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From Hippocrates to Islam and
Byzantium

Edited by
Petros Bouras-Vallianatos and
Sophia Xenophontos

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9 Reading Galen in Byzantium

The fate of *Therapeutics to*
*Glaucon**

Petros Bouras-Vallianatos

Τῷ Γερασίμῳ

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Τῷ Γερασίμῳ

Introduction

Much of what we possess of Greek literature nowadays we owe to the Byzantines, who were keen readers of ancient works and avid collectors of manuscripts, thus ensuring their transmission.¹ However, over and above the significant contribution to the preservation of Greek treatises by Byzantine readers, we often underestimate the intellectual activity of Byzantine authors reflected in their creative transformation of ancient texts, and thus simply label them mere compilers or mediators of the ancient legacy.² As Hans Robert Jauss has so nicely illustrated, a text is a living entity not just in the original context in which it was produced, but in any cultural environment where it is revived, and provokes different responses from its various readers in each period.³ It would be seriously deluded to think that we can somehow recreate the original responses of Byzantine readers, but we can get an idea of the readers' perspective by examining, for example, the role of Byzantine authors as users and interpreters of ancient texts. Such an examination will not only emphasise the various ways that ancient texts influenced and facilitated the needs of Byzantine readers, but it will also provide us with a better understanding of the various versions and forms in which a given ancient text became available in Byzantium.

In this chapter, I shall focus on the Galenic corpus, whose dissemination in the Byzantine world was widespread and influential; in particular, I have chosen to examine the various revivals of Galen's *Therapeutics to Glaucōn*, which was copied widely. A number of authors produced commentaries based on this treatise and some were invariably influenced by it in composing their own works throughout the Byzantine era (AD 330–1453).⁴ My study is not exhaustive, but rather I shall select specific examples of interest from the various forms of evidence. First, I shall provide some basic introductory details on Galen's *Therapeutics to Glaucōn*, followed by a section on its circulation and textual transmission in Byzantium. Then, I shall go on to discuss its revival by Byzantine medical authors into two further sections; the first focuses on commentaries and the second deals with medical handbooks.

Galen's treatise and its target audience

Galen's *Therapeutics to Glaucōn* (Τῶν πρὸς Γλαῦκωνα θεραπευτικῶν βιβλία β') is a treatise in two books written at some point between AD 170 and 174.⁵

It was addressed to Glaucón, who seems to have been a contemporary philosopher and Galen's friend. In his *On Affected Parts* Galen provides a long case history in which he refers to a certain Glaucón, who is most probably to be identified with the addressee of the aforementioned treatise.⁶ According to Galen's account, Glaucón encountered him on the streets, not long after Galen first arrived in Rome (AD 162–165/6), and urged him to visit and examine his sick friend, a Sicilian doctor. For, according to Galen, Glaucón – in introducing the patient's condition to him – said:

... I wanted to find out for myself, not in regard to you personally, but as to whether medical science is able to make a diagnosis and prognosis in such a case.⁷

We have it on Galen's own authority in this particular anecdote that Glaucón was a philosopher (Γλαύκωνος τοῦ φιλοσόφου), yet he seemed interested in medicine, in particular in the ability of a physician to make accurate diagnoses and prognoses. But it is clear that he was not a professional physician at the time. At the end of the account, Glaucón appears amazed by Galen's outstanding ability to diagnose very quickly and without any prior knowledge of the patient's condition that the Sicilian was suffering from inflammation of the liver.

Later on, Glaucón particularly requested Galen to write a special method of treatment, i.e. *Therapeutics to Glaucón*, for him.⁸ Right from the very beginning of his work, Galen is eager to show Glaucón's strong association with philosophy once more by saying to him:

For truly it would be laughable if I were to teach you your own business, as if you had not learned these things from Plato long ago.⁹

Meanwhile, from various references in the text, we can deduce that Glaucón had already read Galenic texts on anatomy (*On Anatomical Procedures*) and drugs (*On the Capacities of Simple Drugs*) and was expected to become familiar with Galenic treatises on pulses and the *On Mixtures*;¹⁰ furthermore, he seemed to know how to prepare certain medicaments.¹¹ Additional evidence shows that Glaucón was familiar with Galen's recommendation on the treatment of cancerous swellings,¹² and was probably expected to be able to perform phlebotomy and scarification.¹³ We are also informed that he used to accompany Galen, as, for example, when the latter was treating a patient with a small fistula.¹⁴ In the epilogue of his work, Galen confirms that Glaucón would take his book on a journey on which he was soon to depart in case he encountered any medical problems.¹⁵ Byzantine physicians, such as Oribasios and John Zacharias Aktouarios also wrote medical handbooks, *Synopsis for Eunapios* and the *Medical Epitome* respectively, to help travelling laymen, in case there was no physician available on their journey.¹⁶ Galen's claim that, thanks to his treatise, Glaucón would be able to tell why in certain cases a physician had come to erroneous conclusions is striking,¹⁷ and recalls Oribasios' account in which he presents his addressee, the "sophist" Eunapios, as being capable of judging a physician's opinion where there was a disagreement

(διαφωνία) between professionals.¹⁸ Moreover, the exclusion of invasive surgery from the treatment recommendations reinforces the impression that Galen's addressee was not a professional medical man.¹⁹ Thus, Glaucon could be seen as a *philiatros* (amateur physician or friend of medicine),²⁰ a philosopher with a great interest in medicine rather than a professional physician.

On the other hand, it is notable that Galen ends his work with a promise to Glaucon that he would compose his *Therapeutic Method* and his two treatises on the composition of drugs,²¹ which he would give him on his return or would be willing to send him, should he prolong his trip.²² The *Therapeutic Method* was not a treatise for the layman or ordinary physician, but presupposed a substantial knowledge of medical theory and experience.²³ This, of course, emphasises Glaucon's great interest in Galen's writings on various medical disciplines, as has already been mentioned above, although we should not exclude the possibility that Glaucon might have started studies in medicine or been intending to undertake such a course of study soon. It should be noted that there is a lack of references to *Therapeutics to Glaucon* in other Galenic works, since all its contents are covered in more detail by other of his works.²⁴ The first book of *Therapeutics to Glaucon* deals with the diagnosis and treatment of fevers.²⁵ The second book focuses on the treatment of inflammations, tumours, and swellings.²⁶ In fact, as can be seen in Table 9.1 *Therapeutics to Glaucon* could be seen as a medical handbook that takes a synoptic form by comparison with Books 8–14 of Galen's long masterpiece *Therapeutic Method*, which treats approximately the same topics in much more detail.

To sum up, there is no conclusive evidence confirming that Glaucon ever practised medicine. *Therapeutics to Glaucon* is a work designed to allow its readers to access practical information on the diagnosis and treatment of various kinds of fevers and inflammations easily. It was presumably intended for well-educated people, who possessed a keen interest in medicine; it could perhaps also be useful

Table 9.1 Contents of Galen's *Therapeutics to Glaucon* and their correspondence with particular sections of the *Therapeutic Method*

<i>Therapeutics to Glaucon</i> , ed. Kühn (1826) XI.1–146	<i>Therapeutic Method</i> , 8–14, ed. Kühn (1825) X.530–1021
Book 1: Chapter 1, general principles; Chapters 2–16, diagnosis and treatment of ephemeral, tertian, quartan, quotidian, and continuous fevers and associated symptoms.	Books 8–12
Book 2: Chapters 1–4, diagnosis of different kinds of inflammation and their treatment, including also <i>erysipelas</i> , <i>herpēs</i> , and <i>anthrax</i> .	Book 13
Book 2: Chapters 5–13, treatment of oedema, scirrhus swellings, scirrhus in the spleen and liver, tumours, abscesses, fistulae, gangrenous inflammations, cancerous tumours, and elephant disease.	Book 14

for medical novices who had already been initiated into the basic theoretical principles of the art and wanted to acquire knowledge on the above mentioned topics.²⁷ And we should not preclude its possible use as a brief *vade mecum* by travelling physicians too.

Textual transmission and dissemination in Byzantium

Modern scholars are often preoccupied with the interpretation of certain passages in particular ancient works. If a critical edition is available, scholars can benefit from the *apparatus criticus*, which documents the various readings in the manuscripts. In the case of Galenic works, in particular, the editor often has to consider the indirect tradition, and perhaps their medieval translations into other languages, such as Latin, Syriac, Arabic, and Hebrew. And this can be particularly useful not only in helping an editor choose a particular reading but also in completing parts of a text which survive in a fragmentary version in Greek.²⁸ However, we should bear in mind that a critical edition involves the editor attempting to restore the text to a state that is as closely as possible to its original or archetypal text, and how successful s/he is in this depends on a variety of factors, including the editor's skills and familiarity with the author as well as the quality of the witnesses.²⁹ The latter is very important for our study, since unlike modern publishing, in which a printed text has exactly the same format in all copies of the book, a Byzantine reader could encounter a Galenic work in a variety of versions and layouts.

The *Therapeutics to Glaucon* or excerpts of it survive in approximately thirty Greek manuscripts.³⁰ The vast majority of the manuscripts date between the thirteenth and the sixteenth centuries, although there are a few earlier witnesses, the earliest ones being dated to the tenth century, i.e. Parisinus suppl. gr. 446 and Vaticanus gr. 2254.³¹ In the absence of a critical edition, we are fortunate to have a brief study by Serena Buzzi of the text in Parisinus suppl. gr. 446 (= **P**),³² which is collated with the early nineteenth-century edition by Carl Gottlob Kühn. Since Kühn's edition does not provide variant readings and we often cannot be certain whether particular readings are based on manuscripts, earlier editions or an editorial intervention,³³ I have collated specific passages of the first book in three witnesses, namely **P**, Laurentianus Plut. 75.9 (= **F**), and Beinecke MS 1121 (= **Y**), which allows us to draw interesting conclusions about the versions of the text that might have been available in Byzantium.³⁴ **P** is a parchment manuscript consisting of a collection of medical texts by Galen, Hippocrates, and Byzantine authors such as Paul of Aegina and Leo the Physician.³⁵ There are a couple of folia missing from the beginning of the manuscript, while several folia are in such poor condition that they often preserve only a fragmentary version of the text. In fact, this damage must have happened at quite a late date and been caused by external factors related to its conservation and thus these losses are not associated with the actual production of the manuscript. However, there are often excerpted Byzantine manuscripts in which the scribe intentionally copied only a certain part of the work, as for example in Parisinus suppl. gr. 634 (= **Q**),

most probably dating to the twelfth century, which contains only the second book of the Galenic treatise.³⁶ Thus, a complete version of a given text might not always be as easily accessible to Byzantine readers as one might think. On the other hand, **Y** and **F**, twelfth- and fifteenth-century manuscripts respectively, contain the Galenic treatise in its entirety in combination with other Galenic works (**Y**) and the medical corpus of the late Byzantine physician John Zacharias Aktouarios (**F**).³⁷

I shall present two examples, which correspond to two common reasons for which a variant reading may be found among the various witnesses of a text. Firstly, we can very often encounter the transposition of words or small phrases, which in most cases do not result in any significant difference in meaning. As we can see, **P** and **F** are in agreement but differ from **Y**:

P (f. 1r)

... τὰ τῶν κατακλίσεων τε καὶ τὰ τῆς [ἀναπνο]ῆς καὶ ὅσα κάτω τε καὶ ἄνω κενούτ[αι]

F (f. 177r)

... τὰ τῶν κατακλίσεων τε καὶ τῆς ἀναπνοῆς· καὶ ὅσα κάτω τε καὶ ἄνω κενούται·

... the [signs drawn] from the way the patient lies and from respiration and from those things that are expelled from downward and upward.

Y (f. 108v)

... τὰ τῶν κατακλίσεων τε· καὶ τὰ τῆς ἀναπνοῆς· καὶ ὅσα ἄνω καὶ κάτω κενοῦνται·

... the [signs drawn] from the way the patient lies and from respiration and from those things that are expelled from upward and downward.³⁸

If we look more closely, we can see that **F**, unlike **P** and **Y**, omits the article *τά*, which again, although it provides a variant reading, does not affect the reader's understanding of the text. However, our second example shows that sometimes a large, and occasionally significant, part of the text can be omitted in certain witnesses, in this case in **P**:

P (f. 4r)

... κατὰ τὴν πρώτην ἡμέραν ἀλλὰ τὴν δευτέραν γὰρ πειραταῖον ἐξευρεῖν τὴν ἰδέαν τοῦ πυρετοῦ·

... [if possible make] a diagnosis on the first day, otherwise you must attempt to discover the kind of fever on the second day.

Y (f. 111r)

... κατὰ τὴν πρώτην ἡμέραν διαγνωστέον εἰ οἷός γε τις ἐστὶν ὁ πυρετός· ἄρα γε χρόνιος ἢ ὀξύς· καὶ πότερον τῶν διαλειπόντων καλουμένων ἢ τῶν συνεχῶν· εἰ δὲ μὴ οἷόν τε περὶ τὴν πρώτην ἡμέραν· ἀλλὰ τὴν δευτέραν πειρατέον ἐξευρίσκειν τὴν ἰδέαν τοῦ πυρετοῦ·

F (f. 180v)

... κατὰ τὴν πρώτην ἡμέραν διαγνωστέον οἷός γε τις ἐστὶν ὁ πυρετός· ἄρά γε χρόνιος ἢ ὀξύς· καὶ πότερον τῶν διαλιπόντων καλουμένων ἢ τῶν συνεχῶν· εἰ δὲ μὴ οἷόν τε περὶ τὴν πρώτην ἡμέραν, ἀλλὰ τὴν δευτέραν, πειρατέον ἐξευρεῖν τὴν ιδέαν τοῦ πυρετοῦ·

... [if possible make] a diagnosis on the first day as to what the fever is; whether it is chronic or acute and whether it is one of the so-called intermittent or one of the continuous fevers. If a diagnosis is not possible on the first day, you must attempt to discover the kind of fever on the second day.³⁹

Having seen some cases which help us better understand the role of scribes in the transmission and dissemination of the *Therapeutics to Glaucon*, it should be noted that variant readings in Byzantine manuscripts may sometimes result from the scribes' efforts to consult more than one surviving manuscript or to make their own contributions to improve the text, much like a modern editor. We should also bear in mind that Byzantine copyists were not themselves native speakers of Attic Greek.⁴⁰

What is even more striking is the impression the reader can get from the mise en page or folio layout when consulting a particular manuscript.⁴¹ In the case of *Therapeutics to Glaucon*,⁴² we can identify at least three different ways of arranging the text:

- a) The text is contained within the central area outlined by the rulings with occasional brief marginal annotations.
- b) The text occupies the central part of the folio; extensive scholia occupy the margins.
- c) Longer or shorter extracts from the text (lemmata) alternate with a systematic commentary in the central space and are supplemented by occasional brief marginal annotations.

Let us first concentrate on some examples of the first category in which the text is transmitted in the central area without any associated commentary or substantial parts of the text in the margins. There are, however, sometimes marginal notes, made either by the scribe or by later hands, which are designed to facilitate the reader's consultation of the Galenic text. They can for the most part be divided into two groups. First, there are some *notabilia*, single words or brief phrases intended to highlight a particular passage of the work. For example, in **P** (see Figure 9.1, f. 11v) we often see an abbreviation of the second-person singular aorist imperative $\sigma\eta(\mu\epsilon\acute{\iota}\omega\sigma\alpha\iota)$, which is a very commonly used injunction in Greek manuscripts as an emphatic indicator that could be translated "note well" or "take notice" and denotes a particular place of interest in the text.⁴³ It may sometimes be followed by another word or a brief phrase referring to the particular contents of the passage in question, as in **Y** (see Figure 9.2, f. 117v), where there is the following reference to therapeutic methods:

$\Sigma\eta(\mu\epsilon\acute{\iota}\omega\sigma\alpha\iota)$ $\pi\epsilon(\rho\iota)$ $\phi\lambda\epsilon\beta\omicron\tau\omicron\mu\acute{\iota}(\alpha\varsigma)$

Note well [this section] on phlebotomy

Similarly, in **Y** (see Figure 9.3, f. 117r) and less often in **F** (see Figure 9.4, f. 175r) chapter titles usually appear in the margins, whereas in **P** they are inserted in majuscule in the central area otherwise reserved for the text (see Figure 9.1).⁴⁴ This is a common feature of Byzantine medical manuscripts, and what is remarkable is that there are considerable discrepancies in the length of chapters and in chapter titles among the manuscripts of a single work, indicative of the constant intervention of scribes and readers in the transmission of the treatise. It is notable that modern editors of Galen do not in most cases provide chapter titles in their editions, considering them later additions to the text.

The second group in this format includes annotations concerning additions or corrections to the text, which in the majority of cases appear in the margins, either simply set beside a particular part of the text or cross-referenced with it by symbols, such as a cross or an asterisk. For example, in **P** (see Figure 9.1), the scribe uses a cross in the main body of the text above the word αἱμορραγία (= haemorrhage) to cross-reference ἐρωγύα, a misspelling in the margin of ἐρρωγυῖα (= rupture [of veins]).⁴⁵ This is most probably the correct term, since it is retained in this particular passage in **F**, **Y**, and Kühn's edition in preference to αἱμορραγία, which is closely related in meaning and used in the text some sentences above and below.⁴⁶ Having checked the accuracy of his copy against his model, the scribe discovered the erroneous reading, which could only be indicated as a correction in the margin, it being too late for a major intervention in the main body of the text. Sometimes, these kinds of emendations can also be found above the line (*supra lineam*).

The next two categories of layout involve the existence of a commentary on the text. The texts themselves and their contents will be discussed in the next section, but I shall focus here on the modes of presentation of the Galenic work in association with its commentaries. In the case of **Q** (see Figure 9.5, f. 39v), the text (ff. 39r–64r) is surrounded by an anonymous collection of scholia on parts of the second book of the *Therapeutics to Glaucón*, written in the margins in the same hand as the main body of the text. The scholia occupy the upper, lower and outer margins of the first few folia (ff. 39r–40v) but become less extensive in the next part of the text (ff. 41r–v, 42r–v, 43v, 44r, 45r, 46r–v, 48v, 49r–v, 58v), where they are usually limited to the upper or outer margins. There is no commentary on the remaining folia.⁴⁷ It is notable that in this case the scribe does not use any particular symbols to connect parts of the text with particular scholia, and sometimes, there is no obvious correlation between the text and the commentary, although in some cases scholia are prefaced by a gloss containing a brief phrase or term referring back to the main text. Perhaps, the scholia were written independently in several stages and only later compiled and added into the margins of **Q**.⁴⁸ Interestingly, the lower margin (on ff. 41r–v, 42v–45v, 48v, 50r–57v, 58v–64r) often transmits parts of another Byzantine medical text, i.e. Theophanes Chrysobalantes' *Medical Epitome*, which is copied on several folia throughout the codex by a later hand and has nothing to do with the *Therapeutics to Glaucón* (see Figure 9.6, f. 48v).⁴⁹ In this respect it is important to emphasise the high cost of writing materials,⁵⁰ which often forced manuscript owners to use any available space in an

existing codex to copy other texts of their choice, in this case a medical text with brief, easily consulted medical advice intended for daily practice.

