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The cult of Asklepios 420BCE-200CE: landscape, experience, and religious healing
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Summary:

This thesis studies the Greek cult of Asklepios, a healing deity, with particular reference to the experiential aspects of religious healing in the cult between the late Classical period and the entry of the cult to Athens (c.420 BC) and the reign of the emperor Septimius Severus (d. 211 CE). It draws on archaeological and literary material, and modern anthropological and phenomenological theory, to create an interdisciplinary understanding of ancient religious healing in the cult of Asklepios. Three archaeological sites are used as case studies: Epidauros, Athens, and Corinth.

The iamata, so-called miracle inscriptions from Epidauros, abound in names of suppliants and miraculous cures of ailments: Erasippe of Kaphuiae, sick of worms; Hagestratos, who suffered from insomnia on account of headaches; Gorgias of Herakleia, who had been wounded by an arrow in the lung and for a year and a half "had suppurated so badly that he filled sixty-seven basins with pus... When the day came, he walked out well, holding the point of the arrow in his hands." (IG IV(2), 1, nos. 121-122, B.XXX.)

Over the lifetime of the cult of Asklepios, many thousands of Greeks visited the god's sanctuaries. Some, like the travel writer Pausanias, visited to sightsee. Most came in search of health, or to dedicate a votive in response to a cure.

The major questions of this research project are as follows: What did the ancient Greek person experience when they sought religious healing at cult sanctuaries of Asklepios? How can we know about their experiences? What role did religious healing play in ancient Greek social and cultural understandings of illness, wellness, and the body? How can we understand the ancient Greek version of religious healing in the cult of Asklepios in comparison to other kinds
of religious healing? Are there any universal aspects to these sets of experiences that we can identify?

Illness and concern for health are universals of human experience, but they are mediated through not only individual bodies, but through social conventions and norms, through everyday and specialist knowledge, and through competing ideologies of healing. The body is a central locus, but this project focuses on the position of the body and experience within created cult places: what ways the landscape and the built environment were incorporated within conscious strategies for healing.

Therefore this project incorporates anthropological models of sickness and religious healing for the purpose of comparison and model-building. Comparative material, such as modern religious healing in non-biomedical settings, or Christian faith-healing at holy sites, is important to cast light on questions of subjective experience; it is also important for contextualising religious healing in a continuum of human health-related choices and strategies.

This thesis takes into account the work of Bourdieu concerning practice and *habitus* (1990, 1998). It uses phenomenological theories of landscape (e.g. Tilley 1994), to interrogate the built structures and natural landscape of the Asklepieia from the point of view of experience. It explores how experience and movement through space at the sanctuaries of Asklepios is inscribed upon the body and upon memory, personal and social, and elucidates the interplay between individual and social-collective experiences of healing.
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Abbreviations:

IG = Inscriptiones Graecae
SEG = Supplementum Epigraphicum Graecum
LSJ = H.G. Liddell et al., Greek-English Lexicon. 9th ed. (Oxford 1940)

Classical Texts:

Aelius Aristides, Hieroi Logoi. Trans. C.A. Behr as Aelius Aristides and the Sacred Tales. 1969, Amsterdam: Hakkert.
Galen, De Optimo Medico Cognoscendo. Trans. & ed. A.Z. Iskandar as On the Examinations by which the best physicians are recognised.1988, Berlin: Akademie-Verlag
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Introduction

"The past is a foreign country; they do things differently there." - L.P. Hartley, *The Go-Between* (1953).

Imagine a citizen man of Athens of the mid-2nd-century CE, but not a Roman citizen; a man in the prime of his life, perhaps thirty, married in the last few years. Someone who owns a small bit of farmland but rents it out, whose father apprenticed him to an artisan and who is now a fairly respectable carpenter or potter or something of that sort, who has some education but (unlike Lucian of Samosata) didn't throw over a career as an artisan to make one as an orator and satirist. A man who participates in the duties of a citizen but not at the highest level, who has served as a juror and maybe for a term as a very minor magistrate and/or priest in his deme, who pays his taxes and whose family probably turned out to cheer the emperor Hadrian when he was a child. He has apprentices and owns at least one male slave and more than one female slave for his household; he is prosperous enough to afford to pay doctors and traditional enough to use the amulets and remedies that Lucian satirises in "Lover of Lies, or the Sceptic."

Imagine he lives on the far side of the agora from the acropolis. Imagine, further, that recently he has been much troubled with his digestion and that, although he has consulted with a doctor and used magical remedies, he has not recovered. Perhaps he has a dream which he interprets to mean he should supplicate the god Asklepios. Perhaps he decides on his own to make prayers and supplications. Consider how he feels about sickness, his possible fear and confusion: what is wrong with him? How can he explain it to himself? How has
it come about? Can it be cured? Or will it grow worse? Will it keep him from working, or result in his death?

Perhaps the dream helps make up his mind: he must visit the sanctuary of the god. Or perhaps he only thinks that it's worthwhile to approach the god, since nothing else has helped. He gets up one day and sets out to walk up to the sanctuary, perhaps in company with a friend or neighbour, and attended by his male slave, to sacrifice a cock to Asklepios and arrange to spend the night in the sanctuary as an incubant. How does he feel? Is he tired? In discomfort? Perhaps he contemplates the sanctuary itself, and his relationship with the god. Perhaps he has gone as a supplicant before. Perhaps he remembers festivals, prayers, sacrifices. Perhaps he thinks about the nature of gods, their power and unpredictability.

First he must walk across the agora. Let us suggest he lives near the Kerameikos. So he will walk up along the Panathenaic Way, passing the boundary stones of the agora, with the acropolis and the rock of the Areopagus always looming up ahead. It is the middle of the 2nd century CE, so the old agora is no longer quite so solidly the commercial heart of the city. Many shops are now to be found in the Roman agora instead, but the Classical agora is still fairly full of business: fishmongers, hawkers of dubiously edible foodstuffs, greengrocers, buskers, men selling meat from the public sacrifices and men selling live animals for sacrifice - roosters and pigeons in wicker cages; perhaps a few pigs or a handful of goats or sheep roped in a string for the big spenders - sellers of wheatcakes and flour and unmilled grain; the smell of urine and offal and rotten fruit and maybe worse things wafting from the Great Drain; a whiff of smoke and burning meat from a sacrifice at the Altar of the Twelve Gods, perhaps, or one from a private sacrifice at the Altar of Ares beside the
Panathenaic Way; a clamour from metalworkers with workshops in the lee of the Hephaisteion; an orator or a philosopher who has attracted a crowd or boys practising their rhetoric under the stoas; stonemasons working on repairs or new construction; dedicatory statues painted all sorts of colours; perhaps a funerary procession going by; or a Roman citizen of senatorial rank surrounded by clients and slaves clearing a path; or market officials going around inspecting permits; or a doctor disputing with a rival over who is best at vivisecting a live monkey.

So our Athenian citizen man - let's call him Alexandros - sends his slave to buy and carry the cock, and carries on up the Panathenaic Way to the acropolis proper, past the Stoa of Attalos and the Library of Pantainos (probably filled with students of the philosophical schools) and the fountain house and the road to the Roman agora. He goes up the Panathenaic Way under the shadow of the Propylaia, where smoke from the sacrificial altars drifts in the air with the smell of burning meat, and incense or myrrh. There might be yellow-flowered broom growing in the cracks of the acropolis rock, or white deadnettle or red poppy growing where the road joins a temple wall. Perhaps there is the odd olive tree or laurel or fragrant bay.

Alexandros does not go up to the top of the acropolis rock, where the temples of Athena are, and the shrine to Artemis (the Chalkotheke), and the Erechtheion, but he follows the path (the Peripatos) that leads around to the south side of the acropolis slope, under the walls of the temple of Athena Nike and the sanctuary of Artemis Brauronia, behind the top tiers of the fairly new Odeion of Herodes Atticus, past temples of Isis and Themis and a fountain house, with the top part of the Stoa of Eumenes on his right and the top tiers of the seating of the Theatre of Dionysos ahead, until he comes to the west end of
the sanctuary of Asklepios, on the far side of the acropolis from the agora. From here Alexandros can look south to the Piraeus, down past the remains of the Long Walls and see Aegina on a clear day, and beyond the straits of Salamis, and the coming and going of squat merchant ships and lean galleys of the Roman fleet from the harbour.

The Asklepieion is a small sanctuary. Its long axis runs west to east. The temple faces east, with the altar in front of it: built up against the acropolis rock is a stoa of the Doric order, now more than three centuries old, and backing against the Peripatos is the rear wall of a stoa of the Corinthian order, perhaps about a hundred years old now and only recently remodelled. The east end of the Doric stoa incorporates access to a well cut into the acropolis rock. There is a very modest monumental entrance, possibly including wooden elements, at the southwest corner.

Before, or just upon, entering the sanctuary of Asklepios, as with all sanctuaries, it is customary to have a ritual wash: to pour water over one’s head and shoulders as a gesture towards purification. There is neither fountain nor well by the entrance to the sanctuary. It would be exceptional were this not done here, so it is likely Alexandros would have found a pithos filled with water and a dipper with which to pour it out over his head.

Whether he (and his slave, who is still carrying the cock in a basket) washes here or not, whether he’s still sweaty-faced or whether he feels the breeze cold on his freshly-wet head and beard, he’s faced with the rear of the temple of Asklepios. We don’t know, at this remove, how it was decorated: whether there were wooden dedicatory *pinakes* or cloth banners or pleasantly-scented wreaths or wall-paintings or a wax board or piece of slate chalked with a list of days and times during which the *iereus* (who held the priesthood for life) or his
underling, the zakoros (who was required to be an Athenian citizen) would be present to oversee private sacrifices. Nor do we know where the inventory lists, which listed the dedications previously displayed inside the temple (but removed at intervals to make way for new ones), would have stood: perhaps under one of the stoas.

Alexandros goes either right or left around the temple, perhaps going in under one of the stoas to get out of direct sun. There are a handful of other people present, admiring the dedications or the votive statues (including one of Herodes Atticus and his daughter) or just hanging out having a conversation. Perhaps Alexandros knows one or two of them and joins in. Perhaps one of them is the zakoros, or the iereus, with a gathering of friends discussing regimen and dreams from the god. Perhaps Alexandros wanders around for a bit, admiring the dedications inside the temple, or perhaps he goes straight to the temple personnel to make his sacrifice and discuss incubating within the sanctuary.

Perhaps there are no sacrifice-overseeing personnel there, and he has to send his slave or bribe one of the sanctuary's slaves into running a message to them at home inquiring when they might actually be present, who knows?

So he makes his sacrifice - killing the cock over the altar while the priest makes a prayer - and makes his arrangements to incubate, discussing what kind of monetary offering he should give the god in order to have a chance of healing dreams. Does he make the arrangements for that night, or does he arrange to come back another day? If it's for that night, maybe he sends his slave home with the leftover sacrificial chicken for his wife and stays in the sanctuary until it is time for the purificatory ceremony. Maybe there is singing of praise to the god. Maybe he hears choirs performing in the Theatre of Dionysos or the
Odeion, or up at the Parthenon. Maybe he hears a minor procession go by. Maybe he smells incense or sweet flowers from ceremonies, or maybe the air is thick with the smell of offal and burned meat and someone vomiting from a purge prescribed by a doctor or by the god. Maybe he and a couple of other incubants wash in water from the sacred well and make offerings of wheatcakes and fruit and other appropriate things before the priest sends them to lie on a couch either inside the temple or somewhere within the sanctuary enclosure, presumably after dark. Perhaps he feels awe and reverence, terror and wonder: perhaps he fears, as much as desires, the encounter with the god.

Alexandros' somatic attention is on the possibility of relief from his ongoing complaint, and on the anticipated encounter with the god. The lights are doused, and the priest enjoins the incubants and their slaves to keep silent.

And then, presumably, they sleep.

They hope to receive in the night a dream-visitation from the god Asklepios, in which the god will provide a direct cure, an amelioration of the complaint, or a prescribed regimen to follow that will lead to a cure or an amelioration. When he wakes, if he feels the god visited him, Alexandros might discuss his dreams with the iereus or the zakoros; he might sacrifice again in thanks, or go home and follow a regimen that he believes the god communicated to him in the night. If his health improves, he might return to the sanctuary to fulfil a vow or to dedicate a votive offering. He might return if his health doesn't improve, to supplicate Asklepios again in the hope of a better outcome. He might die, if his health grows worse.

What does he feel about the whole process?
Research questions

That the past is a strange place is a truism to historians and archaeologists. Full of different and difficult to comprehend objects and practices, it is foreign to us; foreign in the way of all cultures into which we were not born and in which we have not lived. The foreignness of cultures distant from us in time instead of (or as well as) space is more difficult to approach. We cannot rely on friendly locals to help out the bemused tourist, for our locals are long dead and did not always leave very good records. We know that, like us, they were human; like us, they lived and loved, suffered and died. From the archaeological and literary evidence we can glean some of the hows and whys of their lives.

I set out to investigate health, experience, and religious healing in antiquity because illness is a perennial human concern. We have always lived - and struggled - with ailments and sicknesses, but understandings of and responses to sickness and suffering are culturally constituted: contingent and defined by context. There is also significant individual variation in how sickness is conceptualised and addressed: multiple conflicting ideations can exist side-by-side, making it fertile if complex ground for enquiry.

The major questions of this research project are as follows: What did the ancient Greek person experience when they sought religious healing at cult sanctuaries of Asklepios? How can we know about their experiences? What role did religious healing play in ancient Greek social and cultural understandings of illness, wellness, and the body? How can we understand the ancient Greek version of religious healing in the cult of Asklepios in comparison to other kinds
of religious healing? Are there any universal aspects to these sets of experiences that we can identify?

The answers to these questions are complex ones.

The investigation confines itself in time to the period between 420BCE, when the cult of Asklepios was imported into Attica from Epidauros (first to the Piraeus; shortly thereafter to the Athenian acropolis and the heartland of Athenian public cult) to approximately 200CE. Because of the nature of the available evidence, it is necessary to employ a diachronic approach: this timeframe encompasses the initial programmes of monumentalisation at the sanctuaries of Asklepios at Epidauros and Kos during the fourth century BCE as well as the monumentalisation of Pergamon during the reign of Hadrian in the second century CE, as well as permitting the project to take into consideration the only extant narrative from the perspective of a supplicant at Asklepieianic cult, the Hieroi Logoi or Sacred Tales of Aelius Aristides. The research project uses three sanctuary sites as primary "case studies": the major sanctuary of Asklepios at Epidauros, a site which possessed a panhellenic reputation, and the smaller, local sanctuaries of Asklepios in the cities of Athens and Corinth.

But it does not restrict its investigation to the archaeological evidence from these sites alone: in order to answer the questions posed above, it draws upon material from other sites where it may be used to illuminate a point; examines how the cult and figure of Asklepios, and the average person’s attitude towards sickness and healing, was portrayed in the literature of antiquity; employs epigraphic evidence to better understand the cult of Asklepios; draws on demographic studies and studies of disease both in the ancient world and more generally to establish a context in which sickness was experienced; and uses
contemporary anthropological studies of religious healing to investigate commonalities in religious healing experience.

**Previous Research in this area**

This investigation takes place in a space that has not been much interrogated to date. While anthropologists have conducted many studies on contemporary approaches to religious healing across the world, the social place and role of religious healing in antiquity has not been the subject of a full-length monograph. Individual archaeological sites, and individual structures within those sites - such as the famous theatre at the sanctuary of Epidauros --may be well-studied, and in recent years the figure of Aelius Aristides, a 2nd-century CE orator and devotee of Asklepios, has attracted more attention in conjunction with studies on the sanctuary of Asklepios at Pergamon. With limited exceptions such as Milena Melfi's 2010 article on performance and ritual in the Asklepieia of Roman Greece and her 2007 archaeological survey of sanctuary sites in Greece, however, recent work has not tended to bring together and investigate material relating to the cult of Asklepios from disparate locations and different periods and interrogate it from a social and experiential perspective. Neither has recent work been much concerned with interrogating the relationship between medical professionals (iatroì), their services, and religious healing in sanctuaries.

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The process of writing about health, sickness, and treatment in Graeco-Roman antiquity is filled with potential pitfalls. Until the last twenty years, the history of writing about sickness and treatment in antiquity focused almost exclusively on ancient medicine and the medical writings. Discussions of ancient Greek medicine frequently cast it as a precursor to Enlightenment-era "scientific" ways of approaching knowledge: as an explicitly rationalist, experimentalist discipline, operating in contrast to "superstition" and magico-religious modes of thought. E.R. Dodds argued in *The Greeks and the Irrational* for "early physicians who laid down the principles of a rational therapy in the face of age-old superstition," and Bruno Snell saw ancient Greek physicians as part of a search for "uniform principles" and "empirical sciences" - prevented from coming into "full flower" by the philosophy of Parmenides. Indeed, for Snell, the Greeks are not only the first rational empiricists but the fountainhead of all human rationalism: only in Greece, he says, was there "an autochthonous formation of scientific terms. All other languages are derivative; they have borrowed or translated or got their terms by some other devious route from the Greeks." Today we can recognise this perspective as a very Eurocentric reading of the history of science.

