EM of a particular illness episode - for example, shared, conflicting, open, tacit, etc.

The explanatory models in the papyri are those solely of the therapist; we are not informed well about the sick person's. EMs tend to be divisible into open religious ones shared with the client-patient, and more tacit biomedical ones communicated privately in the instructions of the spells. This is apparent in our symbolic therapies, for the scripted sections relate the mythic dimension with the physical condition, but the private treatment instructions for the reading eyes of the healer discuss physical treatment alone¹⁷⁰ - there is no mythic recitation for the private use of the healer. The EMs of these particular illness episodes show that a physical cause of the illness is recognized and understood, but is not enough. The physical event is also related to a divine event in the mythic world in a manner that is somehow causally dependent and subordinated, but ambiguous in its temporal relationship; that is, it is left uncertain as to whether the presenting condition is synchronous or subsequent to the divine event. For instance, the dog's bite is a simple wound, and the saliva of the living dog is viewed as a venom that causes illness,¹⁷¹ while the dog who did the biting is connected with a dog of Anubis in the mythic world who bewitched the former dog to bite the patient and bears the ultimate blame and responsibility.¹⁷² The treatment, consequently includes both a rebuke-threat-command to the spiritual entity responsible to undo the damage,¹⁷³ and a physical cleaning and anointing¹⁷⁴ of the wound by the

168 PGM XVIIb:1-7.

169 PDM XIV:1103 for ophthalmia, text plus image of radiant eye - see n. 593, p. 247.

170 PDM XIV:562,574,582-5,593,607-10; PDM xiv: 557, 589.

171 This is often the case in the biomedical reality as well: rabies and other infections are common consequences of dog bite.

172 PDM xiv: 556, 587.

173 PDM XIV:559,589.

healer. They are always done in this order. The two levels of reality are related and addressed together, but the distinction is also maintained.

Overall, the explanatory models in the papyri, though demonstrating a spiritual-physical distinction, appear to be shared and open, rather than conflicting and tacit. There are intuitive reasons, to think that these ritualist-therapists believed in their conceptions of the illness entity and the sources of their healing power as much as the patients they were trying to treat. I disagree with Betz's unfair and unkind assessment that they were deceivers merely capitalizing upon the desperate human desire to believe anything to alleviate anxiety and hopelessness,¹⁷⁵ such a dynamic may operate in part and in every society and time, but it cannot explain away the intense therapeutic relationships discovered here.

The explanatory models of the papyri show a whole spectrum of variation in their aetiology, ranging from the familiar daimons invading the body to the noxious rituals of enemies, the introduction of poisons into the body, the venom or saliva from animal bites and stings, the intrusion of a foreign object, a disordered and unruly organ, the will of divine forces especially in accidents, and fate

174 PDM xiv:562,592-3,606.

175 I will quote the major part of this passage from Betz, with emphasis. "Introduction to the Greek Magical Papyri," p. xlvii: "Why is magic so irrepressible and ineradicable, if it is also true that its claims never come true? Or do they? Do people never check up on the efficiency of the magicians? The answer appears to be that, in general, people are not interested in whether or not magicians' promises come true. People want to believe, so they simply ignore their suspicions that magic may all be deception and fraud. The enormous role deception plays in human life is well known to us ... Magicians are those who have long ago explored these dimensions of the human mind. Rather than decrying the facts, they have exploited them. Magicians have known all along that people's religious need and expectations provide the greatest opportunity for the most effective of all deceptions. But instead of turning against religion, as the skeptics among the Greek and Roman philosophers did, the magicians made use of it. After all, magic is nothing but the art of making people believe that something is being done about those things in life about which we all know that we ourselves can do nothing. Magic is the art of making people who practice it feel better rather than worse, that provides the illusion of security to the insecure, the feeling of help to the helpless, and the comfort of hope to the hopeless. Of course, it is all deception. But who can endure naked reality, especially when there is a way to avoid it? This is why magic has worked and continues to work, no matter what the evidence may be. Those whose lives depend on deception and delusion and those who provide them have formed a truly indissoluble symbiosis. Magic makes an unmanageable life

itself. In many cases, a plurality of aetiologies are acknowledged in an individual case: an enemy's malicious ritual sends a daimon to enter the body and disorder its healthy functioning, or by slander it angers a god against you, who sends an animal to bite or sting you, and so on. This interconnectability of aetiologies enables a network of meaning to connect the sick person with many levels of reality.