On the other hand, the late fifteenth-century Marcianus gr. App. cl. V/4 (coll. 544) (= **M**) written on parchment, contains Stephen's (fl. late sixth/early seventh century) lemmatic commentary on the first book of the treatise on ff. 125v–157v,⁵¹ in which long and short passages from the first book of the Galenic text alternate with commentary in the central part of the folio (see Figure 9.7, f. 133v). The manuscript contains a large collection of Galenic treatises, and the commentary on the first book is followed by the second book of the *Therapeutics to Glaucon* on ff. 157v–167r. Unfortunately, there is no surviving manuscript of the commentary dated to the Byzantine period, but presumably earlier Byzantine witnesses of the text were copied; it is important to emphasise that Stephen commented on the entire first book, and thus, the surviving manuscripts of the commentary are also considered witnesses of the Galenic text itself.⁵² The margins of **M** are generally left intentionally free of text, with the exception of some marginalia, which can be classified into two main groups as discussed above. First, we can, for example, see use of the term ἀπορία (= difficulty) and λύσις (= solution) to designate the effective explanation of a difficult passage on f. 130r.⁵³ In the second group we can include brief additions to the text by the scribe, such as on f. 127r.

Both layouts have their advantages and disadvantages.⁵⁴ In the case of **Q** both the main text and the commentary in the margins run continuously allowing the reader to read the Galenic treatise without necessarily consulting the commentary, unlike in **M**, in which the commentary alternates with the Galenic text in the central area in blocks of various sizes. Stephen's work was not written to be read on its own but rather in conjunction with the Galenic work, which shows the commentator making more of an effort to urge his reader to approach the Galenic text from his perspective, a technique also used by Galen in his own commentaries on Hippocratic treatises.⁵⁵ In similar vein, one might argue that the presence of scholia in the margins give the reader a sense of completeness, encouraging him to think that everything he needs in order to understand the text is there. In both cases the reader immediately notices the co-existence of two different textual entities. The different forms of layout serve as visual aids, directing the readers' eyes to the authoritative role of the commentator and his engagement with the Galenic text.

A last, noteworthy example of the various visual aids deployed in manuscripts to help the reader contextualise a text in Byzantium – and one which deserves special mention – is that of the branch diagrams in the form of divisions (*diairesis*) related to *Therapeutics to Glaucon* (ff. 337r–338v; see Figure 9.8, f. 338r). They are part of a large collection of such diagrams on various Galenic works in the late Byzantine codex Vindobonensis med. gr. 16 (= **V**) (ff. 329r–359v), a manuscript dated to the thirteenth century.⁵⁶ As we will see below, these diagrams seem to correspond to Stephen's commentary and were perhaps constructed as companion pieces for the reader in the form of paratextual elements rather than textual entities in their own right. For example, in late Byzantine medical manuscripts, we can see branch diagrams focusing on a particular theoretical aspect,

such as the one in Figure 9.9 (Wellcome MS.MSL.52, f. 146r), which shows the four qualities and accompanies John Zacharias Aktouarios' corresponding chapter on the subject in the majority of the manuscripts. The current version of V does not contain the original text by Galen, but certain labels point out to particular contents of both the text and presumably the commentary. In fact, this kind of retention aims to increase the reader's ability to get involved with fundamental principles of the text, diagnostic and therapeutic, and enhance his/her memory.

Thus, an examination of some fundamental aspects of the transmission of the Galenic text and the various layouts used in medieval manuscripts shows the great importance placed on the format and presentation of the text by Byzantine scribes and authors, who used various motivational strategies to influence the reader's approach to it. In the next section, we shall see in more detail how *Therapeutics to Glaucon* was adopted in an educational context.

Medical education and Byzantine commentaries

By the early sixth century we can ascertain the existence of a syllabus for the teaching of medicine in Alexandria.⁵⁷ It is worth noting that recent excavations at the Kom el-Dikka site in Alexandria have uncovered lecture halls dated to the sixth century, which might have served as auditoria for those studying there.⁵⁸ Students followed a medical curriculum consisting of Hippocratic and Galenic texts. In particular, as regards the Galenic canon, of the so-called sixteen books, three versions survive in Arabic.⁵⁹ The various works were arranged in order of specialisation starting from works intended to give beginners the essential theoretical background, such as *On Sects for Beginners*, and the *Art of Medicine*, followed by specialised treatises on anatomy, diagnosis, and therapy. In all three versions, *Therapeutics to Glaucon* was included among the introductory treatises, which could be explained by its elementary orientation and concise nature discussed above. Alexandrian scholars wrote summaries,⁶⁰ commentaries, and composed branch diagrams on these Galenic works to facilitate their students' learning experience.⁶¹

In this section, I will deal with the extant commentary on the text by Stephen and the corresponding branch diagrams. I will also include in my discussion a collection of scholia, which might not necessarily be connected with the study of the Galenic treatise in Alexandria, but was intended to offer supplementary information to help the reader understand the text better. Before that, however, it is important to mention that apart from the surviving Greek commentary by Stephen, there is an extant anonymous Latin commentary on the first book of the *Therapeutics to Glaucon* and a summary of the entire Galenic treatise in Arabic. The Latin commentary is transmitted in the same manuscript, i.e. Ambrosianus G 108 inf. (second half of the ninth century), along with the commentaries *On the Sects for Beginners*, *Art of Medicine*, and *On the Pulse for Beginners* by the so-called Agnellus; the commentaries which clearly serve a didactic purpose were most probably the product of scholars based in sixth-century Ravenna.⁶²

The Latin commentary shows similarities with the Greek commentary by Stephen, but according to Nicoletta Palmieri, the modern editor of the text, it is impossible to argue for a definite dependence and it is more likely that both commentaries derive from an earlier common tradition.⁶³ It is noteworthy that the Summary (Jawāmi‘) to the *Therapeutics to Glaucon* also shows a close affinity with Stephen’s commentary in Greek.⁶⁴

Stephen is the author of a surviving commentary on the first book of the *Therapeutics to Glaucon*.⁶⁵ He also wrote commentaries on the Hippocratic treatises *Aphorisms* and *Prognostic*.⁶⁶ We know very little about the author himself. He may have practised medicine, as he seems to be an expert on clinical issues and occasionally refers to patient visits.⁶⁷ We should not reject the possibility that Stephen is the same person as the homonymous early Byzantine author who wrote philosophical and astronomical commentaries, although this identification is highly controversial.⁶⁸ His medical commentaries show familiarity with the contemporary lectures and medical curriculum in Alexandria.⁶⁹ His *Commentary on Galen’s “Therapeutics to Glaucon”* is written for those in the first stages of their medical education.

The surviving version of the commentary does not follow the usual division into lectures (πράξεις), consisting of a general discussion (θεωρία) of the passage being interpreted and of remarks on the language and style (λέξεις), that was developed in Alexandria and it lacks a formal proem.⁷⁰ It starts with the Galenic lemma corresponding to the first couple of lines of the prologue, which is followed by Stephen’s comments. Throughout the commentary, there is an evident attempt by an experienced teacher (i.e. Stephen) to explain difficult or ambiguous passages to his beginner students in a more detailed and didactic way.⁷¹ Stephen’s awareness of the level of his readers can be seen, for example, in the reference to the role of bathing for those having fevers, where in an attempt to provide concise and easily comprehended advice, he states:

. . . here we shall be brief and recall only as much as [is] appropriate for beginners (εἰσαγομένους).⁷²

The educational objectives of this commentary are also evident from the regular use of verbs, such as “we have learned”⁷³ (ἐμάθομεν/μεμαθήκαμεν) and “we have said” (εἰρήκαμεν), with which Stephen reminds his contemporary intended readers of the content of past lectures.⁷⁴ Then again, the use of the first-person plural shows an attempt by the author to give his account a sense of inclusivity and actively engage his absent readers.⁷⁵ It is notable that Stephen never expresses any kind of criticism of the Galenic theories, although sometimes he is eager to state that Galen does not provide his readers with all the necessary details.⁷⁶ A specific example may help us to elucidate further Stephen’s role as a commentator. The passage starts by providing the Galenic lemma:

Certainly these signs are common in those who are otherwise anxious in any way whatsoever. It is especially necessary to draw distinctions on the

evidence of the eyes, even in those who are healthy. And in those who are ill they are the clearest signs, at least to one who is able to observe them accurately. This, then, is the appropriate way to distinguish someone anxious due to studies or some kind of intellectual activity from those who are grieving.⁷⁷

This is followed by Stephen's account:

Now he [i.e. Galen] has already distinguished grief from rage on the basis of the difference he mentioned, namely that of the urine and, for that matter, also on the basis of emaciation and the hollowness of the eyes and colourlessness. [But] these symptoms also occur in the case of people who brood. How, then, shall we distinguish them? Galen himself passed over this topic in silence, saying only that [we must] distinguish them by reference to the eyes, but not adding exactly how it is that we must distinguish them. As such, we ourselves should add that in the case of patients who grieve the eyes appear as it were fixed and immobile, whereas in the case of the brooding they are quite mobile and roll around. This is because the eyes announce to us the passions of the soul, since they are the gateways to the brain, in which the soul resides . . .⁷⁸

The reader, having read the Galenic passage, turns to look at Stephen's comments. Stephen first emphasises the incomplete status of Galen's account of how to identify signs connected with the diagnosis of ephemeral fever, then proceeds to complement his master's account with new information based on his own view. As a consequence, the reader is provided with handy, practical details which might help him if he faces a similar situation when practising medicine. Thus, Stephen's main role is to clarify and explain Galen's account, as he himself acknowledges when he says:

This passage [i.e. Galenic lemma] is not expressed clearly (ἀσαφῶς ἐρμηνεύεται⁷⁹), and so we ourselves shall clarify (σαφηνίσομεν) it.⁸⁰

Moreover, he is often quick to defend certain Galenic views by openly addressing those (τινες) who criticise Galen and highlighting the superiority of Galen's own discoveries compared to those of other ancient physicians.⁸¹ In this way, he guides his readers through the ancient medical knowledge by means of his own thought world.

Having had a glimpse of Stephen's intentions and his way of commenting on *Therapeutics to Glaucón*, I shall now turn to discussing two particular methods he often uses in his account, offering the reader a new perspective on how to approach and make use of the Galenic treatise. First, Stephen cross-references to other Galenic texts⁸² (such as *On Mixtures*, *On the Sects for Beginners*, *On Crises*, *Therapeutic Method*, *On the Differences among Fevers*, and *On Critical Days*) and Hippocratic ones (such as *Aphorisms*, *Prognostic*, *Epidemics*, and *On Nutriment*),⁸³ most of which were part of the teaching curriculum, as well as other

potentially useful statements from treatises by other authors, such as Aristotle's *On the Soul*.⁸⁴ The most interesting references are those to other medical works that were studied in Alexandria. For example:

Note here something that we also said in the *To Teuthras on the Pulse*, namely that the irregularity proper to fevers is that the limits of diastole are faster than the middle phases, and the outer limit faster than the inner.⁸⁵

Indeed, *To Teuthras on the Pulse* (also known as *On Pulse for Beginners*),⁸⁶ is a Galenic treatise written for those in their initial stages of their education and was studied in Alexandria before the *Therapeutics to Glaucon*. There are also examples in which Stephen prefers to cite the relevant passage from a work mentioned briefly, as in the case of Hippocratic *Aphorisms*:

Due to the motion and boiling of humour in irregular motion, sometimes moving from one part to another and sometimes settling around the stomach, such patients suffer malaise. This is exactly what Hippocrates says: "For patients nearing crisis, the night before the paroxysm is uncomfortable".⁸⁷ He also regards the nature of the day as a sign of the impending crisis . . .⁸⁸

This not only implies the use of Stephen's work as a companion to *Therapeutics to Glaucon* in an educational context, but also shows how contemporary teachers encouraged students to read certain parts of a text in combination with passages from other Hippocratic and/or Galenic works. *Therapeutics to Glaucon* is no longer an isolated work written for a *philiatros*, but part of a teaching corpus, in which a certain complementarity had been built up among the constituent items by contemporary teachers.

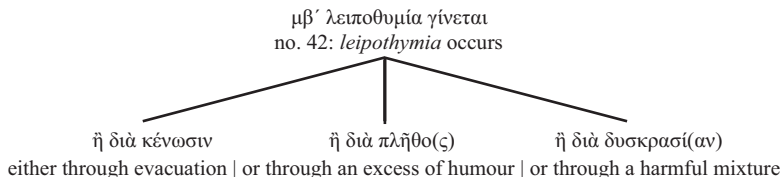
The next important element in Stephen's presentation of material is the use of the prominent contemporary notion of division (*diairesis*) in his account.⁸⁹ Let us focus on an example dealing with *leipothymia*.⁹⁰ The Galenic lemma (in italics) is followed by Stephen's commentary:

*For people swooning (λειποθυμοῦσι) in cases of cholera, diarrhoea, and dysentery.*⁹¹

Leipothymia (ἡ λειποθυμία) is nothing other than the sudden dispersal of vital tension. This happens (γίνεται δ' αὕτη) categorically in three ways, but specifically through a great number of causes. Now, it happens either when an excess of humour (διὰ πλῆθος) chokes the faculty with its weight; or through immoderate evacuation (διὰ κένωσιν), which makes beneficial matter slip along with the harmful matter; or else through a sudden change of mixture (δι' ἀθρόαν μεταβολὴν κράσεως) . . .⁹²

Stephen makes it clear that one should keep in mind three main reasons (underlined) for *leipothymia* in the above mentioned cases. The first division is then followed by several sub-divisions.⁹³ This functioned as a mnemonic device for

contemporary students and was widespread in various commentaries and summaries of Galen's Alexandrian canon.⁹⁴ This method seems to have inspired the creation of branch diagrams, providing a visualisation of the knowledge derived from the text in synoptic form. We have already referred to the branch diagrams in codex Vindobonensis med.gr. 16 in association with the first book of the *Therapeutics to Glaucon*, which consist of 65 divisions. Diagram no. 42 on f. 338r (see Figure 9.8) reads as follows:



The three causes listed in the diagram show an exact, almost word for word, correspondence with Stephen's commentary. In fact, other diagrams show further connections with Stephen's work and suggest that a good number of the ancestors of these diagrams may have originally been composed as supplements to the text.⁹⁵

I now turn to the marginal scholia on the second book of the *Therapeutics to Glaucon* preserved in Parisinus suppl. gr. 634. Ivan Garofalo, the editor of this collection of scholia, points out that the terminology found in the scholia has many similarities with the medical commentaries by sixth-/seventh-century scholars such as Stephen, Palladios, and John of Alexandria.⁹⁶ Furthermore, scholia on other Galenic treatises of this manuscript seem to provide connections with the works of the sixth-century scholars John Philoponos and Simplicios,⁹⁷ but there is no evidence to suggest a definite connection between our scholia and those of the other Galenic treatises.

As I have already mentioned above, there is no direct cross-referencing between the scholia and passages from the Galenic treatise by means of textual symbols. The scholia are often introduced by brief phrases or a single word from the *Therapeutics to Glaucon*, which serve as brief lemmata to the exegetical part of the scholion. The first marginal annotations on ff. 39r–v, which correspond to the beginning of the first chapter of the second book, include a long quotation which is extracted from the case history in *On Affected Parts*, where Galen had visited and diagnosed a friend of Glaucon.⁹⁸ There is no intention by the scholiast(s) to provide any practical details or explain any medical ideas; he is/they are simply interested in providing some introductory information about Galen and his addressee as a sort of prologue before the explanation of specialised medical notions begins. The useful connection made between two different works of the Galenic corpus shows that particular attention is paid to the reader, who is thus able to understand something of Galen's recipient and become aware of links between Galen's works. As I have already mentioned above, this is the

sole passage in the Galenic corpus, excluding our treatise, that gives some details about Glaucón and his growing relationship with Galen.

A considerable number of scholia have a structure of the following kind:

[Galen] called *hexis* the fleshy substance, whether thin or thick. For “the *hexis*”, as Galen says in the *Art [of Medicine]* “is used with reference to those bodies which someone observes first; these are the muscles, some kind of composite flesh which surround the bones on the outside”.⁹⁹

This passage deals with the reference to *hexis* in the second chapter of the second book of *Therapeutics to Glaucón*.¹⁰⁰ *Hexis*, sometimes translated as “state”, is a complicated medical term, which in Galen is closely connected with mixture (*kra-sis*) and thus with lifestyle factors, such as diet. It refers to the state of a certain part of the body or the entire body. A bad *hexis* is called *kachexia*, the opposite of *euexia*, a good *hexis*.¹⁰¹ The scholion starts by providing the term, so that the reader will be able to make the connection with the corresponding part of the work, and this is then followed by a relevant passage from the *Art of Medicine*.¹⁰² As already discussed above, reference was also quite often made by Stephen to other Galenic works in the commentary.¹⁰³ In addition to the *Art of Medicine*, we can see frequent references to the *Therapeutic Method* and *On the Natural Capacities*,¹⁰⁴ which were all studied in Alexandria and might suggest some sort of connection between the actual production of the scholia and a scholastic environment. On the other hand, there are some references to Galenic works which, although they may not be connected with the Alexandrian curriculum, constitute specialised treatises on particular subjects, such as *Outline of Empiricism* and *On Habits*.¹⁰⁵

To sum up, the commentator is a reader of an ancient work, in this case a Galenic treatise, and, at the same time, a writer of another treatise, whose composition depends on the commentator’s engagement with the original work. In all cases the commentary transfers the reader to the commentator’s own thought world and influences his/her understanding of it. There is an ongoing relationship between the author of the commentary and the reader, in which the latter is exposed to the former’s expertise (or lack of knowledge), a subjective process, even if the commentator makes no attempt to criticise the earlier author. New knowledge (as in the case of Stephen’s comments on eyes) was mixed with old knowledge, while the use of didactic aids, such as the branch diagrams, was introduced to create a fresh aid to understanding and memorising the *Therapeutics to Glaucón*. The commentator determines which particular Galenic passages are reproduced and even, in Stephen’s case, their length, although this may reflect an awareness of contemporary queries. The nature of the comments depends mainly on the level of expertise and educational background of the intended readers. In the above mentioned examples the main aim is to instruct future generations of physicians. In Stephen’s case, we noticed a systematic attempt to develop his readers’ knowledge by referring to what they have learnt in a previous lecture as essential to an understanding of certain parts of the *Therapeutics to Glaucón*. In

other instances, including the anonymous scholia to the second book, the reader is led in a particular direction concerning how to interpret a Galenic text on the basis of quotations from elsewhere in the Galenic corpus. This might work in different ways for later readers, who were not familiar, for example, with the Alexandrian curriculum, and might create an asymmetry between the knowledge provided and a Byzantine reader's background in other cultural contexts. Overall, it results in establishing connections between the *Therapeutics to Glaucon* and other works, connections which had not been made by Galen himself. The commentator does not only give a new perspective on how to read a particular Galenic text, but also gives his reader the opportunity of having a wider view on how to approach and familiarise himself with the Galenic corpus. *Therapeutics to Glaucon* became a powerfully didactic handbook in the hands of its early Byzantine commentators, who ensured its transmission and specified its use as an introductory treatise for future physicians.