The histories of ancient inquiries into the natural world, of ancient Greek science and philosophy, focused - and to some degree still focus - on the idea of "discovery," on how the ancient Greeks "uncovered" or recognised the nature of the physical world, whose true operations had been obscured by mythology and superstition. Although in France thinkers such as Marcel Detienne and Jean-

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5 Snell, 1982, 227
Paul Vernant at the Centre Louis Gernet were destabilising traditional views of Greek rationalism in the early 1970s, these more complicated views of rationality in the ancient world have not completely subsumed the older, simpler perspective. Historians of medicine praised the ancient Greek medical writers for naturalistic explanations of disease processes, ruling out divine or supernatural interventions. Dodds and Snell may have been writing in the 1950s, but this paradigm still endures. R.J. Hankinson, for example, sees the development of Hippocratic medicine as a revolutionary change to a "new, rational paradigm;" and he discerns a largely "empirically based medical practice" among the Hippocratic writers - although he admits that the "avowed method of seeking causally relevant conjunctions of general facts is poorly prosecuted in practice, and in many cases it is unclear if the alleged phenomena upon which the theory is based could even have been observed."

This tendency to see reflections, or direct precursors, of modernity in Graeco-Roman antiquity is unsurprising given the influence that the idea of the classical past exerted on European thinkers during the so-called age of Enlightenment: the past is often the mirror of our own preconceptions, and history is often as much a reflection of the people who write it as it is of the people about whom it is written.

Recent histories of ancient inquiries into the natural world have moved away from relying solely on this paradigm. Histories of ancient medicine, spurred in large part by the work of G.E.R. Lloyd, have begun to stress continuities with older models of thinking about disease and the body, and to challenge the

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7 Hankinson, 2001, 64.
8 Hankinson, 2001, 54.
medical writers' understandings of anatomy and physiology. Lloyd sees Greek medicine and "science" as distinct from magico-religious practices,⁹ but he contests the idea of a great gap between two separate worldviews (scientific and magico-religious) and traces continuities between the Archaic and Classical periods.¹⁰ These historiographical developments have stressed the divine or religious elements in ancient medical writings, and drawn attention to the rhetorical strategies which medical writers used to distance themselves from other healers in a competitive "medical marketplace."¹¹ Indeed, as Brooke Holmes writes in *The Symptom and the Subject: The Emergence of the Physical Body in Ancient Greece,*

"[T]he medical writers, while lively polemicists, in many cases provided new justification for conventional wisdom. The constructed and 'fantastic' nature of what the medical writers believe about the body is particularly evident in their ideas about the female body, which dovetail neatly with long-held cultural stereotypes about female inferiority and women's childbearing function. Even when these writings describe things that look familiar... we are no longer confident we see the same things as they did. Seeing... is a highly motivated act that outstrips the


phenomenon in the desire to grasp and manipulate an underlying reality."^{12}

The history of writing about ancient Greek medicine - and thus, implicitly, about ancient Greek sickness and suffering - is one whose pedigree extends from the Renaissance on, and which has in the last several decades begun to incorporate the archaeology of disease as a field of study in its own right.^{13} But the history of writing about the cult of Asklepios only begins in earnest after the excavations of the Asklepieion at Epidauros, directed by Panaghiotis Kavvadas at the end of the 19th and beginning of the 20th century. Excavations at Epidauros would continue in one form or another for most of the 20th century, coming under the direction of V. Lambrinoudakis in the 1970s. The early excavation of Epidauros was joined, in the 1920s, by excavations carried out under the aegis of the American School of Classical Studies at Corinth, which included the site of the city Asklepieion (although the reports of that excavation would not be published until the 1950s); the excavation of the sanctuary of Asklepios on Kos under the direction of Italian teams in the late 1930s and 1940s, and the excavation of the Asklepieion at Pergamon, which was begun in the late 1920s as part of the greater project of excavations at Pergamon (begun in the 1870s, and still ongoing). Ludwig and Emma Edelstein's *Asclepius: Collection and Interpretation of the Testimonies* (1945) marks the first major attempt to present a coherent view of the healing cult of Asklepios in the wider Greek context, and it was soon followed by Karl Kerenyi's *Asclepius: Archetypal*
Image of the Physician's Existence (Der Göttliche Arzt. Studien über Asklepios und seine Kultstätte 1948). The Edelsteins' Testimonies include translations and discussions of the iamata, the so-called "miracle inscriptions" from Epidauros, but although these are commented upon and used by everyone with a point to make about healing cult in Greek antiquity, it is not until LiDonnici's The Epidaurian miracle inscriptions: text, translation, and commentary in 1995 (Scholar's Press, Atlanta GA) that they are studied in their own right as a literary composition with a social role. LiDonnici argues that they emerged from an oral corpus of tales that circulated in the sanctuary before they were committed to stone.

In 1969, long before LiDonnici's analysis of the miracle inscriptions, however, Alison Burford had translated and analysed the building inscriptions from Epidauros, adding immeasurably to our knowledge of the economic activity involved in sanctuary construction, and its relationship to Epidauros town. In 1989 and 1991, the inventory lists from the Athenian Asklepieion were translated and published by Sara B. Aleshire. Aleshire's work contributed to our knowledge of the Athenian Asklepieion, which had been excavated as part of the ongoing excavations on the acropolis. The best outline of the archaeological evidence from the Athenian Asklepieion may be found in Sara B. Aleshire's The Athenian Asklepieion: The People, Their Dedications, and The Inventories and in John Travlos's Pictorial Dictionary of Ancient

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14 Burford, Alison, 1969, The Greek temple builders at Epidauros : a social and economic study of building in the Asklepieion sanctuary, during the fourth and early third centuries B.C., Liverpool University Press, Liverpool
16 Aleshire, 1989, 7-35.
Athens, with further context for the South Slope of the acropolis in the neighbourhood of the Asklepieion in Susan Walker's 1979 article, "A Sanctuary of Isis on the South Slope of the Athenian Acropolis." Aleshire's work allows us to view the inventory lists as objects and to reconstruct in part the interior and some idea of the workings of the sanctuary. The links between the kinds of votives recorded here and the kinds of illnesses discussed in the medical texts, and their relationship with any given individual's experience of the sanctuary, have not yet, however, been treated of in any great detail.

The Edelsteins included excerpts from Aelius Aristides' *Hieroi Logoi* in the *Testimonies*, but despite C.A. Behr's English translation of the *Hieroi Logoi* in 1968, throughout the 20th century, Aristides tended to be no one's favourite literary figure. The difficulties of Aristides' language may have played some part in this. But the last ten years have seen his profile rise: Alexia Petsalis-Diomidis in *Truly Beyond Wonders: Aelius Aristides and the Cult of Asklepios* has interrogated Aelius Aristides and his writings and their relation to the sanctuary at Pergamon with particular reference to healing pilgrimage and representations of the body, and Ido Israelowich, in his *Society, Medicine and Religion in the Sacred Tales of Aelius Aristides*, has explored both the medical and religious dimensions to Aristides' best-known writings. The collected volume *Aelius Aristides Between Greece Rome and the Gods* (edited by W.V. Harris and Brooke Holmes) discusses Aristides in terms of several perspectives, of which the most important from the point of view of this research project is his self-presentation as it relates to the cult of Asklepios and religious healing.

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Concurrent with an increase in Aristides' profile have come some detailed examinations of the Asklepieion at Pergamon and its social and cultural position within the city, as we see in two chapters from Helmut Koester's *Pergamon: Citadel of the Gods* (Trinity Press International, Harrisburg PA, 1998), "The Roman Remodelling of the Asklepieion" by Adolf Hoffman, and "Aelius Aristides and the Asklepieion," by Christopher Jones.

Petsalis-Diomidis is not concerned with Aelius Aristides alone, but with the representations of iconography related to Asklepieian cult in 2nd-century CE Asia Minor and Pergamon, with representations of the body and discourses of travel and the body; with paradoxography, and the display and commemoration of marvels within the space of the sanctuary. Her investigation of bodily discourses and ways of seeing and knowing lays the groundwork for an interrogation of practice and movement within sanctuary spaces.

Examining ways of seeing and knowing, and ways of being - *Dasein*, in Heidegger's formulation, "being-there" - is fundamental to the investigation of experience: in this regard one cannot ignore the relationship between *being* and *perceiving*, fleshed out in Maurice Merleau-Ponty's magisterial *The Phenomenology of Perception*. Thus the present research project draws on Merleau-Ponty's approach to phenomenology to examine how we may conceive of perception and experience, of lifeworlds and bodies, with regard to people in other times and places.

To complement Merleau-Ponty's consciousness-centred approach, this study employs the work on practice and embodiment undertaken by Pierre Bourdieu and Michel De Certeau to investigate how the ancient Greeks understood and experienced their practice and practices; and the social and spatial analyses of
Yu-Fu Tuan and other theoretical geographers and anthropologists of space and place to illuminate the spatial dimension of experience.

No full-length study has considered religious healing in antiquity from the point of view of phenomenology and experience to date, nor drawn on the resources for comparison afforded by modern anthropological studies to investigate religious healing practices in the ancient Greek world. What comparative approaches for the healing cults of antiquity exist treat of it chiefly in terms of Christianity and not in terms of a broad spectrum of approaches to divine healing. Part of this research project sets out to address this lack, in order to provide a better picture by which we might understand the experiences and lifeworlds of those ancient Greek people who entered Asklepieia in search of healing from the god.

Modern anthropological studies are a vital resource when looking at the social and cultural aspects of the ancient Greek world in a comparative fashion. It was Marcel Detienne and Jean-Paul Vernant who began to apply anthropological approaches to ancient Greece in a systematic fashion, although the "anthropological urge" had been present in work on and writings about Greece from an early date. I say "anthropological urge" because from its inception anthropology has been a discipline of comparison; it was, as Detienne says, "born comparative,"^20 and whenever historians and archaeologists analogue or attempt to draw some universal conclusion by comparison, they are engaged in a form of anthropology.

Anthropology as a discipline only gained force in the latter part of the 19th century, and until well into the 20th century the central questions it set itself to ask concerned kinship rules, systems of social organisation, symbols and forms

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of representation. Systems of social organisation, social responses to phenomena, and symbols, forms, and myths - whether myths in the traditional sense or in the sense of commonly understood ideas concerning how things (should) work in a particular context - are still among the primary concerns of the discipline of anthropology; but like any mature discipline, anthropology incorporates a wide variety of perspectives on how it should structure its questions and collect its data. For most of its history as a discipline, most anthropologists have been outsiders to the societies whose conduct, patterns and beliefs, they choose to study; even those anthropologists who enter closely into the societies and rituals they study, who become "participant observers," are not native to those societies, and do not, therefore, have the same experience as a person brought up within the societies. There are some cases where the anthropologist comes from within the culture they are studying, but in most cases the cultural anthropologist is as much interpreter as rapporteur - and interpretation, like translation from one language to another, is a culturally contingent act.

Pierre Bourdieu emerged from the anthropological tradition in France. He developed the concept of habitus - a system of structuring dispositions that condition the lifeworlds of members of a society - out of his work in the Maghreb in the 1950s and 1960s. Habitus is a concept with great relevance for the study of experience.

While the study of the forms and structures of religious ("ritual") healing had had a place in cultural anthropology from early on, it was not until the 1970s that cultural anthropologists began to turn their gaze in any numbers on the "Western" societies from which they usually sprang, and observe those societies' own forms and structures in the same way as they observed the forms and
structures of so-called "less developed" societies. Anthropology as a discipline began to diversify its focuses, and in the later 1970s and early 1980s, in a development pioneered by physician Arthur Kleinman and rapidly taken up by anthropologists like Byron and Mary Goode, it began to examine the social and cultural world of modern "Western" medicine and its relationship to other ways of treating health and sickness across the world. "Medical anthropology" now forms its own subdiscipline within cultural anthropology, and one that has strong links to the study of religious forms of healing.

The tools of anthropology permit us to move towards understanding practices and lifeworlds of cultural contexts different from our own on their own terms. Instead of judging different systems of health and healing in terms of how closely - or not - they approximate modern biomedicine's determinedly rationalist empiricism, with its focus on seeing, proving, and curing and its soteriological overtones, we can investigate different systems of health and healing within their own contexts. When I am injured or have a sickness, I go to the doctor and trust the doctor to name the problem and provide appropriate treatment - but some things, such as menstrual cramp, that make me feel ill are not sicknesses as my cultural context or modern biomedicine defines them, and people who suffer from chronic pain often have no disease or ailment that a doctor can identify but are nonetheless suffering.

What is understood by sickness and what is understood by cure or healing is culturally contingent. The Catholic Charismatics of New England studied by Thomas Csordas seek to heal body, mind, and spirit; traditional Navajo healers link healing to explaining to their patients the mythical underpinnings of the

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21 Which we shall henceforth refer to as "biomedicine" or "modern biomedicine" to distinguish it from other medical practices.
traditional Navajo world and the patients' places in it; whereas for the Yolmo people of Nepal, lost parts of the soul or self must be returned to the body in order for health to be regained. In addition to utilising anthropological perspectives on religious healing to approach the practices and understandings of Greeks in the ancient world who went as supplicants to the sanctuaries of Asklepios, forms of religious healing studied by anthropologists can be used as comparanda. What is understood by sickness among the ancient Greeks? How is it constructed? What is healing, or cure?

**A note on case studies and the case of Aelius Aristides**

This thesis discusses primarily the evidence from three sanctuaries of Asklepios: at Epidauros, Corinth, and Athens. Material from other sites is employed where it can provide further context, illuminate a point, or where it points out areas of complication, but as this thesis is not intended to be -- and indeed, cannot be -- a comprehensive treatment of healing and experience in the cult of Asklepios, not every site is treated with the same degree of thoroughness. In part for this reason, and in part because of the difficulty of interpreting the archaeological remains in the central area of the sanctuary, and accounting for change over time in the structures there, the Asklepieion at Pergamon is not one of the primary case studies. The difficulties of attempting to reconstruct the sanctuary as it was visible in use at specific periods during its history are substantially more pronounced than they are for Epidauros, Corinth, and Athens. While difficulty is not necessarily a bar to discussing the Asklepieion at Pergamon in terms of experience, this preliminary sketch towards a model for examining experience and religious healing in antiquity has
chosen to focus on sites where fewer caveats are needed when discussing the structures and layout of the sanctuary itself. The Asklepieion at Kos is also not treated of in detail.

A further explanation is needed for the use this thesis makes of the writings of Aelius Aristides. Aristides' *Hieroi Logoi* is the only literary text from antiquity that recounts its author's personal experiences with religious healing in the cult of Asklepios. One might expect, therefore, that the *Hieroi Logoi* would form a central pillar of any discussion of experience and healing in the cult of Asklepios. I have chosen, instead, to make more judicious and limited use of it as a source. The very singularity of the *Hieroi Logoi* poses its own set of dangers: Aristides gives us a specific, individual response to Asklepieian cult. He sees himself as a devotee of Asklepios, and he is a man who writes to attest to the glory and power of the god. The *Hieroi Logoi*'s survival tempts us to generalise from this very particular case, but we have no way of knowing how singular, or conversely how widespread, Aristides' view of the god, and his relationship with the god as a supplicant, were. In a thesis that sets out to investigate experience and religious healing in the cult of Asklepios from as wide as possible a lens, focusing too closely on the figure of Aelius Aristides risks distorting our view and seeing the cult of Asklepios through the lens of a man who had a "passionate desire to justify the ways of Asclepius by showing that the god really had provided help for his devotee."\(^{22}\)

Overview of Chapters

This thesis has five chapters. Chapter One, "Life, Health, Sickness, and Survival," examines life expectancy, demography, and the kinds of diseases common in the ancient world, as well as the concept of "health" in the ancient world, the various options for health care available to the average person, our evidence for them, and the social roles of medical practitioners. Chapter Two, "Theories and Methodologies," provides an overview of the theoretical frameworks which underpin the investigation of experience in antiquity. Chapter Three, "A Panhellenic Asklepieion," outlines the archaeological and epigraphic evidence from the Asklepieion at Epidaurus, and discusses it in light of those theoretical frameworks. Chapter Four, "Two Local Asklepieia," performs the same office for archaeological and epigraphic evidence from the Asklepieia at Athens and Corinth. These sites shall stand as our case studies for this investigation of religious healing in the ancient world, although we will also be drawing on material from Pergamon to illuminate our evidence. Chapter Five, "Comparing Religious Healing Across Cultures," examines the healing cult of the saints in medieval Europe as well as several modern anthropological studies of religious healing and investigates how they may be compared to the ancient evidence and what conclusions may be drawn.
Chapter One: Health, Sickness, and Survival

When he has seen a vision, he will go to the interpreters of dreams, the seers, the augurs, to ask them to what god or goddess he ought to pray. Every month he will repair to the priests of the Orphic Mysteries, to partake in their rites, accompanied by his wife, or (if she is too busy) by his children and their nurse. He would seem, too, to be of those who are scrupulous in sprinkling themselves with seawater; and, if ever he observes anyone feasting on the garlic at the cross-roads, he will go away, pour water over his head, and, summoning the priestesses, bid them carry a squill or a puppy around him for purification. And, if he sees a maniac or an epileptic man, he will shudder and spit into his bosom.