Time expressions in the EMs of the papyri are limited to the fevers in Hellenic medical theories: daily, nightly, tertian, semitertian, quartan, every-other-day, etc. *Pathophysiology* is limited in the EMs to obstructing or penetrating objects or substances, and to the misbehaviour of disordered organs. There are distinctions between acute, chronic, and impairing conditions: demoniacs and gout are chronic, the fevered and love-struck are acute, bites, stings, and gout are impairments, madness and epilepsy are not described, only named. Unlike characteristically "medical" literature, such as the *Hippocratic Corpus*, the EMs do not describe much about the *courses of sickness*, though in places they do acknowledge the degree of severity and the type of sick role. The treatments of the EM vary on a range corresponding to the range of aetiologies, and include rituals to nullify enemies' spells, exorcisms of daimons, ointments, manipulations of the body, antidote potions or expectorants, prayers to gods, and the speech of myths and power names and commands and threats to empower many of the foregoing.

d. Rhetorical devices for narratizing illness and negotiating treatment.

One major rhetorical device is the symbolic description of mythic events involving illness. Another is the first person address to nonhuman actors in the process, including the ailment and the medicine, and within that, the use of flattery-praise, threats, and commands, backed up with the force provided by sacred and secret names and sounds. Occasionally, the patient is directly addressed but with a transformed mythic identity.¹⁷⁶

manageable for those who believe in it, and a profession profitable for those who practice the art."

176 PDM xiv:574-80.

Semantic illness networks in the papyri pertain to the rhetoric of illness. A list of illness semantics is provided in the appendix (see below).

e. Interpretation

The therapist interprets the illness as corresponding to a cosmic-divine event, which will be engaged to include the particular microcosmic ailment in its macrocosmic efforts at rectification. The patient becomes a participant in the myth through the condition, thereby achieving meaning and communion while being excused of individual responsibility.

5. Clinical reality: sacred or secular, disease-oriented or illness oriented, focus of treatment (sick person, family, etc.), symbolic and /or instrumental interventions, etc.

The clinical reality of the illness in the symbolic healings has a both physical and mythic realities to it, but the sacred/secular distinction is not valid for the religious culture of the PGM in late antique Egypt. All illness realities are sacred. It is only weakly possible to speculatively postulate that some illness realities are more "secular" than others, such as those caused by the physical and ritual machinations of human enemies, employing naturally harmful poisons or malevolent daimons to inflict sickness;¹⁷⁷ while, on the other hand, accidents could be thus more sacred because no human responsibility can be imputed, and so, as in our symbolic examples, responsibility is ultimately more strongly linked to mythic events in a divine realm.¹⁷⁸ Accidents are not separable from the mythic realm, while the ill intent of an enemy may be so.

The focus of treatment is always upon the sick person, but not necessarily them as a "person:" in the spells the patient is almost never spoken to and is rarely addressed by name except in the third

¹⁷⁷ PGM IV:1525-45; VII:388-9,429-35,645-50; XII:14-95; PDM xiv:711-71.
¹⁷⁸ PDM xiv:600.

person, especially in adjurations to spiritual entities.¹⁷⁹ The focus is really more the condition itself, often explicitly referred to and addressed personally as an intrusive alien daimonic entity.¹⁸⁰ As for the family, they are even more peripheral, and seem to have no role in the treatment except as instruments to establish the healing relationship.

Interventions of both the symbolic and instrumental sort are common in the most medical spells. Some interventions are both symbolic and instrumental. For example, in our symbolic spells, the resorting to an engagement with myth is clearly symbolic, as we have seen; on the other hand it is clearly instrumental to cleanse wounds and use ointments or do manipulations when someone is choking on a bone. But when the instrumental intervention is a reenactment of a mythic event, it becomes loaded with symbolic significance as well, as is for instance the licking of the sting wound in PDM xiv: 607, which the healer does to clean the wound in imitation of the command of Isis to Anubis to lick his own sting. In fact, it can be seen that *the art of symbolic healing is to invest as far as possible the instrumental intervention with symbolic significance to augment the healing potential of the intervention.* That is why when administering antidotes, expectorants or remedies of any kind, the ritualist takes the time to address that substance itself with words of power to load it with symbolic significance for the patient - it is explicit in the instruction that such compounding and empowering be done in the presence of the patient during the therapeutic interaction:¹⁸¹ the patient has to see it done!