Medical practice and Byzantine handbooks

The last section of this chapter deals with Byzantine medical handbooks.¹⁰⁶ Authors, from as early as the fourth century up to the fourteenth century, including Oribasios and John Zacharias Aktouarios, wrote medical manuals for practical purposes.¹⁰⁷ These were in most cases intended for practising physicians, although, as we will see below, there are examples of treatises written especially for *philiatroi*. Their contents varied, but in most cases, they consisted of diagnostic and therapeutic advice on a large number of diseases in an *a capite ad calcem* (from head to toe) order. Some authors, such as Paul of Aegina, laid a considerable emphasis on surgery, while Alexander of Tralles excluded the use of invasive techniques from his account. They are often considered important only for the preservation of ancient ideas and texts, chiefly Galen's.¹⁰⁸ However, recent studies have pointed to the intellectual labour behind the projects of these Byzantine authors and practising physicians, including occasionally their own modest contributions.¹⁰⁹ *Therapeutics to Glaucon* constituted a constant source of inspiration for these authors, who were influenced by Galen's account of fevers and various kinds of inflammation.

As a focus for this discussion, I have selected a section from the *Therapeutics to Glaucon* focusing on the diagnosis and treatment of *leipothymia*.¹¹⁰ This choice is based on the fact that it formed the basis for the corresponding chapters in the works of various Byzantine authors, which will allow us to show how Galenic knowledge was transmitted in medical manuals throughout the Byzantine era. I will not give the texts in tables of parallel columns, as scholars commonly do; instead, I will give the Greek text as *Lesetext*,¹¹¹ which will provide a better overview of the appropriation of the Galenic work. The printed text in the Appendix is by Galen; the single-line underlined parts are those copied by Oribasios; the dotted-line underlined parts are those copied by Aetios of Amida; the double-line underlined parts are those copied by both Oribasios and Aetios of Amida; the

italicised parts are those copied by Alexander of Tralles; additions by the aforementioned Byzantine authors are indicated in bold within square brackets.

Oribasios' *Synopsis for Eunapios* is a brief treatise in four books that lays great emphasis on therapeutics. It was especially written for his friend, the sophist Eunapios.¹¹² Eunapios, like Glaucon, appears to be a *philiatros* at whose request Oribasios wrote a work giving medical advice in case he found himself facing a medical issue with no physician available. Eunapios, too, is apparently already well-equipped with the appropriate knowledge to treat himself or even others who happened to be with him. The section on *leipothymia* is in Chapter 6 of Book 3, which itself starts with a special treatment for a variety of fevers, using Galen's *Therapeutics to Glaucon* in many places. Unlike Oribasios' treatise and its particular addressee, Aetios of Amida's and Alexander of Tralles' handbooks are addressed to physicians. Aetios' long handbook, *Tetrabiblos*, consists of sixteen books covering the following topics: pharmacology, dietetics, surgery, prognostics, general pathology, fever and urine lore, ophthalmology, cosmetics, dental matters, toxicology, and gynaecology and obstetrics.¹¹³ The chapters on *leipothymia* are included in Book 5 which concentrates on fevers and related symptoms. Aetios' work is characterised by a tendency to include uncritically all the available sources on various medical conditions, and he often reproduces the first-person personal pronouns of his sources,¹¹⁴ unlike, for example, Alexander of Tralles, who often makes his presence strongly felt throughout his writings. Alexander shows a considerable degree of eclecticism in his works together with a constant concern to provide the best, most effective, and least painful remedies for his patients, usually refined by his rich clinical experience. Alexander of Tralles' *On Fevers* is a monograph in seven chapters dealing exclusively with the diagnosis and treatment of fevers and related symptoms, although the author prioritises therapy over diagnosis.¹¹⁵

As we can see in the Appendix, the Galenic text has been abridged by all three authors in different ways. In using the Galenic work, we can detect verbatim quotations, either explicitly attributed to Galen or not. Neither Oribasios nor Aetios of Amida refer explicitly to Galen at the beginning of their accounts, while Alexander is keen to indicate his source by referring to the "most divine Galen", thus giving a more accurate indication to his readers.¹¹⁶ We should note, however, that Oribasios refers in his proem to Galen as one of his main sources in collecting his material (συναγαγεῖν ἐκ τε τῶν Γαληνοῦ πραγματειῶν), together with Rufus of Ephesus and other unnamed medical authors, although he does not specify what Galenic works were used.¹¹⁷ The same applies to Aetios of Amida, who in his proem makes reference to therapeutic books by Galen, Archigenes, and Rufus, and three works of Oribasios, i.e. *Synopsis for Eunapios*; *Synopsis for Eustathios*, which was especially written for his son, a practising physician; and the lost synopsis of the Galenic works made for his personal friend, the Emperor Julian (r. 361–3).¹¹⁸

All the authors omitted almost completely the first part of Galen's account related to aetiology and the section on the therapy of accompanying symptoms,¹¹⁹ mainly the treatment of haemorrhage, and started to include Galenic material

again from the advice on bathing. Perhaps, the first of these omissions is due to the less practical and more theoretical nature of the passage in question, while the treatment of haemorrhagic conditions is given in more detail in special chapters of their works.¹²⁰ Oribasios and Aetios of Amida show much greater similarities to one another in the material they select than to Alexander of Tralles who integrates longer parts of Galen's account in his treatise and shows a great awareness of parts dealing exclusively with diagnosis and aetiology.¹²¹ Alexander even supplements the text once with a brief sentence on the usefulness of a certain piece of diagnostic advice given by Galen: "and through this you can diagnose precisely".¹²² Aetios does not seem to draft directly from Oribasios' *Synopsis for Eunapios*, but he either based his text directly on Galen or on some other now lost source, perhaps Oribasios' epitome of the Galenic works for Julian or the lost part of his *Medical Collections* that dealt with *leipothymia*.¹²³ Aetios often prefers not to cut passages of a brief diagnostic and prognostic nature further,¹²⁴ and also, unlike Oribasios, evidently aims to provide all the Galenic references to medicinal plants.¹²⁵ It is notable that Aetios twice supplements the Galenic account with advice not provided by any other author: first with a brief piece of advice on differential diagnosis between *leipothymia* and *synkopē* and second with a brief therapeutic recommendation about women suffering from *leipothymia* due to excessive menstrual bleeding.¹²⁶

Although I make these observations in the absence of a critical edition of the Galenic text, while the status of the editions of the texts by Oribasios, Aetios, and Alexander is questionable in many instances, Alexander seems much closer to the Galenic original, retains the syntax in the vast majority of cases, and copies the Galenic original text almost word for word.¹²⁷ Bearing in mind Alexander's usually independent attitude and also his sometimes critical attitude toward Galen,¹²⁸ it may seem strange to those familiar with early Byzantine medical authors to find such a close resemblance between the Galenic original and Alexander. A detailed study on the compilation techniques and sources of early Byzantine medical authors that can clarify things further remains a *desideratum*. On the other hand, we should note that some stylistic variations (e.g. word order) might have been introduced in the process of transmission by Byzantine scribes as, for example, we have already detected above in some manuscripts of the Galenic treatise.

Another notable aspect is Aetios' and Alexander's division of Galen's account by chapter titles for the diagnosis or treatment of *leipothymia* arising from different causes (e.g. "On those swooning due to an accumulation of phlegm", "On those swooning due to excessive heat"), while the edition of Oribasios' text gives only one title at the beginning of the account.¹²⁹ In this way Aetios and Alexander show their concern that their readers should easily be able to follow their account and quickly consult the parts that they are interested in. Lastly, we should mention an even more abridged version of Galen's account in Paul of Aegina's *Epitome of Medicine*,¹³⁰ in which the Galenic original is reduced to a few essential details.

All in all, I hope I have shown another route through which Galen's *Therapeutics to Glaucōn* became available in Byzantium. The main intention here, compared to the didactic function of the commentaries, is the provision of practical

advice for the composition of Byzantine medical manuals. Authors did not simply copy the Galenic work, they made a special effort to make the best selections with clarity, sometimes supplementing the Galenic text with new observations, presumably derived from their practical experience, or even restructuring it with the inclusion of headings to facilitate their readers' encounter with the text.

Concluding remarks

I have shown different ways in which a Galenic text could be revived and made accessible in various contexts throughout the Byzantine era. It is evident that *Therapeutics to Glaucón* mattered to the Byzantines, who ensured its transmission and engaged creatively with it. The synoptic and practical nature of the text played a crucial role. Byzantine readers were exposed to a variety of textual versions and manuscript layouts in consulting the treatise, and they also came into contact with the text via indirect transmission. Byzantine scribes, medical authors, and physicians, consciously or unconsciously, had the power to control Byzantine readers' access to the Galenic text. In their attempts to use the text to serve their own purposes, Byzantine authors, themselves readers of the Galenic treatise, promoted its dissemination. By integrating their own views in the interpretation of the text commentators offered a new perspective on its understanding with the aim of teaching their readers and enhancing their knowledge on particular aspects of medicine. Authors of medical handbooks put great efforts into enriching their accounts by incorporating excerpts from the Galenic work, showing great care in their selection and prioritising "user-friendliness" in their re-arrangement of the Galenic material. Future studies should take a comparative look at the presence of various genres of classical literature in Byzantium and juxtapose evidence from other medieval examples, for instance in Latin or in Arabic, which could elucidate further our understanding of both the revival of classical literature and the accessibility of classical texts in medieval milieus.¹³¹

Appendix

Galen, *Therapeutics to Glaucon*, 1.15, ed. Kühn (1826) XI.47.6–61.4;
Oribasios, *Synopsis for Eunapios*, 3.7, ed. Raeder (1926) 401.31–404.3;
Aetios of Amida, *Tetrabiblos*, 5.102–116, ed. Olivieri (1950) II.91.12–96.4;
Alexander of Tralles, *On Fevers*, 3, ed. Puschmann (1878) I.337.6–347.26.

Oribasios; Aetios of Amida; Oribasios and Aetios of Amida; Alexander of Tralles;
[author's own additions]

- ... τὰς δ' ἀπὸ τῶν συμπτωμάτων τε καὶ νοσημάτων ἐνδείξεις οὐχ ἀπλῶς, ἀλλὰ κατὰ
τὴν ἐργαζομένην ἕκαστον αἰτίαν χρὴ σκοπεῖν, οἷόν ἐστι [Περὶ λειποθυμιῶν] [Περὶ
λειποθυμίας]. [Ἐπειδὴ δὲ καὶ λειποθυμία συμβαίνουσι τοῖς κάμνονσιν ἐπιφέρουσαι
συγκοπὰς καὶ καταβάλλουσι τὴν δύναμιν αἰφνιδίως, ἀκόλουθόν ἐστι καὶ περὶ
5 τούτων διαλαβεῖν καθολικώτερον· εἴθ' οὕτως ὅσα καὶ ἡμῖν δέδωκεν ὁ χρόνος
εἰδέναι, προσθήσομεν ῥήσεσι τοῦ θειοτάτου Γαληνοῦ.] ἡ λειποθυμία καὶ ἡ ἑκλυσις.
εἰώθασι γὰρ οἱ ἱατροὶ καθ' ἐνὸς πράγματος ἅμφω ταῦτα τὰ ὀνόματα φέρειν· αὐτὸ μὲν
οὖν τὸ πρᾶγμα ἓν ἐστίν, αἰτίαι δ' αὐτοῦ πολλαί. λειποθυμοῦσι γὰρ ἐπὶ τε χολέραις καὶ
10 διαρροίαις καὶ δυσεντερίαις καὶ λυεντερίαις καὶ γυναικείῳ ῥῶ καὶ τραύμασιν,
αἱμορροῖσι τε καὶ ἀναγωγαῖς αἵματος καὶ ταῖς διὰ ῥινῶν αἱμορραγίαις καὶ λοχεαῖς
καθάρσεσιν ἀμέτροις. ἦνεγκε δέ ποτε καὶ ἀπεψία μεγάλη λειποθυμίαν καὶ μάλισθ'
ὅταν ἀμετρώτερον ὑπαγάγῃ τὴν γαστέρα. καὶ ὁ βούλιμος δὲ καλούμενος οὐδὲν ἄλλο ἢ
λειποθυμία ἐστί. καὶ ὑστερικῆς πνίξεως ἀπάσης λειποθυμία προηγείται· καὶ ταῖς
15 ἀναδρομαῖς τῶν ὑστέρων ἔπεται καὶ ταῖς παρεγκλίσεσι δὲ καὶ ταῖς φλεγμοναῖς αὐτῶν
πολλάκις ἀκολουθεῖ. προηγείται δ' ἀποπληξίας τε καὶ κακοήθους ἐπιληψίας καὶ
διαφορήσεων καὶ τῶν συγκοπῶν καὶ μαρασμῶν. ἀλλὰ καὶ συνεισβάλλει ποτὲ
καταβολαῖς πυρετῶν οὐκ ὀλίγαις καὶ μάλισθ' ὅταν ἄκρως ἢ ξηρὸν καὶ αὐχμῶδες ἢ
πληθωρικὸν ἀμέτρως τὸ σῶμα. καὶ καυσώδει δὲ καὶ κακοῦθαι πυρετῶ συνεισέβαλέ
20 ποτε· καὶ τοῖς μεγάλως καταψυχθεῖσι τὰ ἄκρα τοῦ σώματος ἐν ταῖς εἰσβολαῖς τῶν
πυρετῶν· καὶ ὅσοι διὰ μέγεθος φλεγμονῆς ἢ ἥπατος ἢ κοιλίας ἢ στομάχου
πυρέσσουσιν, καὶ οὗτοι λειποθυμοῦσι κατὰ τὰς ἀρχὰς τῶν παροξυσμῶν· μάλιστα δ'
οἷς πᾶσι χυμῶν ὥμων καὶ ἀπέπτων καὶ τις ἔμφραξις ἐπικαίρου μορίου.
λειποθυμοῦσι δὲ καὶ ὅσοις τὸ στόμα τῆς γαστρὸς ἄρρωστον, ἢ ὑπὸ μοχθηρίας χυμῶν
25 ψυχικῶν παθῶν ἰσχυρὴ λειποθυμοῦσί τινες· μάλιστα δὲ πρεσβῦται πάσχουσιν αὐτὸ καὶ