The ancient world was a place full of peril. Outside of the elite, people lived with the constant presence of grinding poverty. Even for those of the middling sort - craftspeople and smallholding farmers - a bad year or the death of a family member could still spell disaster. Any small misfortune could materially affect a person's status and/or wellbeing. Even the approximately 5% of the population who were insulated from the threat of poverty by inherited wealth and property were still subject to other dangers, such as war and disease. Theophrastus's "Superstitious Man" seems laughable to us now - and seemed laughably overearnest in his propitiations even in the 4th century BCE, a cliché taken to extremes - but in a world filled with gods and daimons, any of whom could visit misfortune on a person if they were slighted, superstitious behaviour was not a silly habit, but rather a strategy for survival.

Even if "The Superstitious Man" could carry it to excess.

Suffering is a part of everyday life, and part of working life especially. The linguistic connection between work and pain endures in English: one "takes pains"; one "labours," with its implication of weariness and pain. Greek not only includes similar painful implications in its verbs of working, it connects work with sickness in the verb κακοποιεῖναι, which has a range of meanings: not only to work - and to work hard - but also to be weary, to be sick, to be suffering and to be distressed.

The world of antiquity had different expectations concerning life, health, and comfort than we do today. This chapter discusses some of those expectations, in terms of demography - birth, death, and life-expectancy - before discussing a selection of ailments and illnesses which were relatively common in the ancient world, and examining the social context in which they occurred: the social context in which religious healing at the sanctuaries of Asklepios took place.
Expectations of mortality

What did people think of their lives, their expectations for living and dying, giving birth and burying members of their immediate circle? Some demographic data exists from Graeco-Roman Egypt which will be discussed shortly, but that data is regional and does not, in any case, tell us anything about people's own ideas of their prospects.

Some idea of people's expectations with regard to birth, death and sickness may be gained from the "Oracles of Astrampsychus," a popular 2nd-century CE oracle text, which is comprised of a list of ninety-two questions that could be put to the god through an intermediary. Each question had ten possible answers. Questions 30, 42, and 64 are particularly illuminating from the point of view of health and mortality, and so is 59.23

Q30 asks, "Will I rear the baby?" The answers are three for survival, three for survival with work, two for death, one for "not reared" (exposed), and one for thriving. This maps well onto the 30% infant mortality rate which demographers and historians accept as a figure for the ancient world.24

Q42 asks, "Will I survive the sickness?" The answers are five for recovery, two for recovery "in time," and three for death.

Q64 asks, "Will I see a death?" The answers are six for yes, one for two deaths, and three for no.

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Q59 asks, "Will my wife miscarry?" The answers are three for miscarriage with danger to the life of the pregnant woman, one for miscarriage with danger ultimately survived, five for no miscarriage, and one ambiguous for the present pregnancy but positive for a future one.

From this, we may garner some idea of the odds that the average person in the ancient world expected to face. They would expect to see three out of ten infants die, one of them exposed perhaps because it was deformed or not the right gender. If a person was well enough to ask Will I survive? on their own behalf, they had a 20% chance of a lengthy illness (perhaps lasting years, if we take a long view of "in time"), but on average they still would expect their illness to prove fatal 30% of the time.

Q64, "Will I see a death?" is not a question asked by people who are themselves ill, but by those who expect, hope, or fear that someone around them will die in the near future. Illness is the most likely spur to this question. The prevalence of mortality is reflected, however, in the fact that on average seven out of ten people would expect to see an affirmative answer.

Oracle texts are not necessarily an accurate guide to individual experience, but if they did not broadly reflect the averages of experience, they would fall out of favour. Thus these questions from the "Oracles of Astrampsychus" can serve as a yardstick for ancient expectations in the field of illness: sick people die a lot. Infants die a lot. Women who are pregnant miscarry and are in danger of death, a lot.

People die a lot, period.

In this context, Theophrastus' Superstitious Man is making a rational decision to minimise his risk exposure, by taking every precaution to ward off pollution and the malign attentions of gods and daimons. That the Superstitious
Man is a caricature, and that very few people ever went to such lengths, is clear from the context of Theophrastus' *Characters*, but he is an exaggeration of a type. Most people would be satisfied with lesser precautions, or with addressing problems after they have arisen.

Illness and injury are problems which, in general, needed to be addressed after they had arisen. Leaving aside childbirth and violence, one finds illness and accidents to be major causes of mortality, and illness is the greatest of these.

Today, when we think of illness, we tend to think of acute illness rather than the chronic kind. Modern biomedicine is, at some level, optimistic in its outlook: it sees the cure as an achievable goal. We take our illnesses to the general practitioner or the hospital expecting to be rid of them within a relatively short span, and are disappointed if this does not happen. Unless we are one of the unlucky sufferers of chronic conditions who have been disabused of our optimism through hard experience, that is.

This is very different to the pattern which obtains for most of history. Much illness was chronic. We can see this reflected in antiquity in the fact that certain of the ancient medical writers, such as Aretaeus of Cappadocia, divide their writings roughly evenly between "Acute" and "Chronic" illnesses. Treating illness was directed less towards a complete cure (although this was, naturally, desirable) than towards managing the illness: towards living and working with as little suffering as possible rather than living without suffering at all. We must also acknowledge that in the absence of modern antibiotics, ancient medical practitioners had a limited array of efficacious treatments at their disposal: the treatments they did use, to the eyes of modern biomedicine, seem at least part

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25 This is a fact which proves rather frustrating to many people living with chronic conditions, particularly in the case of chronic pain or chronic fatigue.
poison - a "combination of superstition, trial-and-error, inadvertent torture, and just plain dumb luck,"\(^\text{26}\) although this may well underestimate the usefulness of a number of the ancient physician's techniques.

The role and image of the iatros, the ancient physician, will be discussed in more detail later, but their most important skill was not diagnosis, but prognosis. The physician made his reputation and his living (and it is always, in the medical writings and literature of antiquity, very definitely his) by knowing whether his patient would die or survive in advance of the fact. "For in this way you will justly win respect and be an able physician. For the longer time you plan to meet each emergency, the greater your power to save those who have a chance of recovery, while you will be blameless if you learn and declare beforehand those who will die and those who will get better."\(^\text{27}\)

Knowing what the illness was mattered far less than knowing the odds of survival. Indeed, ancient physicians tended to group illnesses by their symptoms rather than by their underlying causes, since for the most part the aetiology was not understood\(^\text{28}\) - although sometimes it was theorised about. In cases where symptomatic treatment is the only treatment possible, the emphasis on prognosis makes sense, from a physician's point of view: the ability to manage, or at least to anticipate, the course of the illness is vital.

Many patients would die. The average life expectancy in the ancient world was not high: certainly nowhere near as high as it is in the modern developed world, where we may, if we're reasonably healthy, expect to see out our three-score-and-ten and then some. We do not have solid figures for life expectancy in


\(^{27}\) Hippocrates, Prognostic, I.

\(^{28}\) At least not in ways which modern biomedicine would recognise.
the ancient world, but we do for some periods of history where similar conditions, in terms of agricultural labour and access to effective medicine, obtained. The average life expectancy at birth in parts of 18th-century France and 19th-century Spain was less than 30 years of age.29

It seems likely that similar figures applied to the ancient Mediterranean. J. Lawrence Angel, in his work on longevity in ancient Greece, calculated average life-expectancy at the age of fifteen to be 45 years for men and 36.2 for women in the Classical period. By the second century CE, adult life expectancy has declined to 40.2 for men and 34.6 for women.30 He calculates for the Classical period an average of 4 births per woman, with 3 surviving; for the Hellenistic period, 3.6 births with 1.6 surviving, and for the Roman period, 3.3 births with 1.6 surviving.31 While there are problems with Angel's sample size, and while average life expectancy tells us nothing about maximum life expectancy,32 we may take this as indicative of what an ancient person may expect from life and mortality. People who lived to their late teens could expect about another two decades of life for women, three for men, on average.

Our best demographic evidence comes not from ancient Greece, but from Roman Egypt, where census returns from the first three centuries CE have survived on papyrus. These are discussed by Roger Bagnall and Bruce Frier in their 1994 book on The demography of Roman Egypt.33 While there are problems with using evidence from Egypt to throw light on the Greek mainland,

29 Scheidel, 2006, 2  
31 Angel, 1972, table 28.  
32 Men of property who manage to avoid the dying in war may, for example, live to a good old age: Pericles was about sixty when he called himself "still more or less in the vigor of life" (Thuc. II.36.3). Nikias was himself in his sixties when he implied that the thirty-something Alcibiades was "too young to command" (Thuc. VI.12.2.)  
islands, and Asia Minor (not least among them Egypt's Nile-based agriculture, its status as a place where at least three distinct communities - Roman, Greek, and indigenous Egyptian - argued for using their own systems of law, and the uneven preservation even of the papyrii census returns that we do have), we may use this evidence to give some idea of the potential spread of ages among a Greek community.

The first thing we notice is that the majority of people are under 34. There is still a strong presence of people of both sexes up until their mid-50s, but there are approximately one-third fewer persons alive in their forties than in their thirties. There are approximately 50% fewer persons alive in their sixties than in their fifties. Perhaps as few as one-fifth of all persons alive in their teens survived into their sixties, although the mortality drop-off between persons in their sixties and persons in their seventies, according to the numbers available, is much less pronounced than that between the fifties and the sixties. The number of surviving septuagenarians, as a proportion of the population, appears to have been tiny, particularly septuagenarians in the latter half of that decade of their life. Octogenarians are vanishingly rare: the Egyptian census returns bear witness to only one incidence among nearly 700 individuals. These figures are consistent with an average life expectancy at birth of 25 years. Here we must add that perhaps as few as half of all persons born survived to reproduce. The high mortality visible here and in the osteoarchaeological record requires an equality high fertility rate. Says Schneidel, "mean life expectancy at birth of 25 years compels – on average – every woman surviving to menopause to give birth to approximately five children to maintain existing

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34 Scheidel, 2006, 3 (http://www.princeton.edu/~pswpc/pdfs/scheidel/040604.pdf)
The estimate Bruce Frier gives as to the fertility of continuously-married women in Roman Egypt who live to menopause is an average of 8.4 live births. Our evidence from the Roman world - which is slightly more extensive than it is for the Greek - indicates that few adults would have had both a living grandparent and a child at the same time: only around 45% of adult males would have even had a father living when their child was born. Very few children would know a grandparent as an adult. By the age of 40, only perhaps 10% of adult males would still have a living father. For men in the Roman world who died between the ages of 40 and 49, for example, Richard Saller has calculated from commemorative evidence that only 20% were survived by a parent, either father or mother. While we have very little evidence for comparative mortality rates between urban and rural settlements in antiquity, evidence from the early modern period in Europe suggests that urban mortality (and wetlands mortality) was significantly higher than the regular run of rural mortality, often running a deficit of births over deaths. The causes of urban mortality - among which we may number the greater concentration of waste, the greater number of travellers to bring new variants of old diseases, and the easier transmission of pathogens in crowded quarters - have not changed so much over the course of history that we should believe

37 Using model life tables for an average life expectancy of 25, Richard P. Saller (Patriarchy, property and death in the Roman family, Cambridge University Press, Cambridge, 1994) indicates that 73% of women would have a living child by the age of 25, whereas only 12% would have a living grandparent (Table 3.1b). Men were entirely unlikely to have a child by the age of 25, but by the age of 35, 77% would have a living child, while only 2% would have a living grandparent (table 3.1e).
urban areas in antiquity were that much healthier than their Early Modern counterparts.

These figures reveal a world of mortality and living expectations radically different from our developed-world's longevity and access to safe, reliable methods of family planning: one whose implications we must keep at the forefront of our consciousness when we discuss health and sickness in the ancient world.

*The effects of nutrition and deficiency diseases*

Nutrition plays a vital role in sickness and in health outcomes. According to Peter Garnsey, to date "accounts of the diet and health of ancient classical societies have generally been unrealistically favourable."\(^4\) Evidence from the skeletal remains indicates that stature was generally short compared to persons living in the same regions today: modern people living in Greece and Italy average 5ft 10in for men, and 5ft 6in for women, as opposed to 5ft 5.5-6.5in for men and 5ft 1in for women in Pompeii and Herculaneum, for example. Height is generally accepted as an indicator of childhood nutrition.

While food crises did not often rise to famine levels, many of the ancient world's inhabitants, particularly the urban ones, were subject to a high degree of food insecurity. In terms of severe life-threatening deficiencies, according to Garnsey, marasmus, the dry wasting of brutally inadequate food-energy consumption,\(^42\) is likely to have been less widespread than kwashiorkor,


\(^42\) Marasmus is emaciation, resulting in extensive tissue and muscle wasting, variable oedema.
extreme protein deficiency. But mineral malabsorption is likely to have been widespread, particularly in poorer communities. These communities would most likely have consumed a higher proportion of phytic acid, commonly found in high proportions in wheat bran, flaxseed, nuts and beans. Phytic acid forms ionic bonds with certain nutritionally important minerals, binding to important minerals like zinc and iron, and to a lesser extent calcium and magnesium, and making them unable to be absorbed in the body, contributing to deficiencies. It also binds niacin, extreme deficiency of which leads to pellagra.

In situations of food crisis or long-term food insecurity, in addition to suffering deficiencies, people would have eaten bread contaminated with darnel, or relied upon vetch (lathyrus sativus, normally grown as a fodder crop), which have their own adverse health effects. Darnel seed commonly plays host to the ergot fungus, while the consumption of large amounts of lathyrus sativus results in lathyrism, a wasting disease which results in paralysis, due to the neurotoxin present in the sativus plant.

A significant proportion of our evidence for the specifics of agricultural production comes from Egypt, where a handful of papyrus archives dealing with production on large estates survive from the third century and later. One of the largest of those archives, the Heroninos archive, dates from the third century

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43 Kwashiorkor is marked by oedema of the hands and feet, irritability, anorexia, rash, hair discoloration, and a large fatty liver. In pronounced form it involves swelling of the belly.
44 Dendougui, Ferial and Schwedt, Georg, 2004, "In vitro analysis of binding capacities of calcium to phytic acid in different food samples," European Food Research and Technology 219 (4), 409-415.
45 Thus contributing to the prevalence of rickets.
47 Ergot poisoning (ergotism) produces several symptoms, which include: painful seizures, diarrhoea, paresthesia, itching, mental effects including mania or psychosis, headaches, nausea, vomiting, dry gangrene of the extremities.
48 Garnsey, P., 1999, 38. See also Galen Commentary on Epidemics II
and relates to the estate of a man called Appianus. Although this is from a later date than the focus of our research, agriculture is a conservative activity, and we may reasonably suppose that the same sorts of crops were produced during the period of our research, if not necessarily in the same proportions. We also know that, allowing for climate and region, similar crops were produced elsewhere in the Graeco-Roman world during the period with which this project concerns itself.

In addition to vineyards, which produced wine as a cash crop, the Appianus estate produced wheat. Wheat was used to pay tax in kind, for sale, and as payment to permanent employees of the estate, who generally received an opsonion in unmilled wheat and sometimes vegetable oil. Barley is also attested, while the production of lentils, beans, chickling, vetch, and vegetable oil is either attested or implied, while melons, turnips, garlic, endives, capers and clover are mentioned. Olives appear to have represented a significant crop, while dates, figs and jujubes were produced from trees scattered around the holding. Cattle, oxen, and asses, as well as pigs, were raised on the estate.

The diet of the average worker would not be particularly varied, and would be subject to variation in quantity and quality - food insecurity - depending on the

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49 The archive contains over 1000 documents. Parts of the archive are held in over 20 different collections, and many texts are still unpublished. See the Trismegistos Texts Archives page on the Heroninos archive: http://www.trismegistos.org/archive/103.


harvest. The agricultural worker, however, was probably better off in terms of food security in bad years than the urban labourer or tradesman.\textsuperscript{53}

In addition to the adverse health outcomes associated with food crisis, however, there are a number of diseases associated with nutrition deficiencies which would not have been recognised as such due to lack of understanding. These diseases would have cut across social classes, and include bladder-stone, especially in children, certain eye diseases, pellagra, and rickets.