6. Therapeutic stages and mechanisms: process, mechanisms of change (catharsis, confession, altered state of consciousness, etc.)

Our primary examples are quite straightforward with regard to therapeutic mechanisms. After the symbolic linkage through the mythic particularization, the final stage of therapeutic action is engaged and brought to completion. There is an element of catharsis ("vomit") in

179 PDM xiv:591,619.

180 PGM IV:1525-45; VII:388-9,429-35,645-50; XII:14-95.

181 PDM xiv:562,574,587,592-3, 626.

the poison antidote,¹⁸² but as these conditions are very much physical and mechanical, the therapeutic aim is to remove the foreign substance and to cleanse and heal the wound.¹⁸³ There is no confession. Nor is an altered state of consciousness involved, unless we consider the shock and pain of the patient to be an ASC that could augment suggestibility to the healer's performance. But there is clearly not the same kind of "trance" production that is explicitly described elsewhere in the papyri with respect to attaining divination theophanies and oracular revelations, with which the papyri are replete.¹⁸⁴

7. Extra-therapeutic aspects: social control, political implications, etc.

Our primary symbolic examples are so self-contained as to be quite clear of most any extra-therapeutic aspects. The one exception to explain is why in PDM xiv:626 specific mention is made of a *woman* for the bone-removing spell while the previous similar spell did not. There are in the broader corpus significant extra-therapeutic gender issues with social control implications. In the first directive, the healer recites the mythic script and then performs a rather vigorous physical maneuver to expel the bone,¹⁸⁵ while in the second where specific mention of a woman is made, the healer only ends by offering her a ritually empowered cup of water.¹⁸⁶ Perhaps it can be ventured that in the case of a female patient, who it can be assumed was just as likely to present with a bone stuck in her throat as a male in his, the healer who was probably male was not socially permitted to take her head, neck, and body in hand for physical manipulation. This hypothesis is weakened to utter flimsiness when we consider the gynaecological and obstetric remedies in the corpus,¹⁸⁷ if they are performed by a male ritualist. Nearly all of them named in various spells are men, and the only female exceptions describe enchantresses from whom the spell derives (PGM XX:4-12, "the Syrian woman of Gadara;" XX:13-19, "Thessalian Philinna").

182 PDM xiv:589.

183 PDM xiv:563, 585, 589, 620

184 PGM IV:850; VII:550.

185 PDM xiv:581-585.

186 PDM xiv:626.

In the broader selection from the corpus, gender issues are explicit and clearly bear a heavy significance for someone. This is especially true in the "love" spells, which although certainly involving a lot of sickness and affliction, have nothing to do with healing it.¹⁸⁸ As this material goes, in the papyri the identity of the ritualist as male is almost always certain (PGM I:194, "share these things with no one except your legitimate son"); such so-called love spells are described as useful to him personally as the performer or for a client, also almost always male, with a couple of exceptions of note however: there are some female love spell clients targeting a male.¹⁸⁹ The latter spells are too few to generalize from, but they lack the explicit sexuality of the ones for the men.

Obstetric and gynaecological material is not elaborate, but well-attested in the papyri unmixed with other elements. It is placed in series with some thought to organization by the scribe who wrote the papyrus.¹⁹⁰

One extra-therapeutic political implication in the papyri is the secrecy and possible recognition of the illegality of some of the practices by the scribal editors.¹⁹¹ There are occasional exhortations to secrecy. Some of the materia medica dictionaries are concerned with decoding ingredients from secret names in spells and potions: herbs, minerals, and animal substances.¹⁹² One such explicitly states that the code was devised to keep the common person ignorant for his or her own protection:

Interpretations which the temple scribes employed, for the holy writings, in translation. Because of the curiosity of the masses they [i.e. the scribes] inscribed the names of the herbs and other things which they employed on the statues so that they [i.e. the masses], since they do not take precaution, / might not practice magic, [being prevented] by the consequences of their misunderstanding. (PGM XII:401-7)

187 PDM xiv:953-984.

188 IV:323-30, 388-9, 1525-45, 2444, 2735-40, 2930, 2943-66, 3273-4; VII:374-84, 645-50, 990-3; XV:636-9, and many more - see appendix.