- οὐ ἄλλως ἀσθενεῖς· καὶ γὰρ λυπηθέντες αὐτῶν πολλοὶ καὶ χαρέντες καὶ θυμωθέντες 49K
ἐλειποθύμῃσαν· ἀλλὰ καὶ νοτίδες ἔσθ' ὅτε μὴ κατὰ καιρὸν τοῖς οὕτως ἔχουσιν
ἐπιφαινόμεναι λειποθυμίας ἐπιφέρουσιν, ὥσπερ καὶ τοῖς ἰσχυροτέροις ἰδρῶτες
30 ῥαγεν ἄθροως εἰς κοιλίαν ἢ εἰς στόμαχον ἢ εἰς θώρακα συρρέοι· καὶ ἡμεῖς αὐτοὶ
τέμνοντες ἀποστήματα εἰς τὸ πῦον ἄθροως ἐκκενώσωμεν, ἀνάγκη λειποθυμῆσαι· καὶ
εἰ καθαίροντες ἢ κλύζοντες ἢ ὅπως οὖν κενοῦντες, ἄθροώτερον αὐτὸ δράσωμεν· οὐδὲ
γὰρ οὐδὲ τὸ ἐν τοῖς ὑδέροις ὕγρον καὶ τοι περιττὸν ὄν καὶ παρὰ φύσιν ἀλύπως
ἀνέχεται τὴν ἀθρόαν κένωσιν, ἀλλὰ ἀνάγκη καὶ τότε λειποθυμῆσαι τὸν ἄνθρωπον.
35 ἀλλὰ καὶ διὰ μέγεθος ὀδύνης ἐκλύσεις γίνονται διζέων τινων ἢ στρόφων ἢ εἰλεῶν ἢ
κωλικῆς διαθέσεως ἐξαίφνης ἐμπεσούσης· ἀλλὰ καὶ νεῦρον τρωθὲν καὶ μυὸς κεφαλῇ
λειποθυμίαν ἤνεγκε καὶ τὰ ἐν τοῖς ἄρθροις ἔλκη τὰ κακοήθη καὶ τὰ γαγγραινώδη καὶ
νομόδη σύμπαντα καὶ τὶς ἄμετρος ψύξις ἢ θερμασία καὶ ἡ τοῦ ζωτικῆς τόνου λύσις. 50K
αὗται μὲν αἱ τῆς λειποθυμίας αἰτίαι· καθ' ἐκάστην δὲ αὐτῶν ἡ θεραπεία ἴδιος, καὶ
40 γράφει νῦν ὑπὲρ πασῶν οὐκ ἐγχεῖ· τὰς γὰρ ἐν τοῖς πάθεσι συνεδρεούσας οὐχ οἷον τε
χωρὶς ἐκείνων ἰάσασθαι· τοσοῦτον οὖν ἐν τῷ παρόντι λόγῳ ἐροῦμεν περὶ αὐτῶν, εἰς
ὅσον ἂν τις μαθὼν ἱκανὸς εἴη τοῖς ἐξαίφνης ἐπιπίπτουσιν ἐνίστασθαι παροξυσμοῖς.
[διαφέρει δὲ λειποθυμία συγκοπῆς, ὅτι ἡ μὲν λειποθυμία αἰφνίδιον ἐπιπίπτει,
45 ἀναίσθητον καὶ ἀκίνητον τὸν ἄνθρωπον ἐργαζομένη καὶ οὐ πάντως ἰδρῶσιν· ἡ
δὲ συγκοπὴ καὶ ἐργηγορσί καὶ καταφερομένοις συμπίπτει καὶ πάντως μεθ'
ἰδρῶτων τῶν συγκοπτικῶν συνήθως λεγομένων. Περὶ τῶν ἐπὶ διαρροῖαις ἢ
αἱμορραγίαις ἢ ἰδρῶτων ἀμέτροις κενώσεσι λειποθυμούντων] [Περὶ τῶν ἐπὶ ταῖς
50 ἀθρόαις κενώσεσιν ἐκλυομένων] οἷον ὅτι τοῖς μὲν γολέραις καὶ διαρροῖαις καὶ ταῖς
ἄλλαις ταῖς πολλαῖς καὶ ἀθρόαις κενώσεσιν ἐκλυομένοις ὕδωρ τε ψυχρὸν προσραίνειν
καὶ τοὺς μυκτῆρας ἐπιλαμβάνειν καὶ ἀνατρίβειν τὸ στόμα τῆς γαστροῦ καὶ κελεύειν
ἐμεῖν ἢ σπαράττειν τὸν στόμαχον ἢ τοὶ δακτύλων ἢ πτερῶν καθεύσειν· ἀλλὰ καὶ χεῖρας
καὶ σκέλη καὶ πόδας διαδεῖν· εἶναι δὲ χρὴ καὶ τοὺς δεσμοὺς πλείονας μὲν καὶ
σφοδρότερους ἐν ταῖς χερσίν, ὅταν διὰ τῶν κάτω μερῶν αἱ κενώσεις γίνωνται,
55 καθάπερ ἐν ταῖς αἱμορροῖσι καὶ διαρροῖαις ὅσας τε διὰ τῶν ὑστερῶν αἱ γυναῖκες κενοῦνται.
τὸ γὰρ τὰ σκέλη τηνικαῦτα σφοδρῶς διαδεῖν ἐπισπᾶται τι κάτω πολλακίς.
ἔμπαλιν δ' ἐν ταῖς διὰ τε ῥινῶν αἱμορροαγίαις καὶ τοῖς ἐμέτοις οἱ δεσμοὶ πλείονές τε
καὶ σφοδρότεροι κατὰ τὰ σκέλη γιγνέσθωσαν· καὶ μὲν δὴ καὶ ὅσοις ἐπὶ τρώμασιν 51K
αἱμορραγοῦσιν, ὥσαύτως ἄνω μὲν ἐπὶ τοῖς κάτω· κάτω δ' ἐπὶ τοῖς ἄνω τὰ δεσμὰ
περιβάλλειν· ἐξευρίσκειν δέ τι καὶ ἀνάρροπον σχῆμα τῷ μέρει, μὴ μέντοι πᾶν
60 σφόδρα· τεινόμενον γὰρ ἐν τῷδε καὶ πονοῦν οὐδὲν ἦττον ἢ εἰ κατάρροπον ἦν
παροξύνεται· τὸ δὲ σύμπαν ἢ ἐπὶ τὰ κοινὰ ἀντισπᾶν τοῖς πεπονθόσιν ἢ ἐπὶ τὰ τῆς
κενώσεως κατάρξαντα· διὰ τοῦτο τὰς μὲν ἐκ τῶν ὑστερῶν ἀθρόας κενώσεις αἱ παρὰ
τοὺς τιτθοὺς προσβαλλόμεναι σικύαι τάχιστα παύουσι· τὰς δὲ διὰ τῶν ῥινῶν ἥπατί τε
καὶ σπληνὶ κατὰ τὴν αἱμορραγοῦσαν ῥίνα, καὶ εἰ δι' ἀμφοτέρων ἀθρόον καὶ πολὺ
65 φέροιτο, τοῖς σπλάγχχοις ἀμφοτέροις προσβάλλειν· ἴσται δὲ καὶ οἶνος ὕδατι ψυχρῷ
κεκραμένος τὰς ἐπὶ ταῖς ἀθρόαις κενώσεσιν ἐκλύσεις καὶ μάλιστα τῶν εἰς τὴν γαστέρα
ῥεπόντων ρευμάτων. ἐπισκοπεῖσθαι δὲ ἦν μὴ τι κωλῆν τὴν τοιαύτην δόσιν, οἷον εἰ
σπλάγχχον τι φλεγμαῖνον ἢ κεφαλῆς ἄλγημα σφοδρότερον ἢ παρακρουστικόν τι
πάθος ἢ πυρετὸς καυσώδης ἐν ἀπέπτῳ νοσήματι· μεγάλα γὰρ ἐν τοῖς τοιοῦτοις καὶ
70 σχεδὸν ἀνίατοι ταῖς τῶν οἶνων πόσεσιν ἔπονται βλάβαι· μηδενὸς δὲ κωλύοντος, 52K

- ἐφεξῆς δεῖ διορίζεσθαι τὴν τε φύσιν τοῦ νοσοῦντος καὶ τὸ ἔθος καὶ τὴν ἡλικίαν καὶ τὴν τοῦ περιέχοντος ἄερος κρᾶσιν· εἰς ταῦτα γὰρ ἀποβλέπων ἢ θερμὸν ἢ ψυχρὸν δώσεις τὸ πόμα. τοὺς μὲν γὰρ ἀήθεις ψυχροῦ πόματος ἢ καὶ φανερώς βλαπτομένους ὑπ' αὐτοῦ καὶ ὅσοι φύσει ψυχρότεροι καὶ τοὺς ἐν ἐσχάτῳ γῆρα ἢ καὶ χωρὶς
- 75 ψυχροτέρῳ φύσει ἢ καὶ χειμῶνος εἵργειν τοῦ ψυχροῦ. τοῖς δ' ἐναντίως ἔχουσιν ἀδεῶς δίδοναι πίνειν. ἔστω δὲ καὶ οἶνος ἐπὶ μὲν τοῖς εἰς τὴν γαστέρα ρεύμασι θερμὸς τε καὶ λεπτὸς, οἷος ὁ Λέσβιος, ἐπὶ δὲ ταῖς αἰμορραγίαις παχύς τε καὶ μέλας καὶ στρυφνός, ἐπὶ δὲ τοὺς τόπους αὐτοὺς ἐπιτιθέναι, γαστρὶ μὲν καὶ μήτρῃ καὶ στομάχῳ καὶ θώρακι τὰ τονοῦν πεφυκότα. κεφαλῇ δὲ καὶ μετώπῳ καὶ ταῦτα καὶ τὰ ψύχοντα. καὶ ἐφ' ὧν
- 80 ἐπιπολῆς καὶ κατὰ τοὺς μυκτῆρας φλεβῶν εἴη τις ἐρῶγουῖα, τῶν ἐπεχόντων φαρμάκων τὸ αἷμα ἐπιτιθέναι. λουτρά δὲ τοῖς μὲν εἰς τὴν γαστέρα ρεύμασιν ἐπιτηδειότατα· τὰς δ' αἰμορραγίας δεινῶς παροξύνει. καὶ ὅσοι διὰ πλῆθος ἰδρώτων λειποθυμοῦσι, καὶ τούτοις ἐναντιώτατα, χρή γὰρ αὐτῶν στύφειν τε καὶ ψύχειν, οὐ χαλὰν τὸ δέρμα. καὶ τὸν οἶνον ψυχρὸν μάλιστα δίδοναι τούτοις καὶ μηδὲν ὅλως προσφέρειν
- 85 θερμόν. ἀλλὰ μηδὲ διαδεῖν τὰ κῶλα, μὴδ' ἀναγκάζειν ἐμεῖν, μηδὲ κινεῖν ὅλως, καὶ πνευμάτων εἰσόδους ψυχόντων ἐπιτεχνᾶσθαι καὶ τὸν ἀέρα τοῦ οἴκου τρέπειν εἰς ψύχουσάν τε καὶ στρυφνὴν ποιότητα, μυρσίνας τε καὶ ἀμπέλων ἔλιξι καὶ ῥόδοις καταστρωννύντα τοῦδαφος· τούτων οὐδὲν χρήσιμον τοῖς εἰς τὴν γαστέρα ρεύμασιν, αἷζεται γὰρ εἰς ὅσον ἂν πυκνωθῇ τὸ δέρμα. τοῖς μὲν οὖν ἐπὶ ταῖς κενώσεσιν ἐκλυόμενοις οὕτω βοηθεῖν ἔν γε τῷ παραχρῆμα. [Περὶ τῶν ἐπὶ πλῆθει γυμῶν λειποθυμούντων] [Περὶ τῶν διὰ πλῆθος λειποθυμούντων] τοῖς δ' ἐπὶ πλῆθεσιν οὐκ ἔθ' ὁμοίως, ἀλλὰ τρίβειν ἐπὶ πλεῖστον ἐπ' ἐκείνων τὰ κῶλα καὶ θερμαίνειν καὶ διαδεῖν.
- 90 οἶνον δὲ καὶ τροφῆς ἀπέχειν καὶ λουτρῶν, εἰ πυρέττοιεν· ἀρκεῖ δ' αὐτοῖς μελικράτου τε δίδοναι πόμα ἢ θύμου ἢ ὀρίγανου ἢ γλήχωνος ἢ ὑσσώπου ἔχοντος ἐναφηψημένον. ἐπιτήδειον δὲ καὶ ὀξύμελι. [Περὶ τῶν διὰ τινα διάθεσιν περὶ ὑστέραν λειποθυμουσῶν] [Περὶ τῶν ἐφ' ὑστέρα λειποθυμούντων] καὶ τὰς ἐφ' ὑστέρας δὲ πεπονθυίας ἐκλυόμενας ὡσαύτως ἰᾶσθαι, πλὴν ὀξύμελιτος, καὶ διαδεῖν καὶ τρίβειν σκέλη μᾶλλον ἢ χεῖρας. [ἐπὶ τῶν ὑστερικῶς πνιγόμενων] καὶ ὥσπερ ἐπ' ἐκκρίσει πολλῇ παρὰ τοὺς τιτθοὺς σικύας ἐπιτίθεμεν. οὕτως αἷς ἀνέσπασται καὶ παρέσπασται,
- 95 βουβῶσι τε καὶ μηροῖς προσάζομεν. καὶ ταῖς μὲν ῥίσις ὀσφραντὰ δυσωδέστατα, ταῖς δὲ μήτραις εὐδὴ. καὶ τὰ χαλὰν καὶ θερμαίνειν δυνάμενα φάρμακα προσοίσομεν. [Περὶ τῶν δι' ἄμετρον κένωσιν τῶν καταμηνίων λειποθυμουσῶν. ταῖς δὲ δι' ἄμετρον κένωσιν τῶν καταμηνίων λειποθυμούσας τὰς χεῖρας μᾶλλον διαδήσομεν καὶ τρίψομεν καὶ σικύας παρὰ τοὺς τιτθοὺς ἐπιθήσομεν. Πρὸς τοὺς δι' ἀτονίαν στομάχου λειποθυμούντας] [Περὶ τῶν ἐπὶ στομάχῳ ἀτονούντι λειποθυμούντων] εἰ δ' ἄρρώστος ὁ στόμαχος εἴη καὶ ταύτῃ λειποθυμοῖεν, ἐπιπλάττειν μὲν τοῖς τονοῦν δυναμένους, οἷα τὰ τε διὰ τῶν φοινίκων ἐστὶ καὶ οἶνου καὶ ἀλφίτων καὶ κρόκου καὶ ἀλόης καὶ μαστίγης· ἐπιβρέχειν δὲ τοῖς δι' ἀψινθίου καὶ μηλίνου καὶ μαστιγίνου καὶ γάρδου καὶ οἰνάνθης καὶ οἶνου. [Περὶ τῶν ἐκκαιομένων τὸν στόμαχον] καὶ εἰ
- 100 ἐκκαίοντο, μινύναι τι καὶ τῶν ψυχόντων, οἷον τῆς τε κολοκύνθης τὸν χυλὸν καὶ τῆς θριδακίνης καὶ τῆς ἀνδράχνης καὶ τοῦ στρύχνου καὶ τῆς σέριος [ἢ ὀξυλαπάθου] καὶ τοῦ ὀμφακος. οὗτος μὲν γε οὐ ψύχει μόνον, ἀλλὰ καὶ στύφει, καὶ ψυχρὸν ὕδωρ τοῖς διακαιομένοις τὸν στόμαχον ὥνησε πολλάκις ἐν καιρῷ δοθέν, ἄλλως δὲ μεγάλως βλάπτει. [παρὰ καιρὸν διδόμενον· καὶ διὰ τοῦτο μᾶλλον χρή ἀκριβῶς
- 105 διαγινώσκειν.] καὶ χρή μᾶλλον οἶνου θερμοῦ δίδοναι τοῖς ἀρρώστοις τὸν στόμαχον, εἰ

- μηδὲν ἄλλο κωλύει· ὦνησε δὲ μεγάλως τοὺς τοιούτους στομάχους καὶ ἡ τῶν ἀκρωτηρίων τρίψις. εἰ δ' ἐπὶ τούτοις βελτίους μὴ γένοιτο, τοὺς μὲν ἐκκαιομένους ἐπὶ λουτρὸν ἄγειν τὴν ταχίστην. ὅσοι δὲ ψύξεώς τινος αἰσθησιν ἔχουσι, τοῦ τε διὰ τριῶν πεπέρεων φαρμάκου καὶ αὐτοῦ [τὸ λευκὸν πέπερι] τοῦ πεπέρεως μόνου καὶ 120 ἀψινθίου πινόντων. [Περὶ τῶν διὰ μοχθηρὸν χυμὸν δάκνοντα τὸ στόμα τῆς γαστρὸς λειποθυμούντων] ὅσοι δὲ μοχθηρῶν χυμῶν δακνόντων τὸ στόμα τῆς γαστρὸς ἐκλύονται, διδοὺς ὕδωρ θερμὸν ἢ ὑδρέλαιον ἐμεῖν κελεύειν. εἰ δὲ δυσεμεῖς εἴεν, θάλπειν χρὴ πρότερον αὐτὰ τε τὰ περὶ τὸν στόμαχον χωρία καὶ πόδας καὶ χεῖρας. εἰ δὲ μὴδ' οὕτως δύναιτο, περὰ ἢ δακτύλους καθιέντας ἐρεθίζειν. εἰ δὲ μὴδ' οὕτως, αὐτὴς αὐτοῖς 125 ἐλαιον θερμὸν ὅτι κάλλιστον δοτέον. εἴωθε δὲ πολλάκις τοῦλαιον οὐκ εἰς ἔμετον μόνον ὀρμαῖν, ἀλλὰ καὶ τὴν γαστέρα λαπάττειν· ἔστι δὲ καὶ τοῦτο οὐ μικρὸν ἀγαθὸν τοῖς παροῦσιν. ὥστ' εἰ μὴ γένοιτο αὐτόματον, ἐπιτεχνᾶσθαι χρὴ· μάλιστα δὲ τοῖς προσθέτοις αὐτὸ πειρᾶσθαι δρᾶν· εἰ δὲ ῥᾶον ἐπὶ τοῖσδε γένοιτο, καὶ ἀψινθίου κόμην ἐναφύσων μελικράτῳ διδόναι πίνειν καὶ οἶνον ἐφεξῆς. καὶ παντοίως ῥοννύναι τὰ μόρια διὰ τε τῶν 130 ἔξωθεν ἐπιτιθεμένων φαρμάκων καὶ τοῦ ἀψινθίου ταῖς πόσεσιν. οὐ μὴν κατ' ἀρχὰς κελεύω σε τοῦτο ποιεῖν οὕτως, ἀλλ' ὕστερον, ἡνίκα μὲν ἤδη καθαρὰ τὰ περὶ τὴν κοιλίαν ἢ περιεχομένων δ' ἔτι τῶν χυμῶν ἐν αὐτῇ μὴδέπω σύτφειν, ἀλλ' ἄρκει θάλπειν μόνον. ὥς ἔμπροσθεν εἴρηται. [Εἰ δὲ διὰ φλέγμα ἄθροισθὲν ἐν τῷ στομάχῳ λειποθυμοῦσι] [Περὶ τῶν ἐπὶ φλέγματι λειποθυμούντων] φλέγματος δὲ πολλοῦ καὶ ψυχροῦ κατὰ τὸ 135 στόμα τῆς γαστρὸς ἡθροισμένου, καταντλεῖν μὲν ἐπὶ πλεῖστον, ἐλαίῳ συνέψων ἀψίνθιον· ἐφεξῆς δὲ τοῦ μελικράτους διδόναι ἢ ὑσσώπου ἢ τι τῶν ὁμοίων ἀποβρέχων ὀξυμέλιτός τε καὶ πεπέρεως καὶ τοῦ διὰ τριῶν πεπέρεων καὶ τοῦ διοσπολιτικοῦ φαρμάκου. καὶ τὸ σύμπαν σοι τῆς διαίτης κεφάλαιον τημητικὸν ἔστω. [Περὶ τῶν ἐπὶ ψύξει λειποθυμούντων] τὰς δ' ἐπὶ ταῖς ἰσχυραῖς ψύξεσιν ἐκλύσεις ὁμοίως τοῖς 140 βουλίμοις ἰᾶσθαι, παντὶ τρόπῳ θερμαίνοντα. τὸν τε οὖν οἶνον αὐτοῖς διδόναι θερμῷ κεκραμένον καὶ τροφὰς τὰς θερμαίνειν πεφυκίας, ἀνατρίβειν τε καὶ θάλπειν παρὰ πυρὶ. [Πρὸς τοὺς διὰ θερμασίαν πλείονα λειποθυμούντας] [Περὶ τῶν ἐπὶ θερμασίᾳ λειποθυμούντων] τὰς δ' ἐπὶ θερμασίᾳ πλείονι γινομένης λειποθυμίας τοῖς ἐμψύχειν τε καὶ τονοῦν δυναμένοις. ἐμπίπτουσι γὰρ αὐταὶ μάλιστα τοῖς ἐν ἀέρι πνιγώδει καὶ 145 βαλανείῳ χρονίσασι. ῥώσεις οὖν αὐτοὺς ἐν μὲν τῷ παραχρῆμα τότε ψυχρὸν ὕδωρ προσραίνων καὶ ῥιπίζων καὶ πρὸς ἄνεμον τρέπων καὶ τρίβων τὸ στόμα τῆς κοιλίας καὶ σπαράττων· ἐφεξῆς δ' ἤδη καὶ οἶνον διδοὺς καὶ τροφάς. [Πρὸς τοὺς διὰ μέγεθος φλεγμονῶν ἢ κακοήθειαν πυρετῶν λειποψειχούντας ἐν ταῖς εἰσβολαῖς] [Περὶ τῶν ἐπὶ φλεγμοναῖς πυρετώδεσι λειποθυμούντων] τοὺς δὲ διὰ μέγεθος φλεγμονῆς ἢ καὶ 150 κακοήθειαν σφοδροῦ πυρετοῦ λειποθυμούντας ἐν ταῖς εἰσβολαῖς καὶ καταπνυγόμενους τὰ κῶλα τρίβων ἰσχυρῶς καὶ θάλπων καὶ διαδῶν σκέλη τε καὶ χεῖρας, ἐρηγορέναι τε κελεύων καὶ σιτίου παντὸς ἀπέχεσθαι καὶ πόματος. ἄριστον δ' ἐπὶ τούτων προγινῶναι τὸ μέλλον ἔσσεσθαι καὶ φθάνειν αὐτὰ πράξαντα πρὸ τοῦ παροξυσμοῦ. [Πρὸς τοὺς διὰ 155 ξηρότητα ἐν ταῖς τῶν παροξυσμῶν ἀρχαῖς συγκοπτομένους] καὶ τοὺς διὰ ξηρότητα δὲ συγκοπτομένους ἐν ταῖς τῶν παροξυσμῶν ἀρχαῖς ἄριστον προγινώσκειν. εἰ γὰρ ὥραις που δύο ἢ τρισὶν ἔμπροσθεν πρὸ τοῦ παροξυσμοῦ θρέναις, διακρατεῖσθαι τε πόδας καὶ χεῖρας κελεύσεις, οὐκ ἂν ἀπόλοιτο. εἶναι δὲ χρὴ τὰς τροφὰς εὐπέπτους τε καὶ εὐστόμαχους, εἰ δὲ καὶ σφοδρὸν τὸν κίνδυνον ὑπονοήσης ἔσσεσθαι, φθάνειν οἶνον διδόναι καὶ μάλιστα εἰς χόνδρον ἐφθὸν τὸν οἶνον ἐπιχέας προσφέρειν. εἰ δὲ καὶ ἄρτον 160 ἀντὶ χόνδρου δοῖης, ἴσον δύνатаι. μετρίας δὲ τῆς συγκοπῆς προσδοκωμένης οὐδὲν 58K