Bladder-stone, also known as strangury or calculi, has been common throughout history. While today in the developed world more common in adult men, the risk of suffering from idiopathic bladder stone is increased in childhood by a diet lacking in protein and by dehydration; and overall the risk is increased by vitamin A and/or vitamin B deficiency. The incidence of idiopathic bladder stone in children can be directly correlated to regional socioeconomic status and malnutrition in the modern world.\textsuperscript{54} In antiquity, it is noted by Aretaeus of Cappadocia (\textit{Chronic Diseases II.3}), by Celsus (\textit{On Medicine VII.26}, in which he discusses obstructions of the urethra and the operation of cutting for the stone - lithotomy, which the text of Hippocratic \textit{Oath} forbids), and returned to several times by the elder Pliny (e.g. \textit{Natural History} 25.7.23, 30.21.65). Its prevalence is attested by numerous mentions in the Hippocratic writings. It is treated of in \textit{Airs Waters Places} 9, where the author acknowledges that it affects boys more frequently than girls; \textit{Prognostic} 19 treats of urinary obstruction; it is mentioned in \textit{Aphorisms} (3.26 and 4.74), \textit{Epidemics VI} 3.7, \textit{Nature of Women} 101, and possibly in \textit{Epidemics II} 3.12, \textit{Humours} 12, \textit{Nature
of Man 14, and Coan Prenotions 30. A detailed description of the symptoms in children is given in Diseases IV 24. It is clear that cases of bladder stone were widespread and its symptoms well-recognised. Treatment, however, was a different matter, especially since the Hippocratic Oath forbade the dangerous operation of cutting for the stone.

Eye diseases were a common affliction in antiquity. Celsus devotes an entire section of On Medicine Book VI to eye diseases and their remedies. The numerous votive offerings of model eyes at the sanctuaries of Asklepios, as attested from the archaeological record and from the inventory lists at Athens (discussed in more detail later), also speak to the ancient world's concern with eyes in a healing and/or medical context.

Several kinds of eye ailment are associated with vitamin A deficiency, which is caused by under-consumption of leafy greens, carrots, and fish oils and/or animal products like milk, eggs, liver, and kidney. These ailments include night blindness as well as xerophthalmia and keratomalacia, either of which can lead to complete blindness. Xerophthalmia, dryness of the eyes, is a condition wherein the eye stops producing tears. The conjunctiva becomes dry, thick, and wrinkled. If inadequately treated, it leads to corneal ulceration and eventually blindness from corneal damage. Keratomalacia occurs when lack of vitamin A leads to changes in the epithelium of the eye. It becomes keratinised and scaly. The substantia propria, or the stroma of the cornea, a layer of the eye which is normally completely transparent, breaks down and liquefies. The end result is an opaque cornea, which means the eye is blind. Keratomalacia remains a leading cause of blindness around the world today. Ancient medical writers devoted a significant amount of space to describing symptoms and suggesting
treatments. Most are useless, but one, ingesting liver, remains among the recommended prescriptions from the Hippocratics onwards. Rickets is another very common deficiency disease. Caused by deficiency or inadequate metabolism of vitamin D and/or calcium, its symptoms include dental problems, muscle weakness, increased risk of fractures, softness of the skull, and skeletal deformity including cranial, pelvic, and spinal deformities. In toddlers, bowed legs are a symptom, and in older children it presents as knock-knees, a condition where the knees angle in and touch each other when the legs are straightened. In adults, this deficiency disease is known as osteomalacia and has less severe results than in childhood, but the results include pains, muscle weakness, and fragility of the bones. While rickets/osteomalacia was not recognised as a disease per se in antiquity, its presence is attested. Soranus, in the *Gynecology* (2.43-2.44), does not recognise rickets as a disease but describes its effects:

"When the infant attempts to sit and to stand, one should help it in its movements. For if it is eager to sit up too early and for too long a period it usually becomes hunchbacked (the spine bending because the little body has as yet no strength). If, moreover, it is too prone to stand up and desirous of walking, the legs may become distorted in the region of the thighs.

"This is observed to happen particularly in Rome...[I]f nobody looks after the movements of the infant the limbs of the majority become distorted, as the whole weight of the body rests on the legs, while the ground is solid and
hard, being paved in most cases with stones. And whenever the ground upon which the child walks is rigid, the imposed weight heavy, and that which carries it tender - then of necessity the bones give in a little, since the bones have not yet become strong." [Trans. Owsei Temkin, Johns Hopkins University Press, 1991.]

Soranus was a Greek from Ephesus who studied in Alexandria and practised as a physician in Rome under the emperors Trajan and Hadrian. He died in the mid-second century CE. Almost twenty works on various different aspects of medicine, including one on the nature of the soul, are ascribed to him by the Suda, only some of which survive. His clients are likely to have been found predominantly among the Roman upper class, which gives us persuasive evidence for the presence of rickets among the wealthy, as well as among the poor. Says Garnsey,

"But rickets arising out of dietary deficiencies, along with a number of other disorders including iron-deficiency anaemia, hepatosplenomegaly (enlargement of the liver and the spleen), hypogonadism (impaired function of the sexual organs), dwarfism and geophagism or pica (consumption of earth and other non-food items) is more likely to have developed among people who ate little apart from cereals, and those cereals composed of high-extraction phytate-rich flour which inhibited the absorption of key minerals. This kind of consumer would
Examples of diseases in the ancient world: Fever, kausos

The illness *par excellence* of the ancient world is fever, or *kausos*. In the period with which this project concerns itself, fever was understood not as a symptom, but as a disease (*nosos*) in its own right. According to Celsus (3.3.1), fevers "affect the whole body and are extremely common." The types of fevers were divided based on their periodicity: some fevers are continuous, where the raised temperature does not fluctuate noticeably in a 24-hour period; some are remittent, where the temperature remains above normal but fluctuates in a 24-hour period; and some are periodic, with the temperature elevated for a period of time but returning to normal in a cyclical pattern.

The periodic fevers may be divided into types depending on the interval of their periodicity: quotidian, which has a 24-hour periodicity (the fever remits every second day); tertian, which has a 48-hour periodicity (the fever remits every third day); and quartan, which has a 72-hour periodicity (the fever remits on the fourth day). Periodicity is typical of malarial fevers: in fact, the different kinds of malarial protozoa are today known to correspond to different

periodicities of fever.\textsuperscript{56} Periodicity is also characteristic of the fever associated with leishmaniasis (kala-azar or black fever, which is transmitted by sandflies).

The inhabitants of ancient Greece encountered all of the above types of fevers: continuous, remittent, and periodic. (Celsus 3.3.1-6.) Fevers were among the most common of the ailments complained of by people in antiquity. The medical writings speak of them at length, and a good proportion of the cases described in the Hippocratic \textit{Epidemics} chart the progress of fevers. Ancient medical writers generally agreed that in order to "cure" fevers one had to make the correct interventions on certain "critical days" over the course of the fever - although naturally there was a significant amount of disagreement on what those critical days were and what interventions would produce the best result.

As an ailment, fever is both dangerous - without effective anti-pyretic drugs, high fevers can easily result in brain damage and death - and expensive in terms of the resources of care: a feverish patient may become very weak, so that a household may lose the labour of not just one member but find the labour-resources of a second member somewhat taken-up in caring for the invalid. And fever, particularly the periodic fevers typical of the various sorts of malaria, is an ailment of long duration. If it does not kill, it may endure for months, and in a malarial case return at intervals for the rest of the victim's life, and as a chronic disease it leaves the victim vulnerable to opportunistic acute infections: it is no wonder that discussion of fever is so important in the medical writings.

A significant proportion of fevers in antiquity were likely to have been malarial. The periodicity of most sorts of malaria during the period of primary infection is quotidian: it has been demonstrated in modern research that the

\textsuperscript{56} \textit{P. falciparum} and \textit{P. vivax} have intense fevers recurring on the second day, while \textit{P. malaria} has intense fever recurring on the third day.
periodicity of the milder form of malaria, *P. vivax*, is only tertian throughout the attack in relapses.\(^{57}\) Malaria exacerbates the effects of gastro-intestinal infections and is a contributory cause of miscarriages.\(^{58}\) There are indications that malaria may suppress the immune response to typhoid fever, causing increased mortality.\(^{59}\) It is also known to exacerbate heart diseases and respiratory diseases in older people, increasing mortality in these cases also.\(^{60}\)

The longer and more regular the periodicity, the less dangerous the illness: quartan fever, says Celsus, "kills no one" (3.15.6). But a continuing tertian or semiterterian fever was frequently fatal - though Celsus considers that this occurs because of the errors of physicians. (3.8.2) This view is also found in the Hippocratic corpus: *Epidemics I.11*, for example, informs its reader that continuous fevers are the most serious and dangerous kinds of disease, while the safest were quartan fevers, and semiterterian was more likely to be acute and prove fatal than the others. According to *Epidemics I.24*, semiterterian fever causes very severe illness in those patients who also suffer from consumption (*phthisis*). Research in the twentieth century suggests that tuberculosis struggles to establish itself in patients already suffering from malaria, but that when malaria attacks a patient suffering from pulmonary tuberculosis, the tuberculosis develops rapidly, in the manner of "galloping consumption."\(^{61}\)

Essentially, *kausos* covers a wide range of ailments and outcomes, but was endemic to ancient society, consuming a vast amount of resources, causing numerous health complications, and contributing significantly to overall

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60 Salares, 2002, 130.
61 Salares, 2002, 139.
mortality - as well as presenting as both acute and chronic conditions in its own right.

Examples of diseases in the ancient world: Consumption, phthisis (φθίσις)

If we are to discuss diseases that have a widespread effect on life and on society, we can hardly avoid speaking of the *Mycobacterium tuberculosis* complex, a group of four mycobacteria (*M. tuberculosis*, *M. africanum*, *M. bovis*, and *M. canetti*, all of which cause tuberculosis) which emerged from a common ancestor between 20,000 and 35,000 years ago. Tuberculosis causes bone lesions in between 3-5% of cases, and thus its presence as a biomedically recognisable disease agent can be securely identified. Tuberculosis also appears to be extremely widespread throughout human history, with evidence for its presence in Europe, Asia, Africa, and the pre-Columbian Americas. The earliest skeleton with evidence for tuberculous lesions dates from approximately 5800 BCE, and comes from Liguria in Italy; the disease was definitely present throughout the ancient Mediterranean world. It is a disease which frequently affects cattle and poultry as well as humans, and is easily transmissible between species.

Tuberculosis is most commonly known to us today in its pulmonary form, but in addition to the lungs it is capable of attacking, and destroying, tissues across

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a wide range of the body's systems. Bones, joints, skin, the central nervous system, the circulatory system, the genitourinary tract, the gastrointestinal system, the lymphatic system; all of these can be, and are, affected. It has an indeterminate incubation period, and, while it can kill quickly - especially when it attacks the meningeal tissues of the brain, a type of the disease most common in children - it is normally a chronic, long-lasting disease, its advancement waxing as its victim's defences wane. Its spread and its progress among its victims depend in large part on their general health and their living conditions, making it throughout history a faster killer of those with poor diets who live in crowded conditions, and those whose daily lives bring them into contact with substances that irritate the lungs - such as miners and weavers, and those who live in smoky dwellings and smoggy cities - than those with sufficient food and clean air. It kills more of the poor faster than it does the rich, but it is no respecter of stations: it spreads by aerosol transmission, and recent evidence suggests that no very long duration of exposure - hours only - is necessary for infection to take place. In 90-95% of infected cases, the victim's immune system contains the bacteria in a granuloma or nodule - the "tubercle" from which the modern disease eventually took its name - and the disease does not initially become symptomatic. In approximately 5% of these cases, the disease eventually flakes up and symptoms occur (referred to as "reactivation tuberculosis"), and these join the 5-10% of cases in which the bacteria is not initially contained, and which become symptomatic within two years or less ("primary tuberculosis.")

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What are those symptoms? Coughing up blood (haemoptysis) is one of the primary signs of pulmonary tuberculosis. Haemoptysis occurs because over time the tubercles break down and release infectious material, pus, and dead tissues, leading to the development of cavities in the lung tissues, which become larger and more numerous as time goes on. (The more the lungs are eaten away by the development of these cavities, the harder it is for the victim to recover, and the more blood that is produced during coughing. Between episodes where the infection is active, fibrous or calcified scar tissue can form in the cavities, causing "hardening" of the lungs.) The other most common symptoms include a productive cough, low-grade fever, night sweats, general malaise, difficult or laboured breathing (dyspnoea), and cachexia (weight loss and muscular atrophy even when there is no loss of appetite). Tuberculosis of the spine results in a distinctive hunchback - tuberculous spondylitis, or Pott's disease - while tuberculosis of the lymphatic system can result in scrofulous masses on the neck which can burst to form open wounds, and chronic skin inflammation. Tuberculosis can spread throughout the whole body - miliary tuberculosis, which when untreated (or untreatable) by antibiotic therapies is almost always fatal - where the symptoms are non-specific, but include fever and coughing. When it affects the gastrointestinal system, symptoms can include abdominal pain, weight loss, vomiting, diarrhoea, night sweats, fever, anal fistulae, accumulation of fluid in the peritoneal cavity (ascites, which has historically been known as abdominal dropsy), and abdominal masses.

Tuberculosis is, of course, a modern name for a specific biomedically identifiable disease. The ancient Greeks knew nothing by that name, and had, in

64 Bynum, 2012, xxiii
any case, completely different ideas about disease causation. Why then have I
gone to so much trouble to discuss its symptoms and progress?

Among the terms the ancient Greek medical writers used to discuss and
categorise ailments is φθινός, "phthisis," a word which means "wasting" or
"decay," and which has frequently been translated as "consumption." While
phthisis, like 18th and 19th century consumption, undoubtedly incorporates a
range of disease aetiologies beyond the *M. tuberculosis* complex - pneumonia,
for example, and other infections of the lungs, such as might happen when one
inhales a foreign body such as a needle or nail - the symptoms it encompasses
are such that, with our knowledge of *M. tuberculosis*’s presence and prevalence
in human history, we may be reasonably sure that many cases of phthisis are
tuberculous in nature.

This is significant because it allows us to use information from well-
documented case histories and apply it to the experience of living with sickness
in the ancient world: people thought differently about the *causes* of illness in
ancient Greece, but the physical and social experience of living with an illness
such as consumption, or phthisis, has commonalities throughout history. We can
take the symptoms of the three different kinds of phthisis described, for
example, in the *Diseases*, and understand what this meant, in terms of quality of
life and survival prospects in general - because for most of history, European
physicians used very similar treatments for consumption as their Greek and
Roman forebears. As late the early part of the 20th century, the best hope for
most people's recovery was rest, good food, and moderate exercise in fresh air,
and that was no very certain hope.

The author of *Disease I* considers phthisis invariably fatal, and also inevitably
a disease that takes a long course. It is the only disease considered both
invariably fatal and long; dysentery is considered a disease with a long course, but it is categorised among the disease that are not definitely fatal. Disease II discusses several kinds of diseases of the lungs: pleurisy and pneumonia, according to the author, result in death or a turn towards recovery within twenty days; but in the cases of consumption (pthoe and phthisis), the disease stretches for months and even years. The sputum smells bad, and "like burnt fat" when thrown onto coals, which - along with hair falling out - is a sign of approaching death. For this and the second kind of consumption (a sign of which is coughing up pus that resembles hailstones, and which smells foul), the author of Diseases II advises rich, salty food and exercises and walks out of the wind and sun. The second kind of disease is one that one can, allegedly, recover from in seven or nine years. A third kind of consumption, according the author of Diseases II, involves coughing up blood and pus, and hard pieces, and the patient's mouth smells like raw fish.\textsuperscript{65} Again the main treatment is good food and exercise before and after meals. Another kind of consumption - nòtias phthisis - has no fever and loss of appetite, but still results in wasting. (Although the text does not specify, the author of Diseases II must still consider this a disease of the lungs, as it is contained within the section that deals with lung diseases.) Consumption is chronic and difficult to treat. In fact, the author of Diseases II advises that no attempt be made to treat in some cases, probably because dead patients do not redound to the physician's credit. The remission of the disease, when it does remit, is less to do with the physician's treatment than the body's strength and resilience in the face of illness.

\textsuperscript{65} This occurs in tuberculosis because the lung tissue is rotting, and so the smell of rot is carried on the breath.
What do deficiency diseases, fevers (kausos), and consumption (phthisis, phthoe) have in common?

Deficiency diseases are not usually fatal. Consumption frequently is, and so too - albeit often to a lesser degree - are fevers. Yet what they have in common is their chronic nature, and the often permanent damaging changes they cause in the body. Illness creates a social burden. Acute diseases result in either recovery or death within a relatively short period, and while the acutely ill require nursing and care which places a burden upon the resources of their family or household, it is a need that passes. But chronic illness and chronic malnutrition creates a whole class of "sick poor," people who become less and less able to maintain themselves through their own labour and are forced to rely on their kin groups for support; who may start out marginally prosperous and slide down the social scale into bondage; or who start out poor and end up rapidly dead.

Ancient Greece was a world where illness led to poverty, and a world where poverty created the conditions that made chronic illness worse, and acute illness more frequent.

Social consequences of disease and deformity

The upshot of this is that people in the ancient world lived with a lot of illness and pain, much of which was chronic or recurring. The nature of work in the ancient world, long before the institution of labour laws or health and safety
regulations, meant that the level of injuries obtained while working was higher than today. It also means that crippling injuries suffered in the course of everyday life - farming, fishing, transporting merchandise, fullering, baking, smithing, carpentry, stonework, and even in traditionally interior, female tasks like spinning and weaving - were far from rare.