189 PGM LXVIII:1-20; XV:1-21.

190 PDM xiv:953-984.

191 PGM I:194.

192 PGM XII:401-7; PDM xiv 1065-70.

Such a situation may be best explained as trade secrecy in a guild type organization. The illegality of "magic" in the Roman period was, as also in Jewish law, ambiguous with respect to healing: spells for rituals and amulets that were deemed to be therapeutic were often, but not always, excused from prosecution.¹⁹³ The early Christian churches certainly carried on this exemption, and developed their own corpus of ritual material with a largely, though by no means exclusively, therapeutic intention.¹⁹⁴

Efficacy in the Papyri

Because the papyri present the perspective of the ritualist healers alone, efficacy, "the perceived capacity of a given practice to affect sickness in some desirable way,"¹⁹⁵ is defined in their terms. It would be simplest to say that when a ritual has been successfully completed, it has been efficacious. Yet there are signs of concern with healing outcome in some spells, instructing the healer to return and do daily follow-ups until a wound is healed.¹⁹⁶ Some healings such as the extraction of a bone are clearly either efficacious or not by means of a physical sign.¹⁹⁷ Similarly, in the poison-antidote,¹⁹⁸ if the patient vomits and/or recovers and lives, efficacy is undeniable. Many other healings could be only temporary and in need of constant repetition and renewal, or perhaps they were even rather ineffective upon the sickness. But even so, the rituals are efficacious and worthwhile for these and all healings alike, when looked at in terms of the meaningfulness created for the sufferer by the ritual connection through symbolic bridging to the myth world. For the healing rituals enable a sick individual to share personal suffering with the very gods, and to understand their illness as a significant event related to greater general cosmic struggles.

193 Giuseppe Veltri, "The Rabbis and Pliny the Elder: Jewish and Greco-Roman Attitudes toward magic and Empirical Knowledge," *Poetics Today* 19:1, Pp63-89: See esp. Pp.66, 68, 70, 82, a 84 Re: the Talmudic laws on "the ways of the Amorite" and Constantine's law against magic.

194 If this were a larger study this would be the place to introduce the Coptic ritual papyri recently published by Meyer and Smith (see Bibliography below).

195 See previous definition above in Methodology section.

196 PDM xiv:562.

197 PDM xiv:585.

198 PDM xiv:563-74.

The Element of Power in the Papyri

The principal sources of power for healing in the papyri are not distinct from the other spells: establishing relationships with spiritual beings (daimons, ghosts, gods) who act as agents to carry out desired tasks. Preconditions for this to work include purity,¹⁹⁹ the knowledge and use of secret names,²⁰⁰ and the correct praxis of speech or action with the ritually required materials (e.g. a piece of the clothing of one who died violently).²⁰¹ The relationship may only in rare and ambiguous cases be said to enable the transference of divine power to the ritualist to possess personally. Usually it is clear that the power is superhuman and the ritualist has to use superhuman tools - secret names and special rites - to mobilize it. There is perforce a power in the act of speaking and writing the potent names, figurative descriptions, and divine myths and attributes. In many healing spells there is a sense that this power can be transferred to a carrier substance which is then administered externally or internally to the sick person to effect healing by transferring the power to the body. Hence the recurrent formula "speak to the oil..." In terms of symbolic healing, the healer activates symbolic connections for the patient by the recitation of words of power and secret names.

199 PDM xiv:515-16,476; PDM I:150,290-92.

200 PGM XXXVI:201.

201 Sacred plants, animals, or materials - such as the clothes of a prematurely or violently deceased person, see PGM CVII:12; LVIII:5-6.

C. Concluding Discussion: Questions and Challenges

Desiderata

Before concluding, the writer apologizes for a few more details: Due to limitations of time and space, it is impossible here to engage as deeply with the secondary scholarship bearing on the papyri as it deserves; Secondly, it would have also enriched this work to have read and integrated more of the abundant medical history studies of Greek, Roman, Egyptian, and Ancient Near Eastern medicine; Thirdly, given even more opportunity, a broader reading of the political and social history of Egypt in especially the Ptolemaic Hellenistic period would probably have added great value; Finally, research such as this ought to be grounded in a more thorough understanding of ancient Egyptian and Greek religions and myths than the writer has at the time of writing.