- οἶνον δεῖ, ἀλλ' ἄρκεῖ τηνικαῦτα ροιῶν ἢ ἀπίων ἢ μῆλων ἢ τινος ἄλλης ὁπόρας
 στυφοῦσης ταῖς τροφαῖς μινγνῦναι, καὶ εἰ ἐπὶ τοῖσδε μετρίως τὸν παροξυσμὸν ἐνέγκοιεν,
 αὐθις τρέφοντας οὐκ ἀναγκαῖον ὁπόραις χρῆσθαι, ταῦτα μὲν πράττειν, εἰ προγνοίης τὸ
 μέλλον ἔσσεσθαι. τοῖς δ' ἐξαίφνης εἰς τὸν κίνδυνον ἐμπίπτουσιν οἶνον τε διδόναι θερμοῦ
 165 καὶ ἄρτου καὶ χόνδρου σὺν αὐτῷ θερμοῦ παντελῶς ὀλίγον. εἰ γὰρ τοῦτοις πλεῖον δοίης
 ἢ δυσπεπτότερα σιτία τοῖς οὕτως ἔχουσιν, οὐ συγκοπῇσονται μόνον, ἀλλὰ καὶ
 πνιγῇσονται τελέως. [Πρὸς τοὺς δι' ἔμφραξιν κυρίου μορίου λειποθυμούντας]
 [Περὶ τῶν δι' ἔμφραξιν ἐπικαίρου μορίου λειποθυμούντων] τοῖς δὲ δι' ἔμφραξιν
 170 ἐπικαίρου μορίου λειποθυμοῦσιν ὀξύμελί τε διδόναι καὶ τὸ δι' ὑσσώπου καὶ ὀριγάνου
 καὶ γλήχωνος καὶ μέλιτος πόμα· καὶ τροφὰς τοῦ τιμητικωτέρου τρόπου. τὰ γὰρ παχέα
 καὶ γλίσχρα μεγάλας ἐν τοῖς τοιούτοις ἐργάζεται βλάβας, ἀλλὰ καὶ τὰ κῶλα τρίβειν τε
 καὶ διαδεῖν οὐδὲν χεῖρον. ἀγαθὸν δὲ καὶ τοῖς οὖρα κενοῦσι χρῆσθαι πόμασιν, οἷα τὰ τε
 δι' ἀνήθου καὶ μαράθρου καὶ σελίνου καὶ πετροσελίνου καὶ ἄμμεως καὶ δαύκου καὶ
 175 λειπτῷ μὴ πάνυ παλαιῷ. [Σημεῖα ἔμφράξεως] γνωριεῖς δὲ τὰς τοιαύτας ἔμφράξεις ταῖς
 τ' ἄλλαις ἀνωμαλίαις τῶν σφυγμῶν καὶ μάλισθ' ὅσαι κατὰ μέγεθός τε καὶ μικρότητα
 καὶ σφοδρότητα καὶ ἀμυδρότητα γίνονται, μὴ παρούσης τῆς καλουμένης πληθωρικῆς
 συνδρομῆς, εἰσὶ γὰρ κἀκείνης κοιναί. γίνονται δὲ καὶ διαλείποντες ἐπὶ ταῖς μεγάλαις
 τῶν τοιούτων διαθέσεων οἱ σφυγμοί. ταῦτα μὲν οὖν ἐπὶ πλεόν ἐν τοῖς περὶ σφυγμῶν
 180 λέγεται. νυνὶ δὲ μεταβῶμεν ἐπὶ τὸν περὶ τῶν ὑπολοίπων ἐκλύσεων λόγον· οἷον [Περὶ
τῶν ἐπὶ τομῇ ἀποστήματων ἢ ῥήξει λειποθυμούντων] ὅσαι τε διὰ ῥῆξιν ἀποστήματος
 ἢ τομῇ γίνονται καὶ [Πρὸς τοὺς δι' ἀθρόαν κένωσιν τινα λειποθυμούντας] ὅσαι
 διὰ κένωσιν ἀθρόαν ἐν ὑδέροις, ἀπόχρη δὲ τοῦτοις ἐν μὲν τῷ παραυτίκα τοῖς
 185 ὀσφραντικοῖς ἀνακτήσασθαι· μικρὸν δ' ὕστερον ῥοφήμασιν εὐπέπτοις χρῆσθαι. [Πρὸς
τοὺς διὰ λύπην ἢ χαρὰν ἢ φόβον ἢ θυμὸν λειποθυμούντας] [Περὶ τῶν ἐπὶ χαρᾷ ἢ
λύπῃ καὶ τοῖς ὁμοίοις καὶ περὶ τῶν ἐπὶ ὀδύνῃ λειποθυμούντων] εἰ δὲ διὰ λύπην ἢ
 χαρὰν ἢ φόβον ἢ θυμὸν ἢ ἐκπληξιν ἐκλυθεῖεν, ὀσφρητικοῖς τε καὶ ταῖς τῶν ῥίνων
 190 καταλήψεσιν ἀνακτησάμενον ἐμὲν ἀναγκάζειν. ὡσαύτως δὲ καὶ τοὺς ἐπὶ τραύμασιν ἢ
 καθάρσεσιν ἢ ἀλγῆμασι τοῖς κατὰ τὰ ἄρθρα καὶ νεῦρα καὶ τῶν μυῶν τοὺς τένοντας ἔν γε
 τῷ παραχρῆμα δεῖ ἀνακτᾶσθαι· μετὰ δὲ ταῦτα τὴν προσήκουσαν ποιεῖσθαι τοῦ
 παθήματος θεραπείαν. [Περὶ τῶν ἐπὶ εἰλεῶ ἢ κώλῳ λειποθυμούντων] αἱ δ' ἐπὶ τοῖς
 195 κωλικοῖς πάθεσιν ἢ τοῖς εἰλεοῖς ἢ τινι τῶν οὕτω μεγάλαις ἐπιφερόντων ὀδύναις ἐπόμεναι
 λειποθυμίαι ταῖς τε τῶν πεπονθότων μορίων ἀλείαις μάλιστα καθίστανται καὶ ταῖς τῶν
 ἄκρων τρίψεσιν. [Περὶ τῶν ἐπὶ ἀρρώστια δυνάμεως λειποθυμούντων] τὰς δὲ δι'
 200 ἀρρώστίαν οἰκείαν τῶν διοικουσῶν τὸ σῶμα δυνάμεων ἐκλύσεις ἐπὶ δυσκρασίᾳ τῶν
 μορίων ἐκείνων γιγνομένας, ὅθεν αἱ δυνάμεις ὀρμῶνται, ταῖς ἐναντίαις δυσκρασίαις
 ἰᾶσθαι προσήκει, θερμαίνοντας μὲν τὰς ψυχράς, ψύχοντας δὲ τὰς θερμὰς, ἐπὶ τε τῶν
 ἄλλων ἀνάλογον. ἡ μὲν οὖν ζωτικὴ καλουμένη δύναμις, ἣν ἐκ καρδίας ὀρμωμένην
 205 ἐδείξαμεν, ἐκ τῶν ἀμυδρῶν σφυγμῶν γνωρίζεται. ἡ δ' ἐξ ἥπατος μὲν ὀρμωμένη,
 θρεπτικὴ δ' ὀνομαζομένη, ταῖς αἱματώδεσι διαχωρήσει κατ' ἀρχὰς μὲν ὑδατώδεσιν τε
 καὶ λεπταῖς γιγνομέναις, ὕστερον δὲ παχείαις, οἷαπερ ἡ ἀμοργή. τὴν δ' ἀπ' ἐγκεφάλου
 μὲν ὀρμωμένην δύναμιν ἐξαιρέτως δ' ὑπὸ τινων ὀνομαζομένην ψυχικὴν, τῇ ἐπὶ τὰς
 61K προαιρετικὰς κινήσεις ἀρρώστιά γνωρίζομεν. ἀλλὰ περὶ μὲν τῶν τοιούτων διαθέσεων
 205 τοῖς ἰατροῖς.

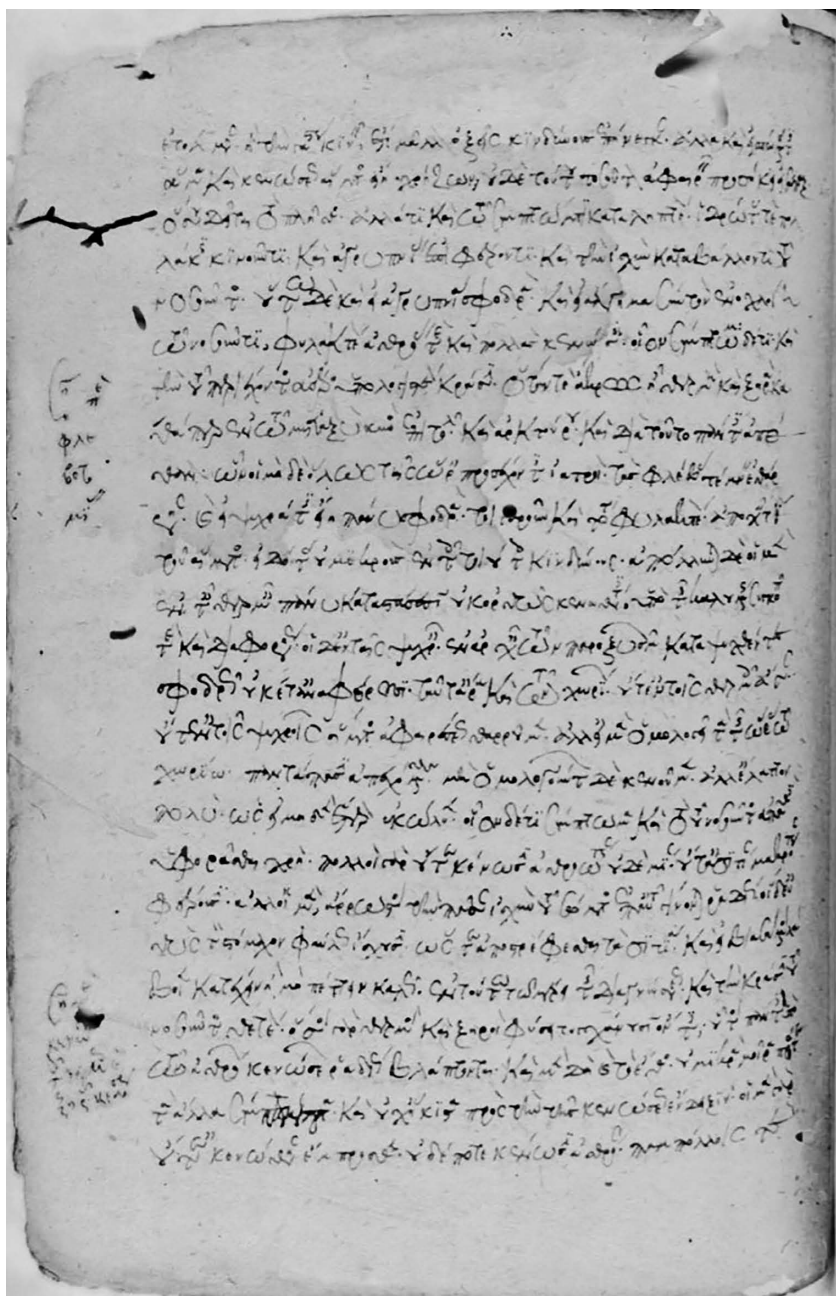


Figure 9.2 Beinecke MS 1121, f. 117v

(Beinecke Rare Book and Manuscript Library, Yale University, New Haven, CT)

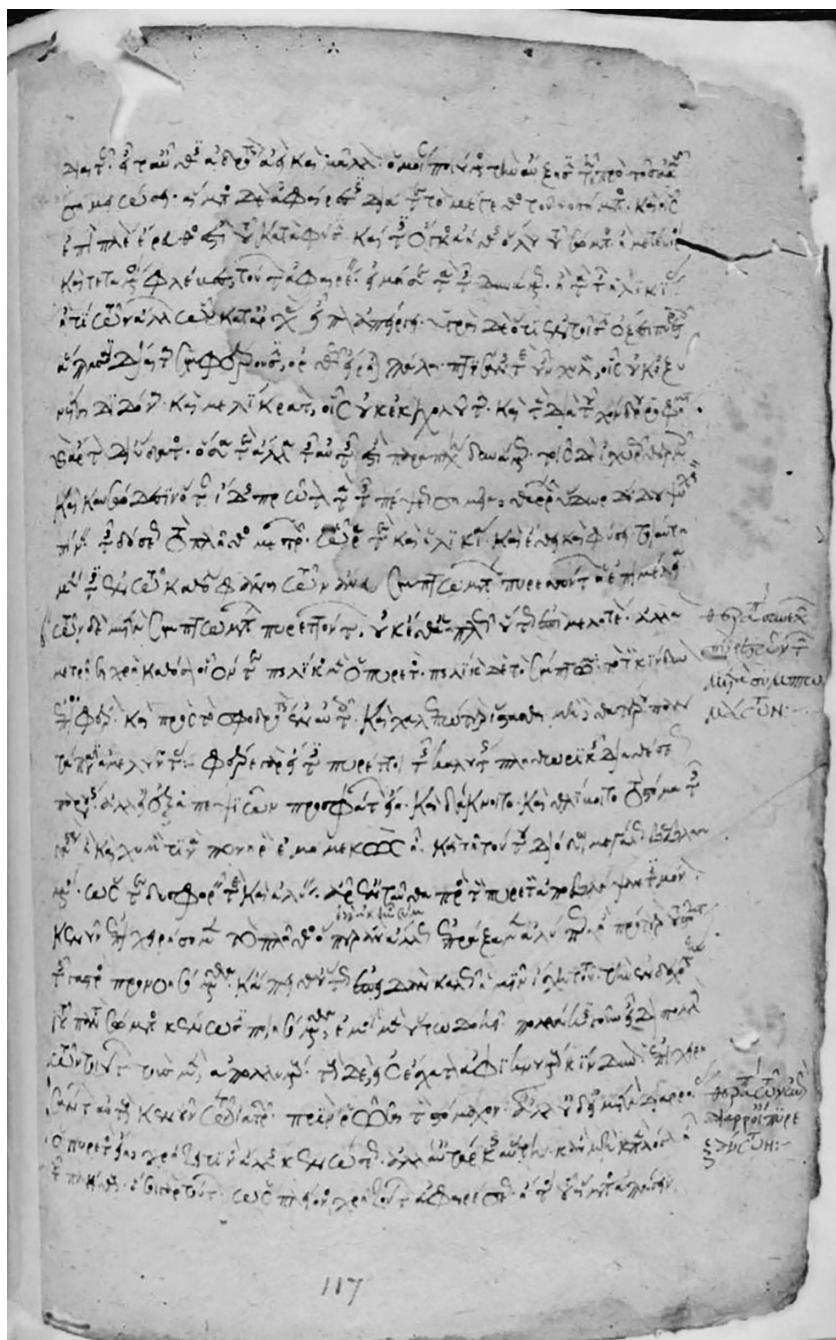


Figure 9.3 Beinecke MS 1121, f. 117r

(Beinecke Rare Book and Manuscript Library, Yale University, New Haven, CT)

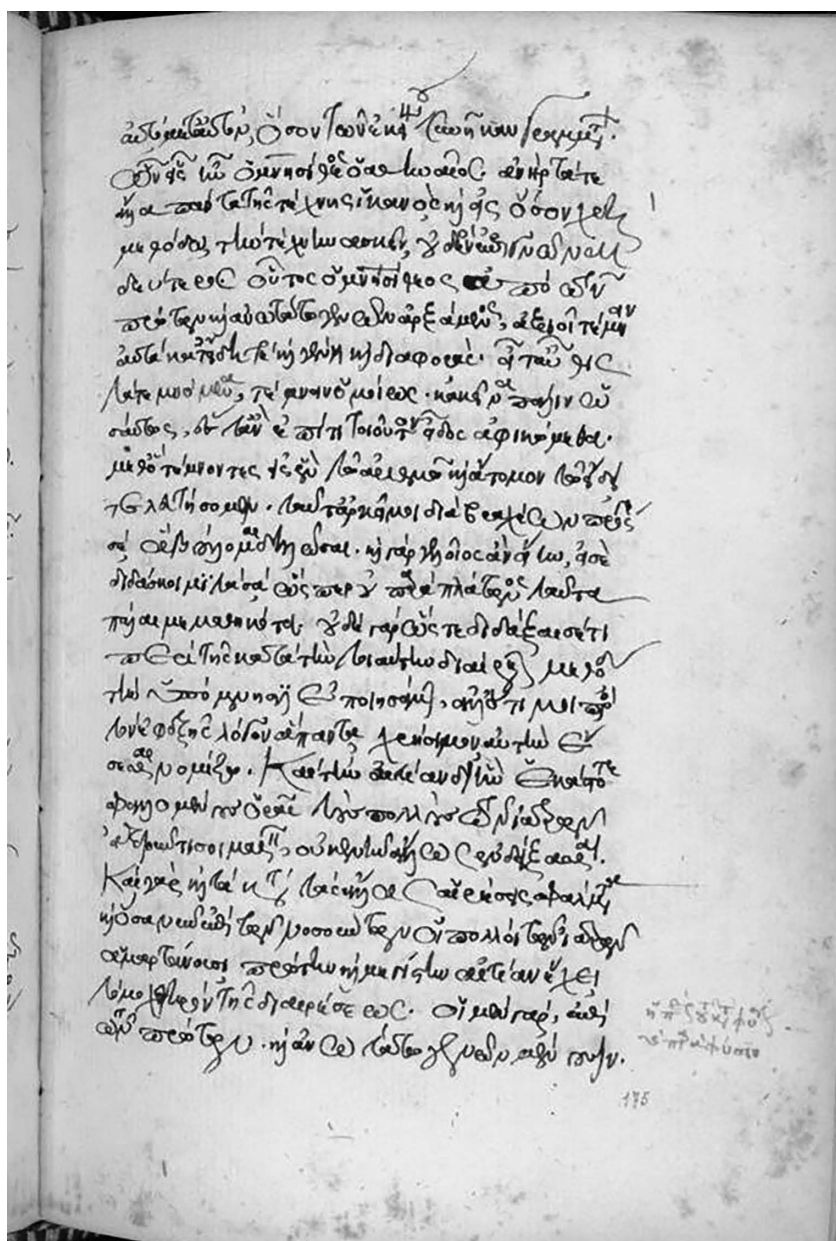


Figure 9.4 Laurentianus Plut. 75.9, f. 175r
(Biblioteca Medicea Laurenziana, Florence)