Crippling and deformity brought with it social consequences over and above physical pain and disability and the consequent difficulty of fulfilling one's economic role in the oikos (supporting oneself, supporting one's dependents, contributing to the household). For the ancient Greeks adhered to the idea that vice and depravity leave visible marks on the human body, much as Plato held they leave permanent traces on the soul. Fineness of body, social standing, and appropriate behaviour are all conceptually linked in the phrase καλός κάγαθός, "beautiful/noble/fine and good," which applied to persons of social distinction. Conversely, κακός - ugly, ill-born, bad - used in a social context denoted a person of no standing at all. "Ugly" as a shorthand for base and cowardly is already accepted as early as Homer, with the character of Dolon.

"'ϊν δὲ τις ἐν Τρώεσσι Δόλων Εὔμηδεος υἱὸς κήρυκος θείοιο πολύχρυσος πολύχαλκος, ὃς δὴ τοι εἴδος μὲν ἔην κακός, ἄλλα ποδώκης:" (Homer, Iliad 10.314-317.)

"Now there was among the men of Troy one Dolon, son of the god-like herald Eumedeos, rich in gold, abounding
in bronze. He was ugly of aspect, but swift of foot."
(Author’s translation.)

Ugly Dolon is afraid of dying and willing to spill the beans on the defences of Troy to Diomedes and Odysseus in order to save his life: an act that is wholly the opposite of καλὸς καγαθὸς.

Aristotle refines this approach in his Physiognomies, where he maintains that "Dispositions (διάνοια) follow bodily characteristics (ἐποντα τοῖς σώμασι), and are not in themselves unaffected by bodily impulses... for it is evident that dispositions are changed considerably by bodily affections." (Aristotle 805a 1ff, trans. W.S. Hett, Loeb Classical Library, 1936.) Later in the same work, he says, "It seems to me that body (σῶμα) and soul (νευρή) react on each other; when the character of the soul changes, it changes also the form of the body, and conversely, when the form of the body changes, it changes the character of the soul." (Aristotle 808b 12ff.) For example, the κίναυδος, an "unmanly" man, is signified by being weak-eyed and knock-kneed, with either a swaying or a powerfully-controlled gait. (Aristotle 808a 12ff.) The shameless man (Aristotle 807b 29ff) has bloodshot eyelids and a ruddy complexion and is inclined to stoop, while the brave man (Aristotle 807a 31ff) is erect, strong and large, with bright eyes.

Ancient understandings of "disease"

66Thought, intellectual capacity or the faculty of thinking: in essence mind or character. LSJ, s.v. διάνοια, I.2, III, V.
The language of humoural theory has survived into the 21st century - bilious, melancholic, choleric, phlegmatic, sanguine, bad- and good-humoured - but all of us today take for granted the concept that infections and communicable diseases are caused by micro-organisms; that other afflictions are affected or created by the interaction of chemicals produced within the body, such as hormones and neurotransmitters. The situation in antiquity is so different as to be utterly alien to the modern eye. Neither were anatomy and its functions well understood: bear in mind that even something we take as much for granted as the circulation of the blood did not emerge as a commonplace of anatomical understanding until William Harvey laid out proofs for it in De Motu Cordis, published in Frankfurt in 1628.

They held it as the most important of the "natural actions," but eminent ancient physicians even failed to understand the physical processes of digestion. Celsus tells us it was highly disputed:

"Some following Erasistratus hold that in the belly the food is ground up; others, following Plistonicus, a pupil of Praxagoras, that it putrefies; others believe with Hippocrates, that the food is cooked up by heat. In addition there are the followers of Asclepiades, who propound that all such notions are vain and superfluous, that there is no concoction at all, but that the material is transmitted through the body, crude as swallowed." (Celsus, De Medicina, Pro.20ff, trans. W.G. Spencer, Loeb Classical Library, 1935.)
Much of the understanding of disease in antiquity relied on theories of balance, and on the interactions between hot and cool, moist and dry, within the body. This formed the basis for the medieval interpretation of humoural theory, which saw bodily humours in light of Empedocles' elemental cosmogony: fire, air, earth, and water; yellow bile (warm and dry), blood (warm and moist), black bile (cool and dry), and phlegm (cool and moist). But humoural theory did not, as it were, spring full-formed from the head of Zeus. The Hippocratic corpus, on the whole, does not make use of a four-humoured approach. For the most part, bile is not divided into "yellow" and "black", but remains merely "bile" (χολή). In the Hippocratic corpus, bile is usually discussed in conjunction with phlegm (φλέγμα). Blood (αἷμα) is sometimes discussed in conjunction with these two substances, and sometimes not. When it comes to the production of diseases, indeed, it is more often not: that is to say, blood is discussed alone. The approach taken by many of the Hippocratic writings admits of mere surface similarities to the later developed system of the humours.

*Affections* 1, part of the Hippocratic corpus, avers:

"[A]ll human diseases arise from bile and phlegm; the bile and phlegm produce diseases when, inside the body, one of them becomes too moist, too dry, too hot or too cold; they become this way from foods and drinks, from exertions and wounds, from smell, sound, sight, and the sexual act, and from heat and cold; this happens when any of the things mentioned are applied to the body at the

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67 φλέγμα in the Hippocratic writings can mean either "phlegm" the substance or "inflammation," lest we were ever tempted to consider ourselves blessed with too much clarity. LSJ s.v. φλέγμα, II.1, II.2.
wrong time, against custom, in too great an amount and too strong, or in insufficient amount and too weak. All diseases in people, then, arise from these things." [Trans. Paul Potter, Loeb Classical Library, 1988.]

*Diseases I.2* also follows along this theme:

"Now all our diseases arise either from things inside the body, bile and phlegm, or from things outside it: from exertions and wounds, and from heat that makes it too hot, and cold that makes it too cold.

"Bile and phlegm come into being together with human coming into being, and are always present in the body in greater or lesser amounts. They produce diseases, however, partly because of the effects of foods and drinks, and partly as the result of heat that makes them too hot, or cold that makes them too cold." [Trans. Paul Potter, Loeb Classical Library, 1988.]

We see here some of the outlines of *nosos* (νόσος) as it was understood in antiquity. Disease, in this formulation, arises when the natural state of the body gets out of balance. The imbalance is a result of internal factors, bile and phlegm, being affected by external factors such as heat and cold or by human behaviour such as injury or sexual activity. One can very definitely, in the Greek way of thinking, *make oneself sick*. The imbalance thus created is *nosos*. Medical writers then divide nosos into types according to the symptoms
expressed: phthisis, fever, dropsy, tenesmus, phrenitis, dysentery, gout, empyema, sciatica, haemorrhoids, pneumonia, pleurisy, staphylitis, nephritis - to name a few mentioned by the author of Diseases I. That author recognises that certain of these afflictions may develop into others: pleurisy to ardent fever, tenesmus to dysentery, pneumonia and pleurisy to internal suppuration; but conversely "ardent fever does not arise from pneumonia." (Hip. Diseases I.3)

The role and image of the ancient physician.

Many writings among the Hippocratic corpus pay at least a modicum of attention to the self-presentation of the ancient physician. Precepts, for example, devotes some time to explaining when and how the physician should look for fees. The Oath presents, in what it undertakes and forbids, one image of the model physician. On Ancient Medicine and The Art argue for the practice of medicine as a τέχνη, a skilled art, an argument which not only gives us information on ancient physicians' self-presentation - that medical matters should be primarily the purview of skilled professionals, and that the writer and his colleagues saw themselves as skilled professionals - but implies that self-identified physicians were not always seen as skilled professionals, nor medical matters their exclusive purview. The Art, moreover, gives us this important piece of information:

"It is conceded that of those treated by medicine some are healed. But because not all are healed the art is blamed, and because there are some who succumb to disease, those
who malign it assert that those who escape do so through luck and not through the art." (Hip. The Art IV.1ff. Trans. W.H.S. Jones, Loeb Classical Library, 1923.)

Medicine in antiquity, iatriká, is not, therefore, a téχνη whose merits were universally credited. On The Sacred Disease makes clear that amongst physicians in antiquity there existed the view that some of those who laid claim to superior (medical) knowledge were nothing more than fakers - ἄγόρται καὶ ἀλαζόνες, beggars and charlatans:

"Being at a loss and having no treatment that would help, they concealed and sheltered themselves behind superstition, and called this illness 'sacred', in order that their utter ignorance might not be manifest. They added a plausible story, and established a method of treatment that secured their own position." (Hip., On the Sacred Disease II.1ff. Trans. W.H.S. Jones, Loeb Classical Library, 1923.)

Naturally it is always some other pretender to medical knowledge who is an ignorant fool or a cunning shyster, and never our interlocutor; but one receives the impression that self-professed physicians in antiquity were likely to comprise cliques of mutually suspicious, and at times mutually antagonistic,
practitioners. We do not know to what degree this same competition took place between physicians within the context of healing sanctuaries.

But the Hippocratic corpus reflects, for the most part, the self-representation of physicians and men of letters concerned with medical matters. To see how people who were not themselves involved in the πέραμα conceived of the role of ιατροί requires one to step outside the medical writings and make use of other sources. Of these other sources, one of the most interestingly varied is the Natural History of the elder Pliny. It is the Natural History that is our source for the elder Cato's (infamous) opinion of the medical profession, from his advice to his son. "When," says Cato, according to Pliny, "the Greeks give us their literature it will undermine our whole way of life, and even more so if they send us their doctors. They have sworn among themselves to kill all foreigners with their medicine, but they do so for a fee, to win credit and destroy us easily. They also persistently call us barbarians and treat us with less consideration than others and belittle us as country bumpkins. I have forbidden you to have anything to do with doctors!" (Pliny, Nat Hist 29.14. Trans. W.H.S. Jones, Loeb Classical Library, 1963.)

Marcus Porcius Cato the Elder died in 149BC. A Roman, opposed to Hellenising influences, it is natural he should have been suspicious of Greek physicians, particularly those who had chosen to practice their profession in Rome. His is perhaps the strongest denunciation of physicians from all antiquity. Greek doctors! They're determined to kill you! And they'll charge you for the privilege! Not to mention belittle good, civilised, Roman citizens while they're at it.

One might be excused for imagining Cato's opinions were singular, confined either to himself or to his own circles at Rome. But while, to my knowledge, no one else makes as strong a claim for the outright maliciousness of medical professionals (They have sworn among themselves to kill all foreigners with their medicine), a deep vein of potential mistrust runs throughout a great deal of those writings from antiquity which mention doctors. Plato's Republic (332d) makes a point of pairing the physician's ability to heal with their ability to harm:

"Who then is the most able when they are ill to benefit friends and harm enemies in respect to disease and health?" The physician." Says the Republic: (333e) "Is it not also true that he who best knows how to guard against disease is also most cunning to communicate it and escape detection?" 'I think so.'"

Further, the Republic implies that some tension may exist between the physician as minister to health and the physician as fee-charging craftsman (341c ff.):

"But tell me, your physician in the precise sense of whom you were just now speaking, is he a moneymaker, an earner of fees, or a healer of the sick? And remember to speak of the physician who is really such.'

'A healer of the sick.'

... 'Can we deny, then,' said I, 'that neither does any physician in so far as he is a physician seek or enjoin the advantage of the physician but that of the patient? For we have agreed that the physician, 'precisely' speaking, is a ruler and governor of bodies and not a moneymaker.'"

No true physician, here, it seems, is more concerned with collecting a fee than with attending to the needs of the (sick) body.

Plato's determination that the true physician is not motivated by financial gain is not a conviction shared by the vast majority of writers from antiquity. Pliny Elder (*Nat. Hist.* 29.16) is rather less flattering: "Previous generations rejected not medicine but rather the medical profession, mainly because they refused to ransom their lives with doctors' fees... [T]hey expelled the Greeks from Italy and took care to make specific mention of doctors." (He seems to view several medical practices as merely fashionable fads.) He goes on to say that (*Nat. Hist.* 29.18): "Only a doctor can kill a man with impunity. Indeed the blame is transferred to the deceased, who is criticised for want of moderation, and it is thus the dead who are censured." [Trans. W.H.S. Jones, Loeb Classical Library, 1963.]

Romans, it appears, are not really all that impressed by the medical profession. But Cato, in the second century BCE, and Pliny, in the first century CE, were not alone in viewing physicians with a deep and abiding cynicism. Centuries later, a contemporary of Justinian, the sixth century CE Greek poet and historian Agathias of Myrina (also known as Agathias Scholastikos) wrote a poem about a physician who gives the following prognosis:

"Should the pharynx stop rasping and the fierce side-stabbing pains
Cease, and should the breathing no longer be rough with fever,
You shall not die of pleurisy; for this to us
Is a sign that delivery from suffering will occur.
Take courage, and summon your notary and of your belongings
Dispose well and depart from this life, the mother of cares."

For this prognosis (i.e., if the patient recovers, they will not die), he asks the following fee:

"And to me, your physician, due to my astute prognosis,
Bequeath a third [of your belongings] as my inheritance." (Agathias AP 11.382, trans. Maria Plastira-Valkanou.69)

From Plato clear through to the reign of Justinian, then, we may see a tension present in the public view of the physician, between the ideal physician, who is competently devoted to the cause of health without serious thought as to fees, and the not-so-ideal physician, at best well-meaning and expensive but only middling competent, at worst a bungler and a chancer out to soak his clients for as much as he can get. The former vision suits the self-presentation of the medical professionals; the latter probably describes many clients' experience of being on the receiving end of medical treatment. (Though some of this suspicion

of fee-charging physicians is likely related to the aristocratic ethos that permeates ancient literature.)

**Magical thinking and the doctor-god**

The profession of medicine existed, as it indeed does today, alongside other ways of responding to sickness and to sick bodies. It existed as part of a continuum, along with non-professional treatment, magical acts, and religion.

For all the ink that has been spilled over the "rationalism" and "science" of the profession of medicine in antiquity, the one real thing that separates physicians from everyone else is *not* the efficacy of their cures or any sort of experimental method in their treatments, but rather a shared view of themselves as professional and intellectual craftsmen, and a shared view that many illnesses had physical causes which could be treated by physicians through physical means - even if the understanding of those causes and the appropriate means of treatment is nothing that modern biomedicine would recognise. Non-professional treatment and magical acts, however, cover a wide variety of approaches and theories, which were rarely explicitly stated on the part of the practitioners. We may argue edge cases, but it’s clear that the inhabitants of the ancient world for the most part acknowledged a distinction of *practices*, if not of efficacy, between medicine as an art and the practice of traditional household and/or magical remedies. We see this in Lucian’s "Lover of Lies, or the Sceptic": "I'm not such a drivelling idiot," says our interlocutor in section eight of this dialogue,70 "as to believe that external applications, which have no connection to the internal causes of the disease, and are applied, as you

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say, with set formulas and wizardry, have any power to produce a cure." [Trans. C.D.N. Costa, Oxford World's Classics edition, 2009.]

In this dialogue, his is the only voice to speak against the efficacy of such treatment. Lucian is of course famously sharp-tongued and a sceptic, and there is no reason to think that individuals in antiquity in general, even inside what we would think of as "intellectual" circles, preferred one form of treatment over another.71 (Even today, people will make use of biomedical modes of healing alongside religious ones.72) The Greek Magical Papyrii preserve a number of spells for the cure of ailments, ranging from simple charms to complicated prayers, for everything from the cure of eye disease to gout to the treatment of dog bites and fever. PDM xiv 528-53 is a spell of inquiry which is recorded as being given to the writer by "a physician in the Oxyrhynchite nome," so here we have a connection alleged between one practitioner of the art of medicine and what (for example) the author of On the Sacred Disease would probably refer to as superstition and charlatanry.

The role of magical remedies and non-professional ones in wider society and culture is difficult to pin down. Unlike medicine, those people who used and passed on such remedies did not leave behind a corpus of theories and arguments over causes, cures, and efficacies, or if they did, it has not survived. It appears that these remedies were deprecated by many physicians and members of the philosophical intelligentsia, as we see in Lucian and some of the Hippocratic writings. But this tells us nothing about whether or not it was widely availed of: a thing may be deprecated socially in part because it is so widely used/available.

71 See for example Lloyd, 2003, 40-60, on the evidence for attitudes to sacred and secular medicine.  
Unlike magical and non-professional remedies, we have evidence for widespread recourse to the cult and sanctuaries of Asklepios at many different levels of society. It appears that the ancient Greeks conceived of Asklepios in light of a divinely effective *iatros*, more than in any other fashion: the god that physicians generally looked to as their patron was himself seen as the physician of the gods.