In fact, there were a lot of things I wanted to attempt to accomplish in this essay that inspired me, but which I have had to lay aside in somewhat relieved disappointment:

I would like to have attempted more to assist in further contextualizing magician-healers of the papyri, but the material I have uncovered is still insufficient for that. With respect to a few spells in the demotic corpus, I have been able to tentatively speculate about a guild of village professionals doing rounds about town and available on call. This matches the picture presented by other scholars.²⁰² I do not yet know what their relation is to the itinerant Hellenistic medics or to the ubiquitous itinerant holy men of Peter Brown's world.

I wish I could offer a comparison of the relation between settled medical centers (both old temples and new schools) and medical itinerants with the relation between itinerant holy men and settled

²⁰² David Frankfurter, "Ritual Expertise in Roman Egypt and the Problem of the Category 'Magician'" (pp. 115-136 in Schafer and Kippenberg, *Envisioning magic*), argues for a contextual reconstruction of the magicians as priests who functioned as local all-purpose ritual specialists.

religious communities (both old temples or new monastic communities²⁰³, Jewish and Christian), and even the relation between itinerant philosophers and settled philosophical schools.

And I wish that I could explore the speculative idea that the Greek wandering medics were among the significant catalysts in the Hellenistic world for the shifts from temple to mobile practice, the locative to utopian worldview put forward so persuasively by Jonathan Z. Smith.

These are all things that I wish I could do and explore, but not here, not now.

Conclusions

What I think I have done here and now is to show fairly well that the methodology of medical anthropology that John Pilch assembled and adapted for his New Testament work is remarkably well suited to the analysis of at least some of the medical material in the papyri, and for all my inadequacy to the task, as far as I am aware I am the first to try it. I think I found the best bits for it, but the rest is still so rich that books could, should, and I am sure will be written on it.

I also think I have done sufficiently well to show that the papyri are not mere "deception" and "gobbledygook" as someone once said in his introduction to the corpus. In ethnomedical terms, the texts preserve earnest, sincere, and in many cases no doubt very effective techniques to heal a great many conditions. Medical anthropological explanations and tools shine another kind of light on these rituals that exposes a different texture of shadows to delineate aspects of the culture that produced them. There is more to the papyri than meets the either the biomedical, the classical, or the religious eye. From another view, perhaps studying the medical material in the unique document of the papyri may also help medical anthropologists to further their explanations of how cultural factors are related to the healing process, which is an ongoing enterprise. The papyri do bear out "the

203 E.g. Qumran of the Dead Sea Scrolls and the "Essene" sect of Josephus; The Alexandrian "Therapeutae" of Philo.

best contemporary hypothesis ... that the sick person in a specific context uses the semantic and symbolic resources available and creates meaning." I believe that both the ritualists and the Hellenistic medics were in the business of collecting and sharing such resources to put them into practice, and the papyri comprise a record of that enterprise of professional development.

Pilch explained well how "healing boils down to meaning and the transformation of experience. The change or transformation is created by all participants who effectively enact culturally authorized interpretations."²⁰⁴ In a time and place of rapid cultural change, when there was less and less stability to what was authorized, the editors of the papyri collected anything that worked. The collection indicates the state of their world: native Egyptian myth jostles with Greek, Jewish and Christian elements share paper and ink with Nubian and Ethiopian, and languages are muddled together in the mix. But all were regarded equally as sources of meaning and ritual power to combine in common cause for the promotion of well-being at the expense of misfortune, one person at a time.

This study has shown that the papyri represent an especially rich and rewarding body of texts on which to undertake Pilch's recommendation. We have only begun disentangling "closely interwoven natural-environmental, human-biological, and socio-cultural threads forming the behavioral and conceptual network of human responses to the experience of illness"²⁰⁵ in these texts.

The foregoing exercise in developing and modifying an evolving conceptual system to account for the social and experiential peculiarities of sickness and healing, based on the work of so many others, has shown the viability of pursuing a comprehensive basis for understanding healing and health care in the culture of the papyri, which will allow for more appropriate cross-cultural comparisons.