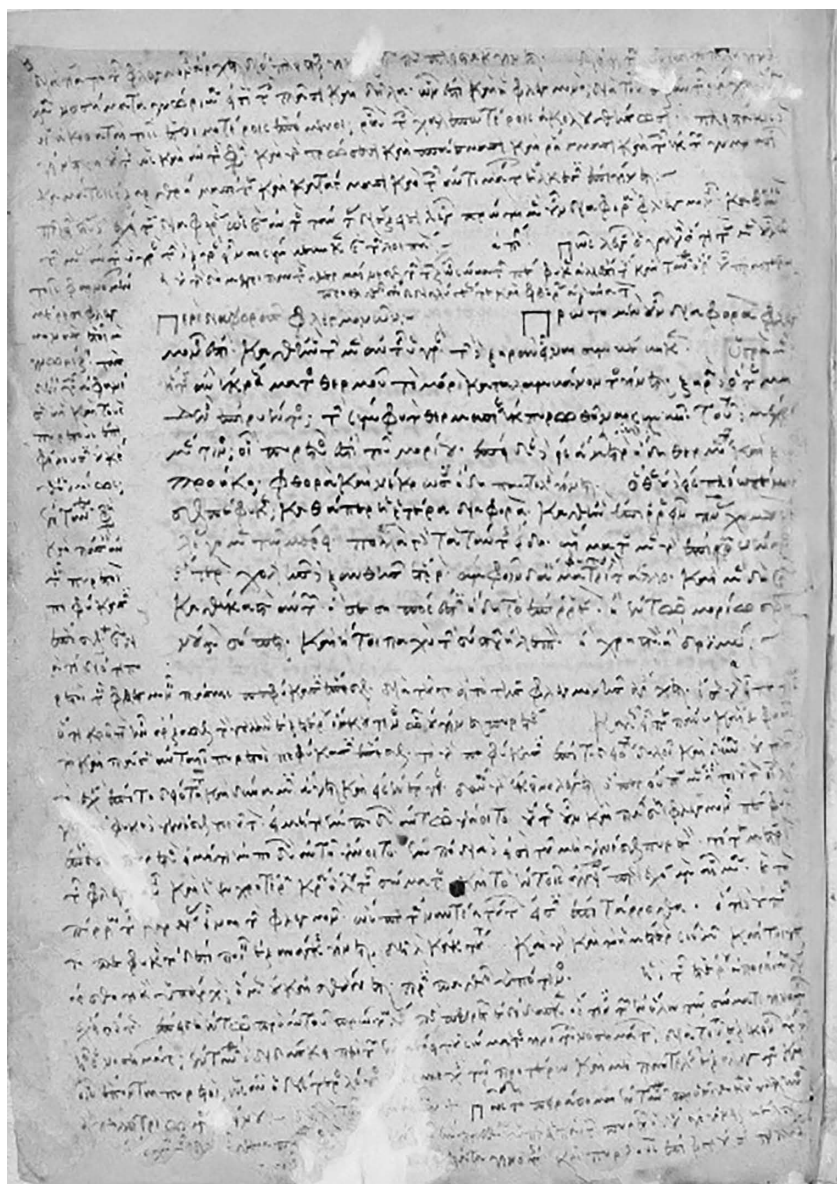


Figure 9.5 Parisinus suppl. gr. 634, f. 39v

(Bibliothèque nationale de France, Paris)

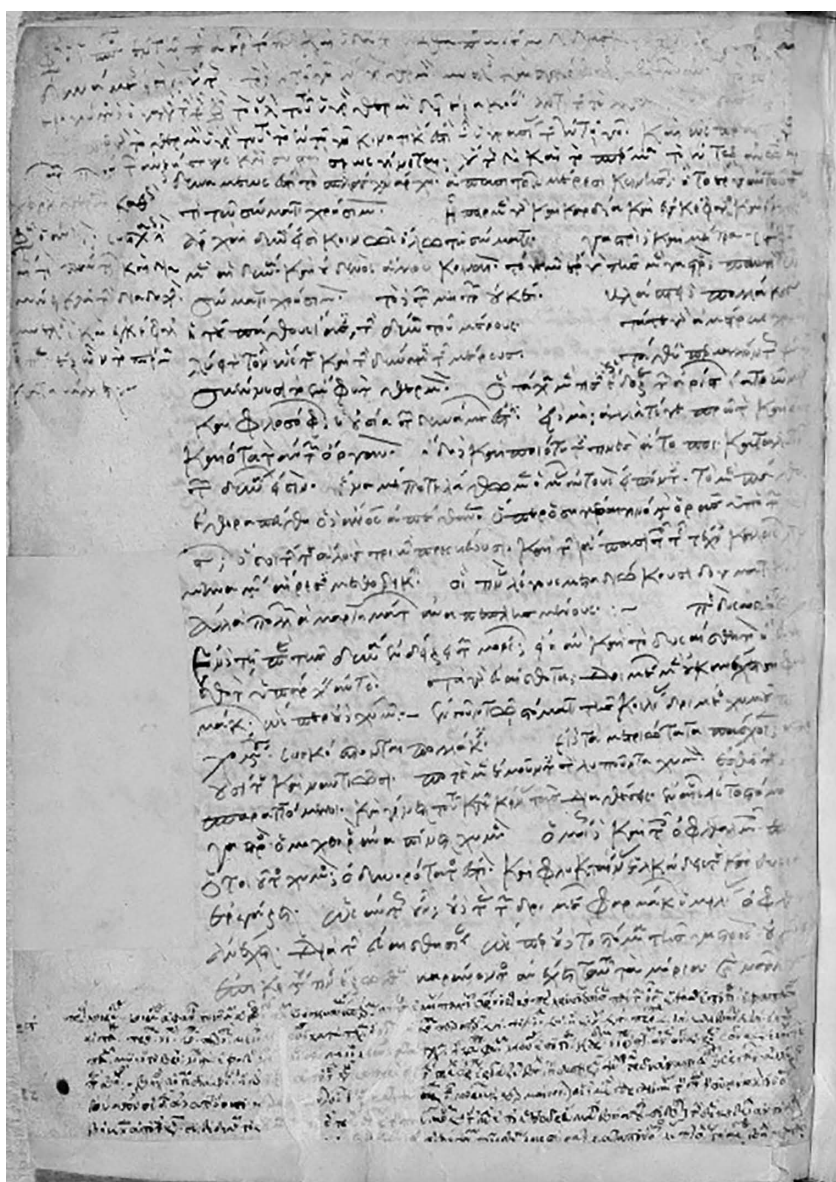


Figure 9.6 Parisinus suppl. gr. 634, f. 48v
(Bibliothèque nationale de France, Paris)

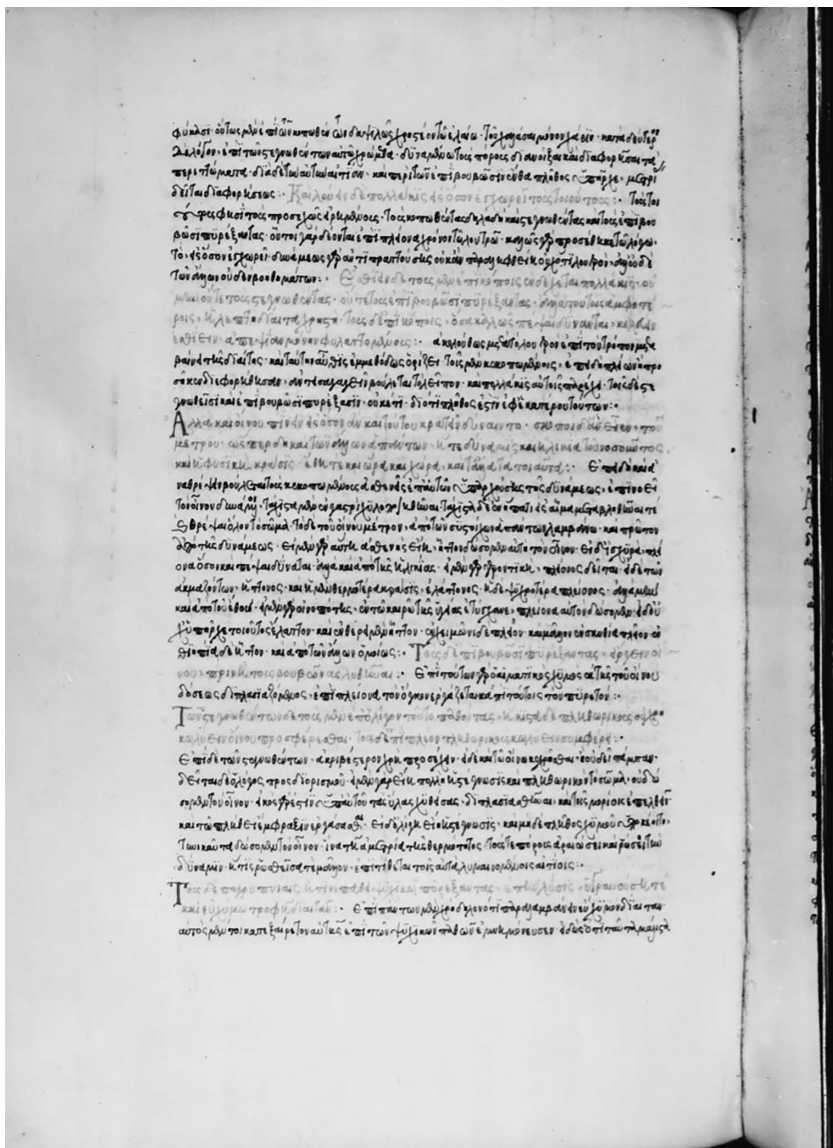


Figure 9.7 Marcianus gr. App. cl. V/4 (coll. 544), f. 133v
(Biblioteca Nazionale Marciana, Venice)

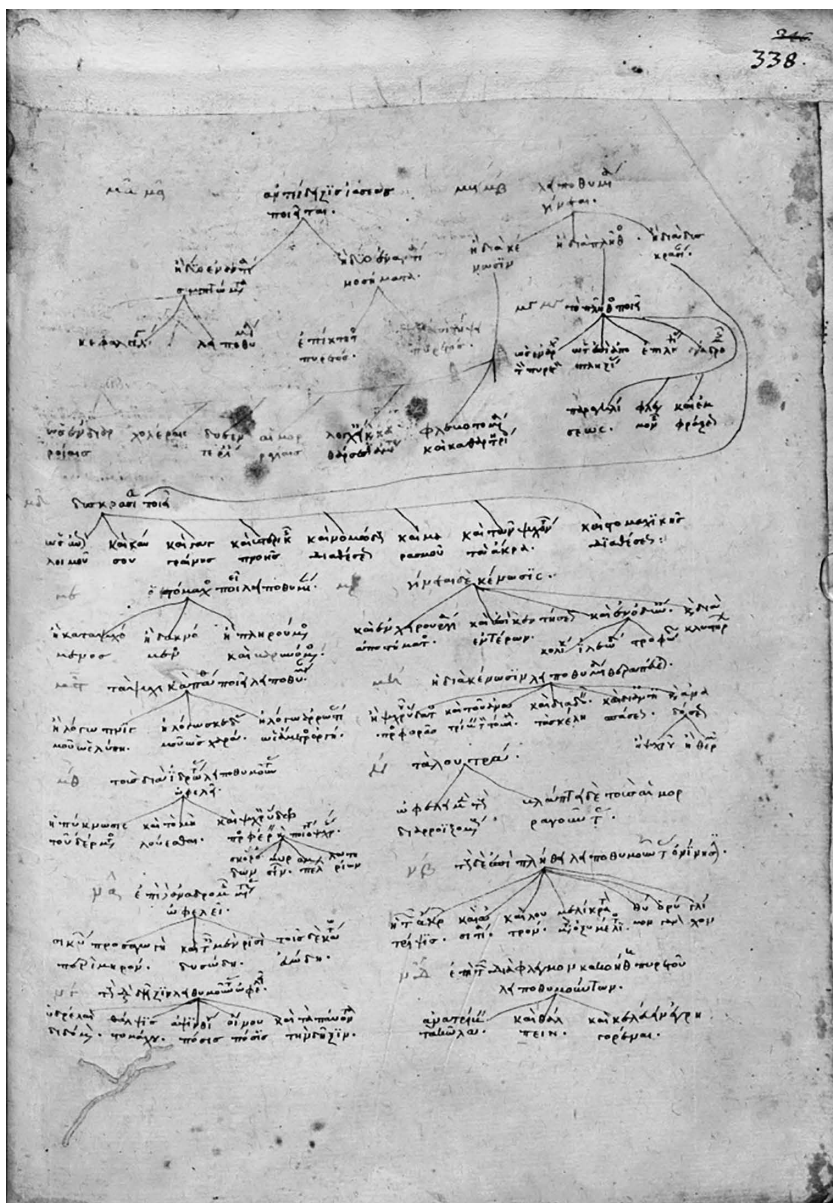


Figure 9.8 Vindobonensis med. gr. 17, f. 338r
(Österreichische Nationalbibliothek, Vienna)

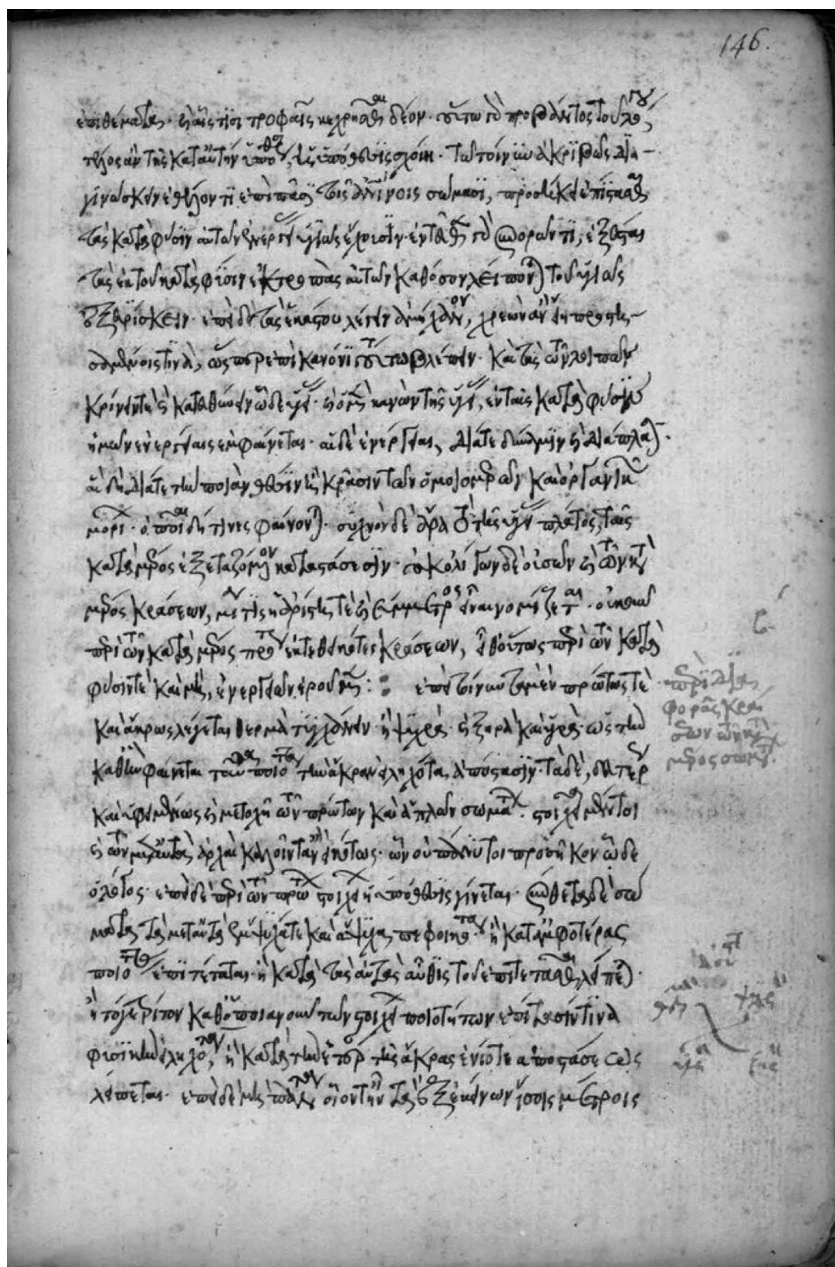


Figure 9.9 Wellcome MS.MSL.52, f. 146r

(Wellcome Library, London)