In statuary he is most often depicted as a mature man, bearded, standing, with his staff in one hand and the other hand open. A snake twines around the staff. (See Plate 14. Depicted as youth, Plate 18.) Sometimes he is depicted seated on a throne with the staff; less often, he is depicted as a youth or accompanied by Hygieia or other figures. In some of the votive tablets in the collection of the National Museum at Athens, he is depicted approached by worshippers, while in a handful of votive tablets, including one found at the Piraeus, a figure identified as Asklepios is involved in a procedure recognisable from the medical texts. Were we to rely solely on his portrayal in art, we might not realise how physician-like the representation of Asklepios really is. But in the miracle inscriptions from Epidauros (which are discussed in greater detail in the chapter on Epidauros), he acts as a physician on several occasions: operating by means of cutting (A4, A13, B5, B7), applying medicine (A4, A9, A17, A19, B20, B21), and prescribing regimen (C5, C21). In the dream-visions recounted by Aelius Aristides, he appears to act as a physician by recommending regimen, while in Aristophanes' comedy *Wealth*, he is referred to as the kind of god who "eats dung" (705), i.e., tastes stools, and who prepares

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73 e.g. Athens, NM 1338; Athens, NM 1339; Athens, NM 1344; Athens, NM 1341; Athens, NM 1345; Athens, NM 1346; Athens, NM 1347; Athens, NM 1348; Athens, NM 1353; Athens, NM 1334; Athens, NM 1330; Athens, NM 1331. See also Plate 15.

74 Piraeus Museum 405. A figure identified as Asklepios is involved in examining or manipulating a prone woman's upper back. See Plate 16.
ointment (716-717). The god's cures are miraculous, but the means by which he accomplishes those cures are frequently conceived of in terms familiar to his supplicants from the practices of those same human physicians who are often distrusted for their fee-charging and doubtful efficacy.
Chapter Two: Theories and Methodologies

Defining Experiencing and Experiencing the World of the Body

Experience
(noun)(verb)

Noun:

1 a: direct observation of or participation in events as a basis of knowledge; b: the fact or state of having been affected by or gained knowledge through direct observation or participation;

2 a: practical knowledge, skill, or practice derived from direct observation of or participation in events or in a particular activity; b: the length of such participation;

3 a: the conscious events that make up an individual life; b: the events that make up the conscious past of a community or nation or humankind generally;

4: something personally encountered, undergone, or lived through.

Verb (transitive):

1: to learn by experience;
Experience is a multivalent word, and the boundary between what constitutes an experience as an event, and the continuum of experiences - 'experience' in a general sense - is a porous one. To speak of experience, and even more to speak of embodied experience, is to enter a realm at once universal and illusory. To embody a thing is to make it concrete and perceptible, to cause it to become a body or a part of a body - but while every person is an embodied being, there is no one single objective body about which we can speak with non-subjective certainty. Our bodies, to us, are not objects, but an integral part of the process of perception. The body is a sensory whole, against which the world collides. There is never a moment during which the body perceives nothing at all, and thus we cannot divorce perception from the analysis of perceived things: every person continuously experiences the world through the world's impact upon the body as a sensory whole.

Precisely how the world is experienced, however, is unique to each individual. Each perceived experience is coloured by physiological variances, the conscious and unconscious recollections of previous experiences, and the flavour of a cultural zeitgeist: even by the disjunct or contiguity between expectation and reality, or between the background polyvalence of symbols and the wilful choice of significances.

There is no such thing as objective experience, for experience is foremost a subjective world. To approach this world from the outside, as we all must

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approach experience not our own, entails a cavilling acceptance of *might* and *could, perhaps* and *maybe*. The experience and perception of others is an arena into which we must extend an imaginative empathy in the absence of readily accessible "fact." And to illustrate experience not our own, as the eminent anthropologist Clifford Geertz has said, we must resort to "thick description," because the interpretation of a *thin* description is that much more likely to fall prey to the observer's own biases, personal and cultural. Christopher Tilley argues that we must enter into thick descriptions of place in contrast with the "standard mode of thin technicist archeological description which effectively dehumanises the past and makes it remote and sterile." Perceiving a thing, or a place, or a landscape, isn't only "a visual practice, but involves the whole living body," and for that reason, embodiment provides an essential starting point for discussing experience. "The body," as Tilley points out, "is both interpretational constraint and enabling condition for the construction of meaning." 77

Clifford Geertz was speaking of the experiences lived through - suffered or embraced - by individuals and groups in living cultures. The problem of the anthropologist is multiplied a hundredfold when it comes to interrogating the experiences of individuals and groups in cultures which existed in the past and exist no longer; a thousandfold, in the absence of literature or eye-witness reports which describe the experience from an interior perspective: from, that is, the point of view of the participant.

Our sources for the ancient world are scanty enough when it comes to the major events of politics and war. When it comes to household life and

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agriculture, commerce and religion, archaeology and epigraphy can often illuminate the silences that literature has left: close reading and determined interrogation of texts in light of examples and information known from other times and places can narrow the gap between what we know and the details which resist certainty. But ultimately, parts of what we 'know' remain attractive, evidentially-supported, yet still unconfirmed surmise.

This project sets out to interrogate healing cult and healing practices in Greek antiquity from the point of view of experience. The aim of my research is to construct a model of how the ancient Greeks conceived of sick vs. healthy bodies; how they experienced sickness; how they interacted with their surroundings and the strategies which they employed to regain or maintain health; and to construct this model in such a way as to approach Geertz's ideal of 'thick description.' The ultimate goal here is to ask and where possible to answer the question of how a Greek man, woman or child might have felt concerning healing processes and their outcomes between the beginning of the fourth century BC and the end of the second century CE. To that end, this chapter discusses the problem of experience from a theoretical perspective.

**Theory, Experience, and Sanctuaries of Asklepios**

A sanctuary of Asklepios is a locus both physical and social. Coterminal with the material complex of temples, stoas, enkoimeteria, altars, and lustral installations - to say nothing of the baths, libraries, rooms for dining, gymnasia, and other paraphernalia of the greater sanctuary complexes - existed a social
world no less important to the sanctuary as a unit as its geography and architecture. This social world is, however, that much harder to access. Its makeup included not only cult personnel, priests and slaves, vendors of sacrificial animals, *iatroi*, curious visitors, persons fulfilling a small pledge of sacrifice, and supplicants in search of healing and their attendant entourages, but also involved such things as the social construction of health and sickness, the image of the god, and the experience of religious/epiphanic healing.

**What is healing?**

What is religious healing? What is *healing*? How does it function as a social/cultural phenomenon? What processes are involved? How does it relate to the gross physical processes of the body and the total encounter between the body and the world?

**The Existential Ground of Culture and Self**

Thomas J. Csordas refers to the body as "the existential ground of culture," as well as of self. It is the locus at which the relationship between the self and "other selves" is encountered, created, and maintained. Csordas has used theories of embodiment while interrogating religious healing in Charismatic Revival movements and among the Navajo in the contemporary USA. Anthropologists of contemporary forms of religious healing and of biomedicine

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have the benefit of being able to interview and observe their human subjects: with the ancient world, one must rely on chance survival and analogy. This makes filling in the gaps naturally more difficult, and our theoretical framework for understanding all the more important.

The question we must ask before any other is this: how does the self - understood as the body as the centre of awareness - experience its encounter with the world? From an answer here, we may proceed to the question of a) how the self experiences its encounter with other selves, and b) how the self experiences its encounter with the social world of healing cult, and thus how it experiences religious healing.

The Encounter With The World

As a theoretical foundation for understanding being and being-in-the-world, for understanding the body and experience vis-à-vis the impact of the world upon the senses, we turn to Maurice Merleau-Ponty and Pierre Bourdieu. Merleau-Ponty informs us of embodiment's dimensions vis-à-vis perception and objectification. Bourdieu locates embodiment within anthropological discourses of practice. According to Merleau-Ponty, the body is a sort of setting in relation to the world and to space,\textsuperscript{79} and consciousness comes into being as a consequence of the body projecting itself into the world of perception: it is preobjective, and exists prior to any rationalisation or theoretical concept of being and interacting. Moreover, for Merleau-Ponty, the social world is a "permanent field or dimension of existence... Our relationship to the social is,

like our relationship to the world, deeper than any express perception or any judgement.\textsuperscript{80}

With Bourdieu, the socially informed body is the principle which generates and unifies all practices.\textsuperscript{81} For him, "The theory of practice as practice insists, contrary to positivist materialism, that the objects of knowledge are constructed, not passively recorded... the principle of this construction is the system of structured, structuring dispositions, the \textit{habitus}, which is constituted in practice and is always oriented towards practical functions."\textsuperscript{82}

If we combine these two understandings of the body and the world, we have to acknowledge that we understand the world \textit{with} and \textit{through} our bodily interactions with it, and that this understanding is conditioned by \textit{habitus}, the system of dispositions that conditions the lifeworld of the subject and the subject's interactions with other bodily subjects.

But what does Merleau-Ponty mean when he talks of the preobjective? There are two vital statements for understanding his concept of the preobjective. They are:

a) Consciousness is always consciousness of an object\textsuperscript{83}

and

b) Our perception ends in objects.\textsuperscript{84}

\textsuperscript{80} Merleau-Ponty, 2013, 421.
\textsuperscript{83} Merleau-Ponty, 2013, 43.
\textsuperscript{84} Merleau-Ponty, 2013, 77.
If our perception ends in objects - if it is the essence of consciousness to "forget its own phenomena" - then perception must begin in some preobjective state. Where do we locate this preobjective state? It must be located in the body prior to the body's consciousness of its encounter with the world: consciousness is always consciousness of an object. Thus, the preobjective is experientially and perceptually inchoate. We define it by its lack of definition. It is a quantum state of being vis-à-vis being-in-the-world.

Thus, for Merleau-Ponty, we are conscious of our bodies via the world and of the world via our bodies. Perception and Mind (consciousness) are synonymous. To see is "always to see from somewhere." The body is always in the world. But it would be wrong to characterise the preobjective genesis of perception, however, as precultural. Perception, consciousness, is both embodied and social. "Consciousness projects itself into a physical world and has a body, as it projects itself into a cultural world and has habits, because it cannot be consciousness without playing upon significances given either in the absolute past of nature or in its own personal past, and because any form of lived experience tends towards a certain generality whether that of our habits or that of our 'bodily functions'." Our bodies are not objects to us: rather they become objectified through the process of perception and self-reflection. No more is the social world an object: we cannot cease to be situated relative to it, any more than we can cease to be situated relative to the perceptual world: "It is as false to place ourselves within society as an object among objects as it is to place society within us as an object of thought, and in both cases the mistake lies....

85 "...conscience can forget phenomena only because it can recall them, it neglects them in favour of things only because they are the cradle of things." Merleau-Ponty, 2013, 67-68.
86 Merleau-Ponty, 2013, 90.
87 Merleau-Ponty, 2013, 158.
88 Merleau-Ponty, 2013, 77.
89 Merleau-Ponty, 2013, 158.
in treating the social as an object. We must return to the social with which we are in contact by mere fact of existing and which we carry about inseparably with us before any objectification."⁹⁰ Experience, consciousness, transcends itself in things. "My body is inescapably linked with phenomena... it is lived by me from a certain point of view; I am not the spectator, I am involved, and it is my involvement in a point of view which makes possible both the finiteness of my perception and its opening out into a complete world... the perception of the world is simply an expansion of my field of presence without any outrunning of the latter's essential structures, and the body remains in it but at no time becomes an object in it. The world is an open and indefinite unity in which I have my place."⁹¹

We cannot approach human experience without addressing the question of perception: all humans are presences in the world; there is no such thing as disembodied consciousness - Merleau-Ponty is convincing on this point. But how does the embodied consciousness perceive and create the social world as, at the same time, the social world influences the perceptions of the embodied consciousness? How does the social body and the embodied consciousness - the body in the world - create and inform experience and practices?

To interrogate the concept of practice as it relates to experience, we turn to Pierre Bourdieu (Outline of A Theory of Practice, The Logic of Practice) and Michel De Certeau (The Practice of Everyday Life). De Certeau's approach is somewhat different to Bourdieu's. Where Bourdieu is interested in the general accord of practices (processes, thought-forms, ways of being and understanding) with structures (particular cases, situations, organised systems),

⁹⁰ Merleau-Ponty, 2013, 421.
expressed in his concept of the *habitus*, De Certeau is more concerned with practices as they are experienced in, as his title implies, everyday life: in space, movement, and meanings.

As they both point out, practice, like experience, cannot be removed from its own particular realm to the realm of theory without running the risk of dis-embodying it. Any theory of practice (or use of such a theory) must navigate between the shoals of objective and subjective logic; manage the difficult task of employing theory in reference to subject matter that resists theoreticisation: not for nothing is *practice* an antonym of *theory*.

But let's start with Bourdieu and *habitus*, that "system of structured, structuring dispositions."

*Habitus* isn't the simplest theoretical framework to get to grips with, as anyone who has read Bourdieu's work will be well aware. In its simplest expression, *habitus* is an *aptitude* for a way of thinking. At the same time, it is *also* a way of thinking, acting, and reacting - in general interacting with the self and the world. *Habitus* is a predisposition for given sets of symbolic logic. It is the ways of thinking supported and encouraged by social and political structures and symbols, a way of thinking which exists at a level before articulation. *Habitus* both maintains and gives rise to those structures and symbols. It is imbibed from infancy, both through articulated explanations ("how things work") and through pre-articulated, unspoken systems and

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92 For the time being, we'll leave aside Bourdieu's concept of the field -- zones of social activity mediated by power and social capital, the idea that "every position, even the dominant one, depends for its very existence, and for the determinations it imposes on its occupants, on the other positions constituting the field; and that the structure of the field, i.e. of the space of positions, is nothing other than the structure of the distribution of the capital of specific properties which governs success in the field and the winning of the external or specific profits... which are at stake in the field" (Bourdieu, 1993, 30) -- as likely to overcomplicate the discussion of experience in the healing sanctuaries of antiquity, though it is a productive area for further research especially in artistic production arising from healing cult. (See Bourdieu, Pierre, 1993, *The Field of Cultural Production*, Columbia University Press, New York.)
symbolic logics. *Habitus* is the set of normal and/or possible ways of thinking, interacting with and responding to one's social and physical environment.

Bourdieu does not concern himself with how a *habitus* changes over time. But *habitus* does change: culture and society and orientations thereto are not static. Contact with other systems of dispositions opens up routes for new ways of thinking to be articulated and to be partially co-opted by or integrated into the *habitus* until they become part of the pre-articulated background system of dispositions. The *habitus* may also be affected by innovative thinkers/actors who change the balance of what is probable within that system of dispositions for their successors.

While *habitus* at any point in time may be stable and may appear timeless or unchanging to persons within that system of dispositions, it must be acknowledged that it is not static.

*Habitus* affects experience in that it conditions how experience is felt, and how experience is understood. *Habitus* is the framework within which the thinking body conceives of and assigns meaning to that which it experiences. It is the system of dispositions which structure thought.93

De Certeau refers to "stories" that make up a "narrativity" of practices, an aestheticisation of knowledge.

"Between practice and theory, it occupies a 'third' position, no longer discursive but primitive... This knowledge is not known. In practices, it has a status

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93 This project discusses the thinking body from a largely anthropological and sociological perspective. The neurological basis of consciousness, feeling and emotion (c.f. Damasio, Antonio, *The Feeling of What Happens: Body, Emotion and the Making of Consciousness*, Vintage, London, 1999; Dehaene, Stanislaus, *Consciousness and the Brain*, Viking, New York, 2014) is a separate field, one that interacts with anthropological understandings but is largely orthogonal to them for the purpose of this project.
analogous to that granted fables and myths as the expression of kinds of knowledge that do not know themselves.... the know-how of daily practices is supposed to be known only by the interpreter who illuminates it in his discursive mirror though he does not possess it either. It thus belongs to no on. It passes from the unconsciousness of its practitioners to the reflection of non-practitioners without involving any individual subject. It is an anonymous and referential knowledge."\textsuperscript{94}

_Systems of dispositions_ condition not only systems of thought and belief, but systems of practices. Practice is not static. Neither is it theoretical, although we may speak of theories of practice and logics of practice: practice by its nature resists theoreticisation. Practice is the intersection of bodies with landscapes - built or natural - and with the material of living. Practice is _-ing_ verbs; continuous and contextualised action/state. It is neither isolated nor singular. Practice is a network. _Practice_ as an idea is a latticework of _practices_, of bodies _doing things_ in _places_ with _stuff_. But not _any_ bodies in _any_ places, doing _any_ old thing with _any_ old stuff. We must bear in mind that practice always bears on a _specific_ body, doing _specific_ things, in _specific_ places, with _specific_ stuff. A body, moreover, which is aware of its own specificity, the specificity of its actions, and of the places which it inhabits and through which it moves. Practice may or may not involve the repetition of actions or the willed agency of actors, but it involves _doing_ and _being-in-the-world_.

The cult of Asklepios and its healing-related aspects, is a network of practices and a locus of symbols. One could as easily write it the other way: a network of symbols, a locus of practices. It is important to remember the practical, as well as the symbolic, nature and significance of actions when it comes to discussing religious healing and experience: people are not always consciously aware of symbols, but practice is, in a sense, written on the body.

_Habitus_ as the system of dispositions which structure how people experience the world, and practice as bodies doing things in places with stuff, bring us to some further questions. Questions of bodies and of places and spaces. What is a body? What is a place? What is a space? How do people make use of them?