We have shown that the papyri have their own peculiar ways of speaking about both efficacy and meaning. The ritualist healers of the

²⁰⁴ Pilch, 2000, p. 35.

²⁰⁵ Ibid, p. 21, citing Unshuld, 1988:179.

papyri were professionals, and their explanatory models disclosed the significance of a given health problem and treatment goals for the patient. For them, efficacy involved both symptom reduction and restoration of meaning to life. The professional healers of upper-Egyptian culture were not "physicians," but the traditional ritualists who came to be called "magicians," but who were recognized as kin by some Hellenistic physicians. Supporting this is the impression that the Demotic material contains more of an explicitly *medical* nature than the Greek. The therapies in the papyri do not fit the NT model, for they refer sometimes to physical remedies and afflictions and to empirical "testing," and maintain distinctions between the physical remedy (cure) and the production of meaning (healing).

We have seen how the papyri place threats into frameworks of meaning, especially by means of myth and exorcisms to control the disruptive effects. This is a therapeutic process attempting to restore order "by placing the threat in its proper framework, controlling the disruptive effect on the sick person and that person's network, and making the entire experience personally and socially meaningful."²⁰⁶

We have seen that there is a range of strategies in the healing and preventive activities of the papyri from empirical remedies²⁰⁷ and technological interventions to symbolic therapies like the placebo.²⁰⁸ The transactions in the papyri between the sick person and the healer(s) are hermeneutics of symbolic and semiotic interpretations in terms of very particular interpretive schemata. We tried to understand the papyri healings to be an engagement of the sick person and the healer in the interpretation of the context of their symbolic encounter and of the symbolic forms that are manipulated during the encounter.

We examined the four essential processes comprising stages of symbolic healing and necessary for its accomplishment. These insights have taught us that, as *healers*, the "magicians" need to be regarded as *cultural mediators*. We saw that there are systems of symbolic healing based on models of experiential reality in the papyri.

206 Ibid. p. 28.

207 Ibid. Citing Van der Geest and Whyte, 1988.

208 Ibid. Citing Moerman, 1983; and Dow, 1986.

We have looked at how the rituals, made up of a rich array of symbols in many modes, manipulate *symbolic forms* for the patient. We concentrated upon locating and defining the healing encounter as a particular type of ritual encounter in the larger corpus. These encounters repeat previously known forms of encounter, established in the mythic world and codified in handbooks. We have shown that these healing encounters were both empirical and produced *understanding* rather than new knowledge or explanation.

As Galen himself observed, the healings of the papyri were effective because they worked. They treated the condition, and also made the individual experience of illness meaningful, shared personal suffering, and transformed marginal situations of sickness by re-incorporating the individual into the social and mythic body: all the characteristics of healing.

Post Script: Thessalus the Magician

There is one text that deserves mention at least briefly again: the autobiography of "Thessalus the Magician." The reason for this is that it provides a unique witness to the papyri lacking within the corpus, and just that aspect of concern to us. This paper was originally intended to include this document in the central argument.

It is a statement of a personality. Thessalus is a Greek who came to Alexandria to pursue an education in medicine, but wanted to study ritual and gain supernatural healing powers. Many scholars identify him with the famous physician Thessalus of Tralles. His story is an account of his journey to Thebes, the source of our papyri, where he found an old temple priest to produce a private theophanic invocation of Asclepius (Iymhotep). Just such rituals are described in our corpus with matching details, and for the same expressed purpose: PGM VII:628-42; PDM xii:21-49,35-40; xiv:93-114; suppl:168-89. Some may view the account of Thessalus as a conversion to "magic," but he himself presents it as the final successful culmination of his medical education whereby he finally learns the art of healing from the god of healing himself, who becomes his friend and instructor. This is an

important text to study in close comparison with the papyri in any further work of this kind. I regret that I can take it no further at this point.

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Appendix: Statistical Overview of the Corpus

The present goal is to arrive at the medical theory (or theories) in the world of the papyri. Thus the study cannot limit itself to the healing spells alone, but must seek out and consider all of the rituals that refer to or act on the body: including prayers for well-being, curses and aggressive love spells meant to afflict others, divinations or oracles for diagnostic and prognostic revelations, drug or potion preparations, and the like.