Notes

- * This chapter has benefited from feedback given by audiences at King's College London (2014) and the University of Oxford (2016). I am also grateful to Klaus-Dietrich Fischer, Michael Trapp, and the anonymous reviewer for their detailed comments on an earlier draft and to Georgi Parpulov for bibliographical suggestions. I would like to thank the personnel in the Biblioteca Medicea Laurenziana (Florence), Biblioteca Ambrosiana (Milan), Biblioteca Nazionale Marciana (Venice), Österreichische Nationalbibliothek (Vienna), Bibliothèque Nationale de France (Paris), Wellcome Library (London), and Beinecke Rare Book and Manuscript Library, Yale University (New Haven, CT), for facilitating *in situ* access to manuscripts and allowing the reproduction of digital images. Sincere thanks go to Wellcome Trust (200372/Z/15/Z) for supporting my research and for covering the open access publishing costs. This chapter is dedicated to my beloved brother, Yerasimos, who had been a great companion during an adventurous research trip to Italy in summer 2016.
- 1 There are of course ancient papyri, which preserve Greek texts, usually in a fragmentary condition; additionally, entire texts or synopses of Greek texts, which are now lost in the original but survive in other languages in medieval translations, such as Latin and Arabic.
 - 2 In the case of medicine, for example, Vivian Nutton (1984: 2) calls the early Byzantine medical authors “refrigerators of antiquity”. Later on this negative view was followed and indiscriminately applied to all Byzantine medical literature by Gotthard Strohmaier (1998: 154), who stated: “medical thought in the Byzantine world had not truly new features”. On the other hand, see the recent thought-provoking study by Jeffreys (2014: 171), who, in addressing classicists working with Byzantine literature, aptly states: “For classicists the message is that they should cease quibbling over iotacist errors and recognise the intellectual endeavours that lie behind so much Byzantine activity”.
 - 3 Jauss (1982: 20): “. . . the understanding of the first reader will be sustained and enriched in a chain of receptions from generation to generation”.
 - 4 For an overview of Galen's Byzantine reception, see Nutton (2007: 171–6); and Bouras-Vallianatos (2015a: 431–5). For the early Byzantine period, in particular, see Temkin (1973: 51–94). On the current status of research on the Byzantine reception of the classical world in general, see Jeffreys (2014: 158–74). See also the edited volume by Mullett and Scott (1981), which provides a wide range of studies on the presence of the classical tradition in a variety of literary genres in Byzantium.
 - 5 The work is available in Kühn's edition (1826) XI.1–146. The first book has been translated into English and critically edited by Dickson (1998: 20–278) on the basis of manuscripts which transmit Stephen's early Byzantine commentary on the text only. The entire text is available in French and English translation by Daremberg (1856: II.706–84) and Johnston (2016: 336–559) respectively. On the dating, I follow Peterson's convincing conclusion in his substantial study of the text (1974: 3–16) and his specialised article on the dates of the Galenic corpus (1977: 484–95). He has narrowed down Ilberg's (1896: 179–94) earlier attempt at dating the treatise, which proposed it had been written between AD 169 and 180.
 - 6 Galen, *Loc. Aff.*, 5.8, ed. Kühn (1824) VIII.361.12–366.5. On this case history, see Peterson (1974: 29–32); and Mattern (2008: 81–6).
 - 7 Galen, *Loc. Aff.*, 5.8, ed. Kühn (1824) VIII.362.6–8. The English translation is by Siegel (1976: 161).
 - 8 Galen, *MMG*, I.1, ed. Kühn (1826) XI.1.9–2.1: ἡξιώσας μὲν γὰρ ἡμᾶς, ἰαμάτων τινά σοι καθόλου μέθοδον ὑποτυπώσασθαι. English translation by Johnston (2016: 337): “you asked me to sketch out for you some general method of treatment”.
 - 9 Galen, *MMG*, I.1, ed. Kühn (1826) XI.3.18–4.2. English translation by Johnston (2016: 341). Glaucon is consistently called a philosopher by later Byzantine and Arab authors

- in referring to Galen's *Therapeutics to Glaucón*; see the evidence collected by Peterson (1974: 28–9). There is also a brief phrase in Galen's *On My Own Books*, 4, ed. Kühn (1826) XIX.31.12–13, reading “καὶ τῷ Γλαύκωνι τῷ φιλοσόφῳ δοθέντα δύο” (“and two [books] given to Glaucón the philosopher”) that refers to Glaucón's philosophical identity, but it was put in brackets by Müller (1891) 109.20, without providing a convincing explanation of his choice (1891: lxxxi), although it was included in the sole manuscript, i.e. Ambrosianus gr. 659 *olim* Q 3 Sup. (fourteenth/fifteenth centuries). The most recent edition by Boudon-Millot (2007) 157.16–7, which also considers a newly discovered witness of the text, i.e. Vlatadon 14 (fifteenth century) that retains the phrase, follows Müller's choice. On this passage, see Peterson (1974: 26–7).
- 10 Galen, *MMG*, 2.8, ed. Kühn (1826) XI.112.7; 2.4, XI.99.15; and 1.1, XI.5.11–13 respectively.
 - 11 Galen, *MMG*, 2.2, ed. Kühn (1826) XI.81.7–10; and 2.9, XI.124.10–13;
 - 12 Galen, *MMG*, 2.12, ed. Kühn (1826) XI.143.7–8. The term “cancer” (καρκίνος) in ancient medical texts refers to ulcer, described as a superficial abnormality often caused by an excess of black bile and it could also refer to malignant lesions; on this, see the brief entry by Leven (2005: 538–9).
 - 13 Galen, *MMG*, 1.12, ed. Kühn (1826) XI.38.3–5; 2.3, XI.84.7–8; and 2.12, XI.142.14–16.
 - 14 Galen, *MMG*, 2.10, ed. Kühn (1826) XI.132.1–6.
 - 15 Galen, *MMG*, 2.13, ed. Kühn (1826) XI.145.12–14: ταῦτα μὲν οὖν εἰς ἀποδημίαν σοι μακρὰν στελλομένῳ νομίζω συμμέτρως ἔχειν. English translation by Johnston (2016: 558): “these things would, I think, be convenient for you to have when setting out on a long journey abroad”.
 - 16 On medical handbooks written for *philiatroi* in Byzantium with a particular focus on John Zacharias Aktouarios' *Medical Epitome*, see Bouras-Vallianatos (2015d: 160–206).
 - 17 Galen, *MMG*, 2.1, ed. Kühn (1826) XI.4.5–6.
 - 18 Oribasios, *Synopsis for Eunapios*, pr., ed. Raeder (1926) 317.33–5. On the *diaphōnia* in Oribasios' *Synopsis for Eunapios*, see van der Eijk (2010: 531).
 - 19 It should be noted, however, that not all doctors performed surgery. On the activity of physicians and surgeons in the Roman Empire, see Jackson (1988: 56–85).
 - 20 LSJ, s.v. *φίλατρος*: “friend of the art of medicine”. On the concept, see Kudlien (1970: 18–20); and Luchner (2004: 9–21). *Philiatroi* were expected to be well educated, but not practising physicians. See also Galen's *On the Preservation of Health*, in which he refers explicitly to the group of *philiatroi*; for example, he does not hesitate to provide extra details in particular passages, so as to be clear enough even for those with just an elementary knowledge of medicine, *On the Preservation of Health*, 4.5 and 6.14, ed. Kühn (1823) VI.269.11–17 and 449.5–7 = ed. Koch (1923) 118.30–119.4 and 197.2–4.
 - 21 Galen, *Comp. Med. Loc. and Comp. Med. Gen.*, ed. Kühn (1826–7) XII.378–1003, XIII.1–361 and XIII.362–1058.
 - 22 Galen, *MMG*, 2.13, ed. Kühn (1826) XI.145.14–146.3.
 - 23 Galen, *MM*, ed. Kühn (1825) X.1–1021. On the content and audience of Galen's *Therapeutic Method*, see Nutton (1991: 5–9).
 - 24 Apart from a predictable reference in his *On My Own Books*, 4, ed. Kühn (1830) XIX.30.18 = ed. Boudon-Millot (2007) 157.1–2, in which Galen discusses all his books concerning therapeutics, and a brief reference in his *On Crises*, 2.13, ed. Kühn (1825) IX.696.15–17 = ed. Alexanderson (1967) 162.1–3, where Galen does not expect from his reader to consult *Therapeutics to Glaucón*, there is no other mention of the work in his corpus. For example, it is not mentioned in Galen's own list of his works in his *Art of Medicine* (written after AD 193), 37, ed. Kühn (1821) I.407.8–412.3 = ed. Boudon (2002) 388.4–392.17, in which he recommends to his readers those treatises that could provide the necessary theoretical background on a variety of specialised medical subjects; on this, see Boudon (2002: 192–6).

- 25 Fevers caused by humoural imbalances are considered diseases by Galen, by contrast with ephemeral fevers, which are identified as symptoms; see Galen, *MMG*, 1.3–4, ed. Kühn (1826) XI.16.13–17.7. There is a useful study on this by Wittern (1989: 3–22).
- 26 For a detailed commentary on the entire treatise from a medical point of view, see Peterson (1974: 47–93).
- 27 Peterson (1974: 32–46) and Dickson (1998: 19, n. 1) agree on the identification of Glaucon as a *philiatros*. Johnston (2016: 321) refers to Glaucon as a philosopher with an interest in medicine. Nutton (2004: 868) considers Glaucon to be a physician. In a personal communication I had with Vivian Nutton, he reaffirmed and expanded his view, seeing Glaucon either as a practitioner or a very good *philiatros* on the grounds that *Therapeutics to Glaucon* is too detailed to be an introductory handbook. Boudon refers to Glaucon as a physician and philosopher (2000: 482–4) and believes that the work could be considered useful for beginners in medicine (1994: 1454): “Et en ce sens il est légitime, comme les Alexandrins l’ont fait, de considérer le ‘Ad Glauconem’ comme un ouvrage utile à des débutants”.
- 28 On the peculiarities of editions of Galenic works, see Nutton (2008: 356–63).
- 29 For a concise discussion of the edition of texts preserved in Byzantine manuscripts, see Jeffreys (2008: 86–94).
- 30 Diels (1905: 93); and Touwaide (2016: *passim*). A useful list of witnesses with associated bibliographical references is also available on <http://pinakes.irht.cnrs.fr/notices/oeuvre/3164/> (accessed 5 March 2017), although it should be consulted with caution on this particular work; for example, both Laurentianus Plut. 75.9 (fifteenth century) and 75.16 (fifteenth century), available in digital reproduction online at <http://teca.bmlonline.it/TecaRicerca/index.jsp> (accessed 5 March 2017), contain *Therapeutics to Glaucon* (ff. 174r–219v and ff. 149v–192r respectively) and not the erroneously listed *Therapeutic Method* (<http://pinakes.irht.cnrs.fr/notices/cote/16694/> and <http://pinakes.irht.cnrs.fr/notices/cote/16701/> respectively, accessed 5 March 2017). There are a few surviving papyrus fragments with excerpts of Galenic works, but none of the *Therapeutics to Glaucon*; for an updated list, see http://cip193.philo.ulg.ac.be/Cedopal/MP3/dbsearch_en.aspx (accessed 5 March 2017), s.v. Galenus. The work was translated into Syriac (Degen 1981: 146, n. 56) and Arabic (Ullmann 1970: 45–6, n. 40; and Sezgin 1970: 82–3, n. 6); see Hunayn ibn Ishāq’s (d. 873) comments on the Syriac and Arabic translations of the *Therapeutics to Glaucon* in his *Epistle (Risāla)*, 8, ed. Lamoreaux (2016) 15.6–17.5. It was also translated into Latin before the mid-fifth century AD (see Fischer 2003: 111–12, 285–6 and 2012: 103–16; and www.galenolatino.com/index.php?id=11&L=&uid=40, accessed 5 March 2017) and later on by Niccolò da Reggio (fl. early fourteenth century) (see www.galenolatino.com/index.php?id=11&L=&uid=95, accessed 5 March 2017).
- 31 On Galen’s textual transmission in Byzantium, see Wilson (1987: 47–64). The spread of surviving manuscripts containing Galenic works peaks in the Palaiologan period. We should bear in mind that, before the widespread introduction of paper in the twelfth century, parchment codices were the norm; see Irigoien (1977: 45–54) and Lowden (2008: 462–72). Another reason might be the destruction of Byzantine books, especially those in private libraries, during the seizure of Constantinople by the fourth crusade in 1204. On the dating of Parisinus suppl. gr. 446 (ff. 1r–31v) and Vaticanus gr. 2254 (ff. 1r–20v) with relevant bibliographical references, see Buzzi (2012: 237–8) and Lilla (1985: 430–2).
- 32 Buzzi (2012: 237–42).
- 33 On Kühn as an editor of Galen’s *Opera Omnia*, see Nutton (2002: 1–8).
- 34 The examples are mostly based on Buzzi’s, but all the transcriptions of passages, including those from Parisinus suppl. gr. 446, are based on my own consultation of the relevant manuscripts. Transcriptions from Greek are diplomatic and retain the spelling and punctuation of the relevant codex.

- 35 For a list of contents, see Omont (1888: 262); and <http://pinakes.irht.cnrs.fr/notices/cote/53179/> (accessed 5 March 2017).
- 36 On the contents and date of Parisinus suppl. gr. 634 (ff. 39r–64r) with relevant bibliographical references, see Omont (1888: 287); Lorusso (2005: 44, n. 4); Garofalo (2005: 15–16, nn. 48–9); Garofalo (2008: 62); and <http://pinakes.irht.cnrs.fr/notices/cote/53369/> (accessed 5 March 2017). A digital reproduction is available online at: <http://gallica.bnf.fr/ark:/12148/btv1b52501352s/f105.image.r=Suppl%C3%A9ment%20grec%20634> (accessed 5 March 2017).
- 37 On Laurentianus Plut. 75.9 (ff. 174r–219v) contents and date, see Bandini (1764–70: II.155–6); and Bouras-Vallianatos (2015d: 351, 392). On Beinecke MS 1121 (ff. 107r–140r), available online at <http://brbl-dl.library.yale.edu/vufind/Record/3445989> (accessed 5 March 2017), see García Novo (2012: 24–5); and <http://pinakes.irht.cnrs.fr/notices/cote/46568/> (accessed 5 March 2017).
- 38 I use Johnston's (2016: 349) English translation, slightly modified. Kühn's edition (1826) XI.8.11–12 is in agreement with P here: . . . τὰ τῶν κατακλισέων τε καὶ τὰ τῆς ἀναπνοῆς καὶ ὅσα κάτω τε καὶ ἄνω κενοῦται.
- 39 I use Johnston's (2016: 361) English translation, slightly modified. Kühn's edition (1826) XI.17.8–13 is closer to F in this case: . . . κατὰ τὴν πρώτην ἡμέραν διαγνωστέον οἷός τις ἐστὶν ὁ πυρετός, ἄρα γε χρόνιος ἢ ὀξύς, καὶ πότερον τῶν διαλειπόντων καλουμένων ἢ τῶν συνεχῶν. εἰ δὲ μὴ οἶόν τε περὶ τὴν ἡμέραν τὴν πρώτην, ἀλλὰ τῇ δευτέρᾳ γε πειρατέον ἐξευρεῖν τὴν ἰδέαν τοῦ πυρετοῦ.
- 40 On textual corruptions in the transmission of Greek and Latin texts, see Reynolds and Wilson (1991: 222–33), who provide a variety of useful examples; see also the recent relevant discussion by Tarrant (2016: 85–104).
- 41 For a brief introduction to Byzantine manuscript layout, see Maniaci (2005: 326–8); see also Maniaci (1995: 16–41), in which she discusses the topic in more detail and gives examples from both Greek and Latin manuscripts.
- 42 I have not consulted all the available manuscripts and I am only concentrating on a few representative examples.
- 43 LSJ, s.v. σημειῶ, A.II.3. In the mid-fifteenth-century medical manuscript Wellcome MS.MSL.52 (f. 96v) a non-scribal hand, in explicating the significance of the text, adds in the margins “σημειῶσαι τοῦτο ὡς ἀναγκαῖον” (“note well this as essential”); on this particular manuscript, see Bouras-Vallianatos (2015b: 286–92).
- 44 On the development of textual indicators in early Byzantine manuscripts, see Lazaris (2010: 285–98). It should be noted that coloured ink is often used in Byzantine manuscripts to mark chapter titles.
- 45 LSJ, s.v. αἱμορραγέω, αἱμορραγία; and ῥήγνυμι, C.2.
- 46 Galen, *MMG*, 1.15, ed. Kühn (1826) XI.52.16–18: καὶ ἐφ’ ὃν ἐπιπολῆς καὶ κατὰ τοὺς μυκτῆρας φλεβῶν εἴη τις ἐρῶγυνία, τῶν ἐπεχόντων φαρμάκων τὸ αἷμα ἐπιτιθέναι. English translation by Johnston (2016: 417): “And if on the surface of these or in the nostrils, there is some rupture of veins, apply the blood-staunching medications”.
- 47 There is an edition of these scholia by Garofalo (2008: 91–103).
- 48 On symbols used for scholia on the *Iliad*, see Maniaci (2006b: 287–8). On the arrangement of scholia in the margins of early Byzantine manuscripts, see the studies by Zuntz (1975); Wilson (1984: 103–10); McNamee (1998: 269–88); and Montana (2011: 115–55).
- 49 Q is not listed in Sonderkamp's (1987: xviii–xix) study of the manuscript tradition of Theophanes' medical work. The identification of the excerpts was first made by Garofalo (2008: 61, n. 3). In a recent communication Barbara Zipser, who is currently preparing a critical edition of the text, reported that this fragmentary version of the text does not allow her to allot it a definite place in the stemma of an otherwise huge tradition. Theophanes' text is available in Bernard's edition (1794–5). See also Sonderkamp (1984: 29–42), who provides a brief study of the author and the work.

- 50 See Reynolds and Wilson (1991: 64–5). For a general overview of books and readers in Byzantium, see Wilson (1975: 1–15); Hunger (1989); and recently Gaul (2016: 981–95).
- 51 On Marcianus gr. App. cl. V/4, see Mioni (1972: 254–5). The manuscript does not give the commentary a title, but simply has the heading “ἀρχὴ τῆς μικρᾶς θεραπευτικῆς” (“beginning of the small therapeutic manual”), which refers to the brief nature of the *Therapeutics to Glaucon* compared to the long Galenic treatise *Therapeutic Method* that precedes our work in this manuscript.
- 52 The commentary survives in five post-Byzantine codices and has been critically edited by Dickson (1998: 19–279). On the manuscript tradition of the commentary, see Dickson (1998: 5–16). It is notable that in Ambrosianus L 110 sup., the lemmata do not often provide the Galenic text in full, but only the first couple of words.
- 53 Cf. Aristotle, *EN*, 1146b, ed. Bywater (1894): ἡ γὰρ λύσις τῆς ἀπορίας εὑρεσίς ἐστιν (“the solution of a problem/difficulty is a discovery”). Interestingly, on another witness of the text, i.e. Ambrosianus L 110 sup. (= A, sixteenth century), there are a couple of times in which specific terms, i.e. κείμενον (= text) and ἐξήγησις (= explanation/interpretation), are used to label the lemma and the commentary respectively in the margins; on the contents and date of the Ambrosianus L 110 sup. see Martini and Bassi (1906: II.596–8).
- 54 On the terminology relating to various forms of layout, see Maniaci (2006a: 242–4). On the layout of Byzantine manuscripts with scholia, see the useful studies by Irigoin (1984: 85–102); Cavallo (2000: 55–64); and Sautel (2000: 89–98). See also Budelmann (2002: 143–8), who discusses the physical appearance of commentaries on Homer and Hesiod by the twelfth-century Byzantine scholar John Tzetzes. On the layout of medieval Latin manuscripts with commentary, see Holtz (1984: 139–67) and (2000: 101–18).
- 55 On the Galenic commentaries, see Manuli (1983: 471–82); Mansfeld (1994: 131–76); Vallance (1999: 228–42); von Staden (2002: 109–39); and Flemming (2008: 323–54). See also Andorlini (2000: 40, 48), who discusses a third-/fourth-century medical papyrus fragment (PFlor. 115 = CPF III 4) with brief lemmata alternating with the commentary. On the aesthetics of writing commentaries in general, see Gumbrecht (2003: 41–53).
- 56 On contents and date, see Baffioni (1960: 41–6); Hunger (1969: 60–2); and Gundert (1998: 91–2).
- 57 For a brief introduction to the study of medicine and philosophy in Alexandria, see Pormann (2010: 419–25); and Nutton (2013: 305–6). See also Temkin (1932: 51–80) and the substantial studies by Palmieri (1997: 33–133) and (2002: 5–23). Duffy (1984: 21–7) provides a useful collection of information on medical teaching and practice in the sixth and seventh centuries.
- 58 Majcherek (2008: 191–206).
- 59 For a reconstruction of the medical curriculum and an analysis of the versions by Hunayn ibn Ishāq (d. 873) and Ibn Riḍwān (d. 1068), see Iskandar (1976: 235–58); cf. Roueché (1999: 153–69). There is another Arabic source, which was edited by Garofalo (2000: 135–51), attributed to John the Grammarian (Yahyā al-Nahwī), an Alexandrian scholar whose name is only known from the Arabic tradition and should not to be confused with the well-known John Philoponos or the author of Hippocratic commentaries John of Alexandria; on John the Grammarian, see Garofalo (1999: 185–218); and Pormann (2003: 233–63). The only source in Greek is found in Stephen’s, 1.pr, *Commentary on the “Prognostic” of Hippocrates*, ed. Duffy (1983) 30.31–34.11, which refers to the Hippocratic works most probably studied in Alexandria; on this, see Duffy (1997: 9–11), and Westerink (1992: 11–12).
- 60 None of the Alexandrian summaries survive in Greek, but there are surviving versions in Arabic translation. On the Alexandrian summaries, see Garofalo (2003: 203–31).