We've already spoken about Maurice Merleau-Ponty and perception; the body in the world, the body as inextricably linked with the perception of phenomena. Being is being-in-the-world.

But let's think for a moment about the body more generally, about bodies. Bodies are squishy. Bodies are malleable, trainable: work done in the area of procedural memory, particular with reference to motor learning ("muscle memory") has demonstrated that learning can occur without conscious awareness. If one performs the same acts - repeats the same practices - sufficiently often, they cease being wholly conscious processes; as processes they take place below the level of articulated thought. Conversely, new acts, new practices, require mindful engagement, as do special acts and practices, ones marked out as distinctive. Experience conditions the body. Associations with past occurrences condition reactions to future occurrences. The most extreme example of a past experience conditioning a reaction is, naturally, the post-

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traumatic stress disorder traumatic flashback, which may take place when a person encounters an otherwise unremarkable sound, object, odour or sensation associated with the original trauma. That sound, object, odour or sensation may trigger hyperarousal, vivid recall, panic attacks, or in rare cases hallucinatory sounds or images.

The experience of the senses, carried with us in the sense-memory of odours, sensations, tastes, and sounds, as well as the experience of sight, is a vital component of embodied consciousness, of being-in-the-world. It also relates to how bodies experience space and place.

While in day-to-day speech and usage, it can be difficult to make much functional distinction between space and place, we can and must distinguish between them here. They signify different, and equally important, concepts when dealing with the geography of the what Yi-Fu Tuan calls the "lived world." Space and place are "basic components of the lived world."96 Space is the dimension within which matter is located. Space is the three-dimensional expanse in which objects and events happen in relation to each other.

Another way of saying happen is take place.

Place carries the geographic meaning of locality. It is bounded space; an area with definite or indefinite boundaries. Place is relative. Place is a distinctive coming-together in space:97 a somewhere instead of an anywhere. Places are defined by people. Place is where space and spaces take on - that is, are given, are imbued with, by the people who move through or occupy those spaces - social and cultural meaning. Places are loci for the working-out of physical,

96 Tuan, Yi-Fu, 1977, Space and Place: The Perspective of Experience, University of Minnesota Press, Minneapolis MN, 3.
social, cultural, and economic processes. Places, therefore, are defined by use and by perception. Places are defined by practices, but places also give rise to practices, as different people define and use specific locations in space in different ways.

People create places. "Places come into being through praxis." And those places condition the experience of moving through them. Places mean different things to different people in different contexts. Place must be negotiable. Place is negotiable space. Place is space in which meaning inhere: space in which meaning is experienced and in which meaning can be manipulated by the people who negotiate that space. "What begins as undifferentiated space," says Tuan, "becomes place as we get to know it better and endow it with value... The ideas 'space' and 'place' require each other for definition. From the security and stability of place we are aware of the openness, freedom, and threat of space, and vice versa. Furthermore, if we think of space as that which allows movement, then place is pause; each pause in movement makes it possible for location to be transformed into place."99

Places: Meaning and Materiality

A place can be any point in a landscape. That is to say, any bounded area of space. But geometry does not really suffice, however, to describe kinds of places, and human, embodied, interaction therewith. As Gaston Bachelard puts it,

99 Tuan, 1977, 6.
"Inhabited space transcends geometrical space." To do that, we need to consider the *materiality* of places, their physicality: their *there-ness*, for the world is an ineluctable obtrusion upon the senses. Like practices, places resist theoreticisation. Places cannot be reduced to cartographic representations or words on a page. The map is not the territory. In fact, even "points" are insufficient terms of reference when we discuss human interactions with landscape. Tim Ingold argues that humans fundamentally live in the world through wayfaring: that is, they move along lines in creating the texture of the world in which they live, and for Ingold, "it is in the entanglement of lines, not in the connecting of points, that the mesh is constituted" - the mesh being, essentially, the texture of the lived world, the entanglement of lines of signification. But in conceptualising being-in-the-world, in *theorising* it, lines of movement become fragmented, and place, once "a moment of rest along a path of movement" becomes a nexus within which "life, growth and activity are contained."?

In experiencing the lived world, in inhabiting a landscape, place is not so easily bounded or rendered discrete. Place is dense and layered, practically speaking: while one may speak of places that one moves through, one rests in, or one travels between, in the lived world, they overlap and interpenetrate.

Let's talk about place in the landscape. When we say *landscape* we think "natural, untouched by human hands," but in reality inhabited landscapes have undergone processes of gradual change over the course of generations. From the

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102 Ingold, 2007, 97.
103 Tim Ingold discusses what landscape encompasses in his 2011 *Being Alive: Essays in Movement, Knowledge and Description* (Routledge, London), 126-128. Can we assume that "landscape" must include the sky? Naturally the experience of moving through a landscape is vitally dependent on the sky and the weather, the climatological as well as geomorphological features.
obvious processes which alter the shape of the land itself, such as terracing, the
damming and diverting of rivers and streams, the digging of irrigation canals, to
less palpable processes such as the wearing of paths across tilled land, routes
across landscapes of transhumance, lines between dwellings and between loci of
human habitation, humans alter and give meaning to the space they inhabit.
Places with significance can be as simple - as little humanly altered - as a
clearing in a wood or wide spot in a stream, and as complex as busy towns, or
the lavishly ornate palaces or sanctuaries sometimes associated with them.

Any complex place, which is to say any place that encompasses more than a
single point in a landscape, will contain multiple subordinate places. Depending
on its size, it may contain multiple routes - multiple lines of movement - for
navigating among, around, through, within, and outside these subordinate
places, which we may think of as locations layered with meaning.

But not locations alone: place does not exist isolate in a void but as part of a
larger, textured world. Ingold describes this as an entanglement of lines of
movement; Lefebvre as meshwork.

Places are not inert. They are polysemic, "politicised, culturally relative,
historically specific, local and multiple constructions... Places have multiple
meanings that are constructed spatially. The physical, emotional, and
experiential realities places hold for their inhabitants at particular times need to
be understood apart from their creation as... locales." Rodman, 2001, 205 For every inhabitant,
every visitor, every traveller navigating along lines of movement, "place has a
unique reality, one in which meaning is shared with other people and places.
The links in these chains of experienced places are forged of culture and
history."\(^{105}\) Space has three dimensions. Place has four: it adds *depth in time* to *extent in space*. A foreign merchant or a trader finds a different reality to a local; a shipwright finds different meaning in a place than a potter; a slave has a different history along their lines of movement than a free person; a woman, different again than a man. There are points of congruence and commonality, lines of convergence and points of *shared* meaning: but each inhabitant, visitor, and traveller, creates and recreates their own unique reality of experienced places as they move through and exist in them.

In Greek antiquity, towns are complex places. So are sanctuary sites: the largest ones particularly so. Small sanctuaries within a town exist as nodes in a civic landscape of the sacred, points on a grid of social, economic, and cultural activity, places on lines of movement within the city. Sanctuary sites outside the intramural civic landscape must be seen in a slightly different light. And large sanctuary sites situated - *placed* - at a remove from the intramural civic landscape exist as nodes in a wider sacred landscape, points on an intra-civic grid of social, economic and cultural activity, places on lines of intra-civic movement.

The complex place of the sanctuary itself is not reducible to a single dimension, to a single point. It contains its own lines of movement in turn, its own nodes in a landscape of social, cultural and economic meaning. What we can scale up (to the local area, the town, the hinterland, the region), we can also scale down (to the sanctuary, the building, the room). Meaning is created and inheres at each of these scales, and every individual feels each of these scales differently. "Depending on the placement of the observer, the horizons of the

\(^{105}\) Rodman, 2001, 208
regional world could be quite different." The daughter of a farmer who has never travelled more than five miles from her birthplace experiences the landscape of places she travels through differently to the wealthy aristocrat who has been as far afield as Egypt and Rome: the latter finds or assigns additional meanings from a comparison of places and from having the information to conceive of a more extensive mental representation of the relationships across space and between places. "A single physical landscape can be multilocal in the sense that it shapes and expresses polysemic meanings of place for different users... a single place may be experienced quite differently." It is perhaps apposite here to touch more thoroughly on landscape phenomenology and its application to archaeology. Much discussion of the phenomenology of landscape in archaeology has focused on prehistoric landscapes, as with Christopher Tilley, whose 1994 *A Phenomenology of Landscape* provided the first book-length application of phenomenology to archaeology. In *The Materiality of Stone* (2004), Tilley reveals that he sees landscape phenomenology in light of "thick description." Tilley has been followed by a number of others, including Julian Thomas, and others who have taken a more completely sensory approach to phenomenology, such as Yannis Hamilakis. Debate continues, however, around the epistemological problems of this approach, and the knowledge value that can be placed on modern interpretations of the ancient experience of landscape. As Joanna Brück notes, "[I]t is often impossible... to judge whether the relationships identified by the archaeologist in the present were indeed considered significant in the past."
Brück critiques the assumption of a universal human body and the idea that landscapes remain static over long periods of time, problems which Andrew Fleming also raises. Some of these critiques are also raised in Matthew Johnson's "Phenomenological approaches in landscape archaeology," though Johnson is more interested in giving an overview of developments than a thorough critique.

Some of this criticism is more pertinent to prehistoric than historic applications of phenomenology in landscape archaeology. Where there are historical sources, interpretations may be ruled in -- or ruled out. More limits can be placed on the range of possibilities. Nonetheless we must keep in mind the dynamic tension between the idea that we can attempt to close the perceptual distance between us and the inhabitants of the world of antiquity, and understand the world as they did; and the truth that that attempt -- although not without value -- will always fall by some degree short.

**Etic and emic perspectives: accessing the lived world of healing cult in ancient Greece**

How was an ancient visitor, ill or well, to one of the sanctuaries of Asklepios affected by their visit? By the landscape and built environment? By social and cultural narratives? By their social role? By their bodily experience of illness or wellness there?

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In the absence of ancient Greeks to interrogate in person, how we go about answering that question depends in large part on theoretical models into which we can sort our available evidence: models of *habitus*, of practice, of being-in-the-world; of space and movement. We put together our etic accounts of how things (could have) worked, and extend a kind of imaginative empathy into our available evidence in an attempt to access emic perspectives. We try not only to see ancient Asklepiad healing cult from the outside, but to get as close as we can to the point of view of people who experienced it intimately, with an intuitive understanding that is not available to us.

We cannot access the experience of any single individual. But we can approach an aggregate of potential experiences: to posit, so to speak, a range of the possible.

We speak of bodily experience and what is felt in the body. First we should ask: what was the body to the ancient Greek person? For just as today we take for granted a level of understanding and a set of cultural assumptions about the biological and physical processes of disease that were not available to people in antiquity, we also take for granted a level of understanding and a set of cultural assumptions about our physical bodies that are different to those of the ancient Greek person. While the sensations of the body may be similar from person to person, time to time and place to place - things like pain, heat, cold, pressure, scents and tastes - the meanings ascribed to these sensations may differ wildly.

Indeed, Brooke Holmes argues that by explaining disease in terms of the physical body in the fifth and fourth centuries BC, "medical writers and physicians are facilitating the body's emergence as a conceptual object,"112 that

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"classical medical interpretations of symptoms allow physicians and their patients to 'see' a cluster of things and ideas that constitute the physical body." She argues that before this point the physical body as an object did not occupy a significant position in the cultural field. Even then, the inner space of the body, the cavity or κοιλίη, remains hidden and mysterious.

It is easy to see why disruptions to the ordinary, healthy, operation of the body may be seen in terms of the intervention of gods and daemons, of super- or extra-natural influences, as distinct from the mechanistic relation of parts without intentionality. For the interior of the body can be seen and felt (and smelled, and tasted) only in fragments. Human dissection was not widely practiced in the ancient world - except briefly at Alexandria under the Ptolemies, where it is possible that human vivisection also took place - and while animal dissection and vivisection were a normal part of competitive medical practice by the 2nd century CE, Galen and his fellow physicians were aware that the κοιλίη of an animal was not a perfect image of the κοιλίη of a human. As the Hippocratic author of The Art writes after describing the interior of the body: "No man who sees only with his eyes can know anything of what has here been described... what escapes the eyesight is mastered by the eye of the mind." (Hip. Art XI.1 ff. Trans. W.H.S. Jones, Loeb Classical Library, 1923.) The body, or at least its interiors, is thus created out of a process that includes observation and imagination, out of seeing and seeing with the mind. The medical writers harness existing (philosophical and "common-sense") ideas about how the world should work and apply them to what they have seen, or what has been reported to them as existing, in the body's interiors. The body is

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113 Holmes, 2010, 17
114 Galen, De Optimo Medico Cognoscendo 6.9, on the dissection of an ape; Galen, De Anatomicis Administrationibus 7.10, on the dissection of an elephant.
thus a collaborative, created intellectual project, and for the medical and philosophical writers, contested ground.

But, as we can sum up: relatively few persons in antiquity were physicians, or educated in the medico-philosophical tradition. While the interiors of animal bodies were readily available to view, relatively few persons would have access to the physicians' "eye of the mind." Their understanding of their bodies' interiors would thus have been different to the understandings which have been preserved in the medical texts. Their understandings of their bodies' interiors may well have remained as a cavity, hidden and mysterious: open to supernatural as well as physical manipulation.
Chapter Three: A Panhellenic Asklepieion

The sanctuary at Epidauros is one of the oldest, as well as one of the largest, cult centres of Asklepios in Greece. Since 1988, it has also been a UNESCO World Heritage Site.

This chapter examines the archaeological remains at the site itself along with the iamata, the famous Epidaurian miracle inscriptions, in order to put together a coherent picture of the site's physical structures and its presentation of itself to its visitors in the ancient world. Building on that base, it will then discuss movement through, and the sensory experience of, the sanctuary. The next chapter will look at the small civic sanctuaries of Asklepios at Corinth and Athens for comparison, before discussing the impact of the spatial and sensory experience of the sanctuary itself on the visitor's interaction with and experience of religious healing in the cult of Asklepios.

The Relationship between the City and the Sanctuary

The polis of Epidauros is no great ancient city like Athens or Hellenistic Alexandria, but one of the dozens of smaller city-states that dotted Greece in antiquity. Its main industries would have been farming, fishing, and viticulture, and it most likely produced enough foodstuffs to support its population. The land on the coastal plain is today still extremely productive, and it is probable that in many years the hinterland of polis produced a surplus. Trade was not
abundant: the polis did not strike its own coins until the middle of the 4th century BC, and Aiginetan, Corinthian, and Athenian coinages dominate the building records of the sanctuary. The building schemes of the sanctuary in the 4th century BC and the 2nd century CE, which imported a large amount of foreign stone, probably provided the port of Epidaurus with a significant boost to business.

The city itself lies about 8km distant in a straight line from the sacred grove of Asklepios, perhaps twice that by road. At a moderate walking pace, to travel the distance by road would take between three and four hours. A trotting horse could cover it in a little over an hour. This is no great distance, but its fact means that the sanctuaries of Apollo Maleatas and Asklepios are by no means as integrated into the immediate visual landscape of the city as, for example, the sanctuaries of Athena at Athens or of Apollo at Corinth. However, the evidence suggests that despite the journey between their locations, the sanctuary of Asklepios occupied a central social and religious position in the life of the polis, and the state of Epidaurus (an oligarchic state with a small governing class) exercised a similar degree of control over the Asklepieion to that exercised by Athens and Delphi over their sanctuaries. There is evidence for the setting up of civic decrees and public records within the sanctuary, and while the priest of Asklepios was the chief official of the sanctuary, he exercised his control over the sanctuary's affairs in tandem with the phrourarchos, a senior military official analogous to the Athenian strategos. During the 4th century building programme, a board of hieromnamones was appointed by the Epidaurian state

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117 Plutarch, Moralia II.291.d
to control the financial affairs of the sanctuary, like the Athenian treasurers for the acropolis.118 The administration of the sanctuary, according to the analysis of Alison Burford, remained under the purview of the Epidaurian state, even when that state came under the influence of other Greek poleis such as Argos.

It seems clear that the festival of Asklepios at the Epidaurian sanctuary had taken on an international aspect from at least the early 5th century BC. There is fragmentary evidence for theoroi, the sacred ambassadors who travelled around to other cities to announce the festival, after 370 BC, and records of the thearodokoi who received them in the cities they visited and responded to their announcements [IG IV(2) I 94, 95] and grants of proxenia [IG IV(2) I 96, IG IV(2) I 48-58]. A proxenos was a public guest, a citizen representing a Greek community in another Greek state.119 We know the theoroi visited Megara, Athens, Thebes, Thessaly, Macedon, Thasos, and Thrace, as well as Corinth, Delphi, Amphissa, Naupaktos, Kalydon, Leukas, Epiros, Kerkyra, Molossia, and some of the cities of Sicily and southern Italy. The thearodokoi included Perdikkas of Macedon, Dion of Syracuse, and Hiketas, the tyrant of Leontinoi, from which we must conclude that the Asklepieion at Epidauros had contacts of no small influence in the 4th century BC.

The Location of the Sanctuary of Asklepios at Epidauros and Early Cult on the Site.