To that end, the papyri have been combed for all such references in order to concentrate attention on them. The next stage is a statistical examination to classify the separate spells into categories based on theme, context, method, and any other noticeable trope. This is the search for patterns. It is hoped that such an analysis, if not uncovering something very valuable, will at least be interesting and helpful in refining research questions.

Semantic Illness Network:

Summary of conditions, afflictions, ailments, sicknesses/illnesses described in the papyri²⁰⁹

Intentionally Afflicted by Ritual Means:

Love spells

- heat/steaming/flaming/sweating/cooking in heart/liver/navel/belly (typical love spell among many IV:115-120)
- send in a daimon to burn guts/breast liver/breath/bones/marrow (daimonic love spell IV:1530-31)
- the same to burn/inflame brain and guts and suck out blood, daimon to enter "not by side or nails or navel or frame but by 'soul' and remain in her" (IV:1520-30)
- make ill (daimon love IV:2076)
- sickness, destroys,...make her ill, draw out her breath (love IV:2442, 2496)
- cause sickness (love slander IV:2625)
- insomnia, "sore distressed with wakeful cares" (love IV:2735-40, 2960; V:3274)
- madness (love IV:2769)
- "heaving of the sea...punishments" (V:3274)
- burn her heart/guts/liver/spirit/bones (love VII:981-93)
- causing insomnia (write a charm or conjure by lamp VII:374-76, 376-84)
- strike her heart/belly/intestines/womb; burning heat to heart/lungs/liver/spleen/womb/large intestine/small intestine/ribs/flesh/bones/in every limb/ in the skin; insomnia/grief and anxiety/anorexia/inability to drink (daimon sent to disorder bodily systems = slander love spells, xiv:636-69, 664, 665-6)
- cause madness, insomnia, withering (love xiv:1026-45)
- take away the mind (love; female for male, XV:11)
- cause her to swoon/sting the soul, heart, burn, inflame (love XIXa:51-53)
- inflame, burn her heart and soul (love XXXIIa:1,6)

209 Condition or situation is followed by summary reference to treatment in parentheses

-wasting (by daimon Myrrh entering right side, sent in love spell
XXXVI:333-60)
inflamed liver, spirit, heart, soul (love LXXXIV:1-21)

Other Spells of Affliction

-Death and destruction (I:99, IV:1167)
- causing "disease" (invocation of Apollo, I:330)
-cause psychological passions, bodily sufferings, incapacitating illnesses (XII:304-307)
-causing a skin disease that does not heal (wash the man with lizard oils xiv:389)
-causing blindness (beer in eyes xiv:391)
-causing (1 curing) evil sleep/death/chills/fever (recitation spell to sun or poison mixtures with narcotic herbs xiv:675-94,706,711,716,724,727,737,911,917)
-causing blindness (xiv:741-42)
-cause menstrual haemorrhage (LXII:100-104)
-causing madness (xiv:1182-87)

Not Intentionally Afflicted, Prophylactics or Healings

- "my soul is distressed, I am perplexed" (Re: daimonic attack, I:213-214)
- "semitertian fever" (diagnosis, III:466)
- calamity and terror, "plagued by ghosts" (IV:1064,1079)
- nonspecific daimonic possession (exorcism IV:1227-64)
- daimonic possession (exorcism IV:3007-86; 3084: treat by blowing air from tips of feet to face)
- Lovesickness, "throes of grievous love" (VI:13)
- uterus movement (conjured by voces Magicae to return VII:260-71)
- sickness, sufferings, daimons, phantasms (phylactery VII:579-90)
- seeing phantoms (love VII:888)
- smitten, afflicted (phylactery ring against daimons XII:260)
- demoniacs (ring power XII:281)
- demoniac (exorcism with asphalt and sulfur inhalation and sacred name XIII:242)
- erisepelas (skin disease cured with crocodile dung and sacred name XIII:245)
- sprain or fracture (cured with name and earth and vinegar XIII:247)
- resurrection of dead (by re-inspiration and conjuration by sacred name XIII:279-83)
- scorpion sting (amulet application healing VII:193-6)
- eye discharge (amulet application healing VII:197-8)
- migraine headache (amulet application healing VII:199-201, 201-202)
- coughs (amulet application healing VII:203-5, 206-7)
- breast hardening (amulet application healing VII:208-9)
- swollen testicles (amulet application healing VII:209-10)
- fever and shivering fits (speak to oil and anointing from sacrum to feet VII:211-212)
- daily fever, nightly fever (amulet application healing VII:213-14)
- dog bite saliva-venom healing (symbolic healing + cleansing and bandaging xiv:554-62;585-93)
- poison in heart; pus, venom antidote (symbolic healing + vomiting xiv:563-74)
- bone stuck in throat (removal symbolic healing and maneuver xiv:573-85,621-66)