See also Pormann (2004: 11–33), who by focusing on the summary of Galen's *On the Sects for Beginners*, shows that these texts are not simple abridgements, but incorporate rich commentaries.

- 61 See the very informative overview by Manetti (2015: 1197–215).
- 62 See Mazzini and Palmieri (1991: 285–310), who argue for the possible existence of a medical school in Ravenna. The city served as the capital of the Kingdom of the Ostrogoths in the late fifth and early sixth centuries before its reconquest by the Byzantine (Eastern Roman) Empire and the subsequent establishment of the Exarchate of Ravenna in 584, after which it became the seat of the emperor's representative in Italy. In both periods it experienced a considerable cultural flourishing.
- 63 Palmieri (1981: 197–296).
- 64 Garofalo (1994: 329–48). There is one briefer summary, preserved in Arundel Or. 17 (AD 1218, ff. 17r–41v) and attributed to Yahyā al-Nahwī, which is closely related to the longer one preserved in British Library Add. MS 23407 (seventeenth century, ff. 72v–157r) and Wellcome MS Arabic 62; see also Peterson (1974: 101–12, 115–16).
- 65 On the transmission of this work and the modern edition, see n. 52 above. It is noteworthy that there is no evidence in the surviving commentary to suggest the existence of a commentary on the second book of the treatise.
- 66 Critical editions by Westerink (1985), (1992), (1995) and Duffy (1983) respectively.
- 67 See, for example, Stephen, 44, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. and tr. Dickson (1998) 100.1–17 and 101, in which he starts his account as follows: "I visited the patient [εἰσελθὼν παρὰ τὸν ἄρρωστον] immediately on the first day and found him afflicted with shuddering . . .". See also Stephen, 40, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. Dickson (1998) 94.25–96.13; and Stephen, 3.29, *Commentary on the "Prognostic" of Hippocrates*, ed. Duffy (1983) 290.9–12.
- 68 See Wolska-Conus (1989: 5–89), Temkin (1991: 228, n. 1), and Papathanasiou (2006: 163–203), who are in favour of this identification. On the other hand, Roueché (2012: 120) has recently argued that "Wolska-Conus' hypothesis should be abandoned"; see also Roueché (2016: 541–63) and cf. Lumpe (1995: 1406–9). See also the recent informative entries by Searby (2016: 563–79) and Boudon-Millot (2016: 579–88). We are also aware of some alchemical texts under the name of Stephen; see Martelli (2016: 557–63).
- 69 On his medical commentaries, see Duffy (1983: 11–13); and Dickson (1998: 1–3). On Stephen's Hippocratic commentaries, in particular, see Wolska-Conus (1992: 5–86); and Mansfeld (1994: 52–4). Stephen makes special mention of Alexandria twice in his texts. In the first instance he refers to a particular plant growing in Alexandria, 214, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. Dickson (1998) 252.5–7, and, in the second example, he refers to the city's climate, 3.16, *Commentary on the "Aphorisms" of Hippocrates*, ed. Westerink (1992) 106.5–11. Dickson and Duffy, on the basis of the first example and of both respectively, argue that there is no doubt that Stephen was active in the city. Although this is very probable, neither of the examples provides a definite reference to Stephen's place of work.
- 70 On this kind of division, see Richard (1950: 191–222); and Westerink (1964: 170–1).
- 71 On the didactic function of commentaries in the ancient world, see Sluiter (1999: 173–205).
- 72 Stephen, 23, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. and tr. Dickson (1998) 78.28–9 and 79.
- 73 See, for example, Stephen, 9, 13, 159, 182, and 209, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. Dickson (1998) 60.14, 66.12–13, 198.5, 220.24, and 246.2.
- 74 See, for example, Stephen, 53, 158, 182, *Commentary on Galen's "Therapeutics to Glaucon"*, ed. Dickson (1998) 112.13, 194.16, 220.9–10.
- 75 The use of the first-person plural is common in ancient Greek and Latin scientific texts, and Galen himself makes use of it. For its use by Galen and the notion of "communal-ity", see König (2011: 183–6), who argues for a didactic relationship between author

- and reader. See also Bouras-Vallianatos (2014: 341–2), who discusses its employment by the sixth-century medical author and practising physician Alexander of Tralles.
- 76 On the power of a commentator in manipulating a source text, see Sluiter (2013: 191–214).
- 77 Stephen, 12, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 64.1–6 = Galen, *MMG*, 1.2, ed. Kühn (1826) XI.11.10–16. I use Johnston's translation slightly modified (2016: 353).
- 78 English translation by Dickson (1997: 65).
- 79 Here I prefer the reading of Ω , i.e. the consensus of Ambrosianus L 110 sup. (= A), Haunicns. bibl. univ. e don. var. (= C), and Marcianus gr. App. cl. V/4 (= M).
- 80 Stephen, 61, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. and tr. Dickson (1998) 120.4 and 121. This recalls Galen's own statement in his proemium to the *Commentary on the Fractures of Hippocrates*, ed. Kühn (1830) XVIIIb.319.11–12: $\delta\epsilon\delta\epsilon\iota\kappa\tau\alpha\iota\ \delta\epsilon\ \epsilon\acute{\nu}\ \epsilon\kappa\epsilon\acute{\iota}\nu\omega\varsigma\ \tau\acute{o}\ \mu\acute{\epsilon}\nu\ \delta\acute{\nu}\tau\omega\varsigma\ \acute{\alpha}\sigma\alpha\phi\acute{\epsilon}\varsigma\ \alpha\upsilon\tau\acute{o}\ \delta\iota'\ \epsilon\alpha\upsilon\tau\acute{o}\ \tau\omicron\iota\omicron\upsilon\tau\omicron\nu\ \upsilon\pi\acute{\alpha}\rho\chi\omicron\nu$.
- 81 See, for example, Stephen, 1, 11, 53, 198, and 209 *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 20.12–24.19, 62.15–34, 112.12–17, 234.19–238.4, and 246.1–19.
- 82 See, for example, Stephen, 1, 18, 43, 209, and 227, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 20.17, 74.4, 98.21–2, 246.2, and 272.28.
- 83 See, for example, Stephen, 9, 209, 214, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 60.18, 246.13–14, 252.11–13.
- 84 See, for example, Stephen, 198, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 236.1ff.
- 85 Stephen, 53, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. and tr. Dickson (1998) 112.10–12 and 113.
- 86 Galen, *Puls.*, ed. Kühn (1824) VIII.453–92. On the introductory nature of this work, see Boudon (1994: 1441–5). See also Curtis (2009: 63–79), who discusses Galen's didactic strategies in the treatise in question.
- 87 [Hippocrates], *Aphorisms*, 2.13, ed. Littré (1844) IV.472.11–13 = ed. Jones (1931) 110.18–20.
- 88 Stephen, 227, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. and tr. Dickson (1998) 272.22–7 and 273.
- 89 See Stephen, 5, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 36.10–3, in which he presents Galen arguing for the usefulness of the method of division ($\delta\iota\alpha\iota\tau\epsilon\tau\iota\kappa\acute{\eta}\ \mu\acute{\epsilon}\theta\omicron\delta\omicron\varsigma$) for the instruction of medical students and the avoidance of errors by physicians. This method is known from antiquity; see Talamanca (1977: 3–189) and Mansfeld (1992: 326–31). On the Alexandrian method of division with further examples throughout the Byzantine period, see Ieraci Bio (2003: 9–51). It is notable that, on at least one occasion, the brief text accompanying the diagrams (in this case corresponding to chapters 6–18 of the *Art of Medicine*) was transmitted in textual form without any diagrams; on this see Ieraci Bio (2007: 149–61).
- 90 $\Lambda\epsilon\iota\pi\omicron\theta\upsilon\mu\acute{\iota}\alpha$ refers to a temporary loss of consciousness and can be translated into English as “fainting”, “swooning”, or “syncope”. On this term, see Johnston (2016: 408–9, n. 22). When referring to the term in Galen's *Therapeutics to Glaucón*, Peterson (1974: 61) states that “*leipothymia* [is] an approximate counterpart to what is now called ‘shock’”. See also Stamatu (2005: 149–50).
- 91 Stephen, 163, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 202.9–10 = Galen, *MMG*, 1.15, ed. Kühn (1826) XI.47.11–12. I use Johnston's translation slightly modified (2016: 409).
- 92 Stephen, 163, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. and tr. Dickson (1998) 202.11–15 and 203.
- 93 Stephen, 163, *Commentary on Galen's "Therapeutics to Glaucón"*, ed. Dickson (1998) 202.15ff.

- 94 See Pormann (2004: 12–21).
- 95 This is also substantiated by the fact that the Galenic works represented in the diagrams of the Vindobonensis med. gr. 16 were part of the Alexandrian curriculum. On the connection between the diagrams and the early Byzantine commentaries and summaries of Galenic works, see Temkin (1935: 412–20) and recently Overwien (2012: 169–75) and (2013: 187–217). On further connections between the branch diagrams and Stephen's commentary, see Gundert (1998: 102, 116–44). Klaus-Dietrich Fischer has brought to my attention the existence of diagrams in Latin connected with *Therapeutics to Glaucón* in Escorialensis N III 17 (twelfth century), ff. 136v–137v for example. These Latin diagrams have not been examined by scholars up to now, and the current catalogue by Antolin (1913: 155–6) does not refer to them.
- 96 Garofalo (2008: 65–6).
- 97 Helmreich (1910: 3); Garofalo (2008: 66, n.29); and Lorusso (2010: 121–2).
- 98 Garofalo (2008: 91–2). A brief text recounting the relationship between Galen and Glaucón is also found on f. 106v of Beinecke MS 1121 (see n. 36 above), preceding the beginning of the first book of the treatise on f. 107r. This is not accompanied by any further scholia, is clearly aimed at giving an introduction to the treatise, and does not follow the original text of the case history in the *On Affected Parts* very closely, but often takes the form of a synopsis in indirect speech, including linguistic elements of Byzantine Greek. A study of the text, accompanied by an edition and French translation is provided by García Novo (2003: 135–48).
- 99 Anonymus, 64, *Scholia on Galen's "Therapeutics to Glaucón"*, ed. Garofalo (2008) 97. The translation from Greek is my own.
- 100 Galen, *MMG*, 2.2, ed. Kühn (1826) XI.80.8.
- 101 On *hexis* in Galen with reference to relevant passages, see Singer (2014: 135, n. 2; 251, n. 77). See also Mattern (2008: 98–105), who discusses the role of a patient's *hexis* in Galen's clinical activity.
- 102 Galen, *Ars Med.*, 14, ed. Kühn (1821) I.341.7–10 = Boudon (2002) 315.12–316.3.
- 103 In a similar vein, see also the brief reference to *Therapeutics to Glaucón* itself in the *Scholia on Galen's on Affected Parts* edited by Moraux (1977) 32.5–12.
- 104 Anonymus, 59, 68, 71, and 78, *Scholia on Galen's "Therapeutics to Glaucón"*, ed. Garofalo (2008) 94–6, 98, 98, and 102.
- 105 Anonymus, 63 and 65, *Scholia on Galen's "Therapeutics to Glaucón"*, ed. Garofalo (2008) 97. *Outline of Empiricism* does not survive in Greek and is only available in an early Renaissance Latin translation (ed. Deichgräber, 1965).
- 106 In my discussion I include only works written in Greek, although there are some notable early Byzantine surviving examples written in Latin by authors such as Theodore Priscianus (fourth/fifth century AD) and Marcellus (late fourth/early fifth century AD). On these authors, see Formisano (2001: 64–84).
- 107 The most detailed survey of Byzantine medical literature, although now outdated, is by Hunger (1978: II.278–320); for a brief, fresh overview, see Bouras-Vallianatos (2015c: 105–9) and recently Bouras-Vallianatos (2016b: 1025–31).
- 108 See, for example, Strohmaier (1998: 169): “the chief claim to credit of Byzantine science – which had developed even fewer ideas than Arabic science – was that it had preserved the original Galenic texts”.
- 109 On the compilation techniques of early Byzantine medical authors, see the study by van der Eijk (2010: 519–54). See also Bouras-Vallianatos (2014: 337–53), who emphasises Alexander of Tralles' contributions in the field of pharmacology.
- 110 On this section of Galen's work, see the discussion by Peterson (1974: 40–2, 61–2), who argues that Galen's account is already selective and provides only the treatment for a sudden occurrence of the condition. On *leipothymia*, see n. 90.
- 111 In this I have been influenced by Philip van der Eijk's (2010: 536–51) methodology in his pioneering study on early Byzantine medical literature.

- 112 On Oribasios, see de Lucia (2006: 21–9). See also MacLachlan (2006: 100–38), who discusses the production of Oribasios’ epitomes.
- 113 On Aetios of Amida, see Romano (2006: 255–8); and Calà (2012: 10–53). See also the recent remarks on Aetios’ sources and compilation techniques in Books 1, 2, and 9 by Salazar and Martelli respectively in Eijk, Geller, Lehmhaus, Martelli, and Salazar (2015: 198–204).
- 114 On the use of first-person verbs and pronouns in Aetios of Amida’s medical compilation, see Debru (1992: 79–89).
- 115 On Alexander, see Puschmann (1878–9: 1.75–108) and Guardasole (2006: 557–70).
- 116 Appendix, 6. On Alexander’s use of the epithet *theiotatos* for Galen, see Bouras-Vallianatos (2016a: 388–9). A few direct mentions of Galen’s name and his *Therapeutics to Glaucón* are also provided by Leo the physician (ninth century?) in his *Epitome of Medicine*; see, for example, the chapters on tertian and quartan fevers, 1.5 and 1.7, ed. Ermerins (1840) 95.1–2 and 20–1. We know very little about Leo and his works; see Bliquez (1999: 293–6). See also Gielen (Chapter 8) in this volume, who offers a fresh study of Leo’s other work, i.e. *Epitome on the Nature of Man*.
- 117 Oribasios, *Synopsis for Eunapios*, pr., ed. Raeder (1926) 318.17. On the use of terms denoting Oribasios’ working methods, see Eijk (2010: 526–8).
- 118 Aetios of Amida, *Tetrabiblos*, pr., ed. Olivieri (1935) I.10.1–4. Oribasios’ epitome of the vast Galenic corpus produced at the behest of Julian is also known from a reference in Patriarch Photios’ (ca. 810 – after 893) *Bibliotheca*, 216, ed. Henry (1962) 131.11–132.11.
- 119 Appendix, 8–39 and 54–81.
- 120 See, for example, Oribasios, *Synopsis for Eunapios*, 3.36, ed. Raeder (1926) 416.22–418.12; and Aetios of Amida, *Tetrabiblos*, 6.86 and 6.94, ed. Olivieri (1950) II.231.1–6 and 242.15–244.11.
- 121 Appendix, 175–9 and 194–203.
- 122 Appendix, 114–15.
- 123 On Aetios’ use of Oribasios, see Sideras (1974: 110–30); and Capone Ciollaro and Galli Calderini (1992: 51–72). Cf. van der Eijk (2010: 544–5).
- 124 Appendix, 152–3, 156–8 and 160–5.
- 125 Appendix, 137 and 173.
- 126 Appendix, 43–6 and 101–4.
- 127 For example, see the critical discussion by Calà (2012: 150–65) on Olivieri’s edition by Aetios of Amida and Zipser’s (2005: 211–34) study on the textual tradition of Alexander of Tralles’ work. On Aetios of Amida, see also Garzya (1984: 245–57).
- 128 On Alexander’s criticism of Galen, see Guardasole (2004: 219–34). In this Alexander did not influence Galen’s later readers, but it is noteworthy that there are only half as many surviving manuscripts of Alexander’s work as there are of Paul’s and Aetios’ – although this is not necessarily connected with Alexander’s more critical stance. An exception is the brief *Refutation of Galen* by Symeon Seth of the late eleventh century, whose arguments, however, remain in the theoretical arena and are not connected with contemporary medical practice. On this, see the recent study by Bouras-Vallianatos (2015a: 431–69).
- 129 We must bear in mind that chapter titles and their actual place on the folio vary greatly in Byzantine medical manuscripts and they could often be rearranged by scribes. In the case of Oribasios, both de Lucia (1999: 483, n. 20) and MacLachlan (2006: 115) consider the titles original to the text.
- 130 Paul of Aegina, *Epitome of Medicine*, 2.59, ed. Heiberg (1921) I.125.8–126.20. Paul of Aegina in his *Epitome of Medicine* shows he is attempting to condense the available material further and thus provide, in his own words, pr., ed. Heiberg (1921) I.2.8–16, a condensed manual for instant consultation that could be carried everywhere by physicians, just like lawyers, who were able to provide themselves with legal synopses. On Paul of Aegina, see the brief introduction by Lamagna (2006: 683–91).

- 131 See, for example, the fresh study by Graziosi (2015: 25–47) on portraits of Homer included in Arabic, Italian, and Byzantine manuscripts, which is an attempt to give new insights into contemporary literature. See also the recent thought-provoking study by Mavroudi (2015: 28–59).

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