- sting venom (by snake (?) lick and swallow venom out xiv:594-620)
- watery ear discharge (clean and apply mixture with copper = antibiotic xiv:935-39)
- vaginal bleeding (to stop it by drinking tonic xiv:953-55) (stop by herbal concoction administered in sex xiv:961-65) (stop by salt and oil medication administered with a tampon insert time duration specified xiv:970-77) (fasting, tonic drink, and honey soaked rag insert xiv:978-80) (bath and honey insert xiv:981-84)
- fertility/pregnancy test (urination on a plant xiv:956-60)
- gouty foot (anoint with oil concoction and breathe at him xiv:905-92) (poultice applied to pain spot xiv:993-1002) (amulet bound to the place xiv:1003-14) (wash and rub xiv:1021-23)
- healing ophthalmia (ointment plus text and picture amulet xiv:1097)
- abortion (?) (xiv:1188-89, p. 249 + n. 614)
- menstruation (fumigate xiv:1196-98)
- fever, headache, body pain...fever of night, fever of midday, headache, "burning heat of the fevers of those below the brow to his feet, from the head (mythic deity afflicted xiv:1219-27, invocation to heal)
- headache pain (amulet XVIIIa:1-4) (amulet XX:1-4) (amuletXX13-19)
- shivering fit, fever, daily or intermittent, by night or by day, quartan (amulet XVIIIb:1-7)
- inflammation (amulet XX:4-12)
- bloody flux (amulet XXIIa:2-9) (amulet LXIII:24-25) (amulet LXIII:26-28) (amulet LXV:1-4)
- pain in breasts and uterus (amulet XXIIa:9-10)
- contraceptive (amulet XXIIa:11-14)
- elephantiasis (amulet XXIIa:15-17)
- every shivering fit, tertian, quartan, quotidian, every-other-day fever, one by night, mild fever (amulet XXXIII:1-25)
- ulcer of the head (prepared ointment lxi:43-48, 49-57)
- erection (ointment and decoction to reverse effect lxi:58-62)
- fever with shivering fits, daily, nightly, quartan, touching soul, body (amulet with biblical verses LXXXIII:1-20)
- shivering fit and fever, daily fever, headache, nightly, quartan, semiterian, "grant him healing" (amulet and prayer LXXXVII:1-11)
- fever (amulet LXXXVIII:1-19)
- paediatric fevers of all kinds, caused by demons or phantoms (LXXXIX:1-27)
- for poor eyesight (drying powder made with saffron XCIV:1-6)
- tumors (amulet XCIV:27-35)
- migraine headache (amulet XCIV:39-60)
- epilepsy and seizures (amulet XCV:7-13) (amulet XCV:14-18)
- lung disease (amulet XCV:14-18)
- eye disease (amulet of lizard eye put onto affected eye XCVII:1-6)
- shivering fit and fever, daily fever... tertian, quartan, quotidian, daily, or everyday (amulet CIV:1-8) (amulet CVI:1-10)
- scorpion sting (amulet CXII:1-5) (amulet CXIII:1-4)
- inflammation of the uvula (amulet CXX:1-13)
- death/darkness/mental illness/grief/fear/illness/poverty/disturbance; rudeness/evil/the evil
- eye/debauchery/slavery/indecency/lamentation/troublesomeness/emptiness/malignancy/bitterness/arrogance
- (phylactery with a litany (?) of two columns listing ailments psychological, physical, and moral)
- dangerous drugs (XXXVI:222)
- contraception ("the only one in the world"! herbal amulet XXXVI:300-32)