In the Augustan period, Strabo wrote of Epidauros:

"[It] is an important city, particularly because of the fame of Asclepius, who is believed to cure diseases of every kind and always has his temple full of the sick, and also of the votive tablets on which the treatments are recorded, just as at Cos and Tricce. The city lies in the recess of the Saronic Gulf, has a circular coast of fifteen stadia, and faces the summer risings of the sun. It is enclosed by high mountains which reach as far as the sea." (Strabo Geography 8.6.15. Trans. H.L. Jones, Loeb Classical Library, 1924.)

The Asklepieion at Epidauros, or as Pausanias calls it, the "sacred grove of the god" (Pausanias, Desc. Gr. 2.27.1, author's translation), rests at a distance of approximately fifteen kilometres by road, as we have already noted, from the ancient city of Epidauros. It is located on a short plain surrounded by hills, at the head of a valley which opens to the west, and less than a kilometre south of the head of a narrower valley which travels north and east to the polis of Epidauros on the coast. It lies in the heart of the Argolid, a region that today, as in antiquity, is home to numerous olive groves. East-north-east of the sanctuary, on the slopes of Mt. Kynortion, one may find the sanctuary of Apollo Maleatas, a god also associated with healing and whose presence in the vicinity, it is
reasonable to suppose, gave symbolic support to the birth myths of Asklepios ascribed to this region which are recounted by Pausanias.

The slopes of Mt. Kynortion overlook the sanctuary. These slopes are home to the remains of an Early Helladic II house on the same site as the later (Archaic-Classical) sanctuary of Apollo Maleatas. Vassilis Lambrinoudakis considers that the site of Apollo Maleatas may have had a sacred character as early as the Middle Helladic period. In the late Middle Geometric, a new open-air altar was built directly on top of the ruins of the Late Helladic altar. The expansion of the cult of Apollo in the 6th century BC, and its association with Apollo's half-human son Asklepios, probably led to the foundation of the cult centre in the plain which grew into the sanctuary of Asklepios. A road led between the Mt. Kynorton shrine of Apollo Maleatas and the sacred grove of Asklepios. Also on the slopes on Mt. Kynorton, between the sanctuary of Apollo and to the north-east of that of Asklepios in the plain, were constructed dwelling houses which are known from inscriptions.

The earliest structures in the sanctuary on the plain, as opposed to the slopes of Mt. Kynorton, are a sacred well which was incorporated in the Enkoimeterion, and an open-air altar over which Building E grew up. In the ashes of this altar were found dedications inscribed to Apollo and other material dated to the 6th and 5th centuries BC. Apollo's cult may have existed here even earlier, since Kavvadias, the site's first excavator, removed most of the earth fill


\[\text{Burford, A., 1969, The Greek Temple Builders At Epidauros, Liverpool University Press, Liverpool, 78.}\]
from the altar without recording all the pottery found within it. The supplementary excavations of Lambrinoudakis in 2001 show that Building E's genesis as a building dates to the 5th century BC, with the enclosure of the altar in a rectangular court. The north and east sides of this court possessed narrow stoas. A paved floor was cut by a water channel which exited through the south wall. Lambrinoudakis interprets other floor cuttings as sockets for either a) a couch and a round table, or b) the three feet of a large table and another cult implement, features which "show that the cult in this place [Building E] was identical to the one attested in the Sanctuary of Apollo Maleatas."124

Whatever god lies behind the beginnings of the sanctuary and cult structures on the plain, however, it is clear that by the late Classical period Asklepios is its major figure. It is in this period, the 4th century BC, that the sanctuary becomes truly monumental. During this time the major cult buildings of the sanctuary - the Temple, the Altar, the Stoa of the Abaton, the Tholos, and the Propylon - take on the outline that they would keep for the next half millennium. In the following pages, I will give a diachronic overview of the archaeology of the main buildings as one would encounter them if one approached from the monumental entrance off the Argos-Epidauros road.

The monumental entrance, the Propylon, is also referred to as the Propylaia. It is situated at the sanctuary's northern boundary. Here, the ancient roads from Argos in the south and Epidauros in the north reach the sanctuary. The Propylon is aligned north-south on rising ground. A peak is visible to the north-north-west, and a low hill to the west. The sanctuary proper lies directly to the south, approached up a shallow rise: more hills rise south beyond the sanctuary.

123 Lambrinoudakis, 2002, 216
124 Lambrinoudakis, 2002, 219
The construction of the Propylon is dated between the latter half of the 4th century BC and the earliest part of the 3rd century. Rectangular in form, it is built on a three-stepped platform, with access from ramps on the north and south sides. On these, which are the short sides, the ground plan is slightly widened. Six Ionic columns across these sides would have provided the impression of an Ionic temple as one approached. The roof was pitched, with pediments on the north and south facades, adding to the impression of a temple. The interior possessed a Corinthian peristyle of fourteen columns. Benches on which the visitor could sit were constructed along the east and west walls.

The Propylon gives access to an avenue leading up the shallow rise to the main sanctuary complex. The width of this avenue, as given by walls discovered during excavation, is 17.35m. These walls are of unequal distance from the sides of the Propylon, and the eastern wall is of later construction than the western: it is therefore possible that the figure of 17.35m does not reflect the width of the avenue throughout the entire duration of the sanctuary's occupation.

One emerges from the Propylon into the sanctuary facing south. A well on the western (right-hand from the entrance) side of the avenue lies a dozen paces from the base of the Propylon ramp. The upper part of the well consisted of four limestone blocks, forming a square. In the centre of the square was a circular opening for drawing water. This well dates from the late 6th or early 5th centuries BC. It is thus contemporary with Building E, in the earliest phases of the Asklepieion, and predates the monumentalisation of the sanctuary entrance. Here, prior to approaching the main square of the sanctuary, supplicants and visitors to the Asklepieion performed the ritual purificatory ablutions standard on entering any sanctuary in the ancient world. But at Eidauros, the idea of
purification was of especial importance: Porphyrius in _On Abstinence_ II.19 tells us of an inscription set up (perhaps at the Asklepieion, although the exact place is not specified) that read: "It is necessary for the one who enters the sweet-scented temple to be pure (ἀγγών): for purity is to have holy things in mind." (Edelstein & Edelstein #318.)

Fifty paces from the Propylon, at the breast of the shallow rise, the so-called "Sacred Square" of the sanctuary opens out in front of the visitor. To the east, left-handed from the approach, lies the Stoa of Kotys, a 3rd century BC stoa constructed for the purpose of commercial activity. The Stoa of Kotys would have housed vendors selling their wares. These probably included small votive offerings, live cocks and pigs for sacrifice, and most likely food and drink too. To the west, across from the Stoa of Kotys, lies a 4th century BC temple identified as a temple to Aphrodite and Themis, which is also mentioned by Pausanias (_Desc. Gr._ 2.27.5).

The archaeology of the central area of the Asklepieion is complex, incorporating several deities and multiple structures, with a history of change over time. (See Plate 3 for a simplified plan of the central temenos area. Plate 4 for a sketch of movement.) The discussion of these structures will be divided into three, partly based upon placement within the temenos, and partly based upon centrality to the functions of the cult. Our first section, thus, discusses the Altar of Asklepios, the Temple of Asklepios, the Enkoimeterion (Abaton), the Tholos/Thymele, and associated features; our second section discusses "Building E," the Temple of Artemis, the Hestiatorion (formerly known as the Gymnasium), and sundry other altars; while our third section encompasses the Stadium, the Katagogion, and the Theatre.
Section I

The Altar

The Altar of Asklepios is aligned lengthwise on a north-south axis, which puts it on the same axis as the Propylon. A paved path connected it with the Temple, to whose early 4th century BC construction it is contemporary. It possessed a monumental marble parapet, and evidence suggests that part of the altar was covered by a roof or an entablature, as cuttings for posts are preserved at the south ridge of the altar. This part of the altar appears to be the section on which sacrifices were burned.

Unlike the Altar, whose long axis is aligned north-south, the Temple, Tholos/Thymele and Enkoimeterion were not built along the same axis as the Propylon. These structures, instead, are offset to the west, with their long axes in a general east-west alignment. This alignment means that the Temple and the Tholos both face the slopes of Mt. Kynortion and the sanctuary of Apollo Maleatas, approximately a kilometre distant. It seems that the sanctuary of Asklepios on the plain and the sanctuary of Apollo Maleatas on the hillside were conceived of as a unified shrine: while the formula "sanctuary of Apollo Maleatas and Asklepios" does not occur in inscriptions before the 1st century CE, dedications to "Apollo and Asklepios" are not uncommon after the 4th century BC, and the iamata are attributed to both "Apollo and Asklepios," so the alignment of the Temple and the Tholos is a deliberate choice which evokes the relationship between the cult centre of Asklepios and that of his divine parent, Apollo, with whom he is associated as a healer.

125 Lambrinoudakis, 2002, 223
The Temple

The Temple of Asklepios lies west of the altar. Its surviving outline dates from the high point of the sanctuary's building programme, during the 4th century BC. Theodotos, the architect, supervised the construction between 380 and 375 BC. Doric in order and elevated on a crepidoma, it measured 24.3m by 13.2m with a peripteral colonnade of six columns on the short sides and eleven columns on the long sides. Local poros stone provided the building materials, with a finish of white plaster. Instead of steps, a ramp gave access to the portico from the east. One passed from the colonnade through two columns in the entrance to the temple vestibule, and thereafter through the temple door into the interior of the cella. The metopes carried relief rosettes, a decorative element which would also be taken up by the Doric colonnade of the Tholos. The gutters of the cornice possessed lion's-head spouts and palmettes, with boar's-head spouts at the corners. The corner boar's-head spout is a decorative feature shared with the Temple of Artemis. The interior of the cella possessed engaged columns on both long sides and on the western short side. At the western end of the cella stood the cult statue of Asklepios designed by Thrasymedes, which Pausanias references in his Description of Greece:

The image of Asclepius is, in size, half as big as the Olympian Zeus at Athens, and is made of ivory and gold. An inscription tells us that the artist was Thrasymedes, a Parian, son of Arignotus. The god is sitting on a seat grasping a staff; the other hand he is holding above the
head of the serpent; there is also a figure of a dog lying by his side. On the seat are wrought in relief the exploits of Argive heroes, that of Bellerophon against the Chimaera, and Perseus, who has cut off the head of Medusa. (Desc. Gr. 2.27.2. Trans. Peter Levi, Penguin Classics, 1979.)

It appears that the statue had ivory hands and face, with arms and torso probably also made of ivory but perhaps of gold over a wooden frame; bronze pins would have fastened the gold and ivory plates to a wooden core, and glass would have been used for the eyes. From epigraphic evidence, the statue was treated with dyes and pigments: white lead, maroon, red and purple; and draped in linen.\textsuperscript{127}

The temple appears to have been paved in black and white stone. Its ceiling and roof timbers were built of silver fir, and cypress, boxwood, elm, nettle-tree wood, ivory and gold went into the construction of the doors.\textsuperscript{128} A. Defrasse and H. Lechat attempted reconstructions of the decorative schemes first in 1895.\textsuperscript{129} The pedimental sculpture, the remains of which are now in the National Archaeological Museum at Athens, draws on what are relatively standard decorative schemes for a Greek temple, with the east pediment portraying the fall of Troy, and the west pediment portraying an Amazonomachy. Other temples whose sculptural decoration incorporates battles between Greeks and Amazons include the Athenian Parthenon (west metopes), interior frieze at the temple of Apollo at Bassae, and the temple of Artemis in Magnesia, among

\textsuperscript{127} Burford, 1969, 60
\textsuperscript{128} Burford, 1969, 57
\textsuperscript{129} Defrasse, A. & Lechat, H., 1895, Épidaure: restauration & description des principaux monuments du sanctuaire d'Asklepios, Quantin, Paris, 49-80.
others, while sculptural decoration involving the Trojan War is even more common. Nikai and Nereids on horseback adorn the acroteria. The Temple of Asklepios at Epidauros is not, then, particularly unusual as Classical temples go. The representation of an Amazonomachy, with an Amazon queen - often identified as Penthesilea - taking a spot at the centre, recalls the death of Machaon, the son of Asklepios, who died in the battle with the Amazons at the siege of Troy. The Trojan War scenes also recollect the participation of the sons of Asklepios in the Greek world’s most famous mythic conflict: we can see the sculptural decor as celebrating local heroes and their connection to the wider Greek world and its triumphs, not just simply repeating common motifs.

Its south-western neighbour, the Tholos, is somewhat more unusual.

The Tholos

The Tholos, or the Thymele as it was known to its contemporaries, is one of the most puzzling circular structures of Greek antiquity. Construction was begun c.365-360 BC, approximately five to ten years after the completion of the Temple. It is the largest peripteral tholos of antiquity, and took over thirty years to finish.

Standing west of the Temple of Asklepios, and south of the Enkoimeterion, it consisted of an outer Doric colonnade of twenty-six columns surrounding a cela. Ionic elements and decoration enhanced the Doric colonnade, and inside the cela stood a second, free-standing Corinthian colonnade of fourteen columns. The crepidoma rises on three steps, and is proportionally low vis-à-vis

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height and width, especially when compared to the tholos at Delphi. A maze stood among the foundations, under the cella floor, and a conical roof capped the structure. Votives and exedrae were erected in front of the Tholos - that is, to the east of the Tholos, at the rear of the Temple.

The sanctuary was sacked in 86 BC by Sulla, and again in 80 BC by Cilician pirates. It either took relatively little damage, or the damage was quickly repaired, as two centuries later Pausanias speaks of the Altar, the Temple, and the chryselephantine statue. Be that as it may, however, between the 4th century BC and the 2nd century CE, the Tholos suffered some decay. By the time the Roman senator Antoninus put part of his fortune at the sanctuary's disposal for repairs and new building, the Tholos was in need of some restoration: at this time, the Classical retaining wall was replaced with masonry containing cast concrete, and the steps repaired.\footnote{Committee for the Preservation of the Epidauros Monuments, \textit{The Propylon of the 'Gymnasion' and the Tholos in the Asklepieion at Epidauros}, Athens, 1988, 226.}

The foundations are of local poros stone, with the visible parts of the crepidoma and the ramp using travertine covered with plaster and stucco. The floor of the Doric colonnade used hard fossiliferous limestone - "pinkish limestone" - from the ancient quarry at Theokausta. The floor beams of this colonnade used local grey limestone. For the bases of the orthostats, the floor slabs of the Corinthian colonnade, and most likely also for the threshold and the floor of the interior, Pentelic marble and Argive black stone from the quarry southwest of Argos were used. The circular area contained with the Corinthian colonnade - that is, the floor directly over the "maze" - was tiled with lozenges and triangles of Pentelic marble and Argive black stone.
The gutters of the Doric cornice were adorned with lion's-head spouts and palmettes, while the metopes were embellished with relief rosettes. The interior and exterior walls of the cella were decorated with marble, Argive black stone, relief palmettes, astragals, and cymatia. The peristyle roof was coffered, and the coffers bore acanthus flowers in delicate relief. The interior Corinthian colonnade supported a frieze and a cornice carrying a meander pattern and egg-and-dart moulding. According to Pausanias (Desc.Gr. 2.27.3), the painter Pausias was responsible for a painting on the interior.

The above-ground elements of the structure formed an elegant, harmonious whole. We know that the ancient Greeks used coloured paint on the decorative facets of religious architecture, so it is likely it also formed a colourful whole, as well.

The below-ground elements also form a whole, but one whose purpose is much debated. The "maze" was originally constructed on the bedrock, and then covered in, so that the Tholos stands on a hollow artificial terrace retained to north with a poros wall against the western extension of the Enkoimeterion. Six concentric rings of poros limestone blocks form the foundations of the Tholos. The centre of these rings is the geometric centre of the building. The three outer foundation rings support the Doric colonnade, the cella wall, and the Corinthian colonnade, while the three inner rings perform two functions: they support the central flooring, and they form the "maze" or "labyrinth." In these three rings, there were openings between each ring segment, and block partitions within the rings, forcing one to pass the full length of all three rings in order to access the interior of the central ring. These blocking partitions were constructed on a straight line 0.3 metres north of and parallel to the east-west

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133 Lambrinoudakis, 2002, 223
axis of the Tholos. The openings between the rings average 0.6 metres in width and 1.62 metres in height, too low to permit a full-grown man of average height to walk through upright. The threshold of the openings is the wall footing, while the lintel is a pseudo-arch in the upper ashlar course. In the interior of the central ring, excavation uncovered traces of a construction of unknown form and function.\textsuperscript{134}

The precise function of the Tholos is unknown. The word \textit{θυμέλη}, of course, means an altar or a place for burning, and is used especially of the altars of Dionysos which stood within the orchestra of a theatre. It has thus been used to mean a stage or a stage-performance.\textsuperscript{135} Perhaps the Tholos at one point represented a location at which certain performances took place, or one where rituals were performed. By the time of Pausanias, it seems to have become a place for the display of the \textit{iamata}, and of paintings by Pausias. While several theories\textsuperscript{136} have been suggested concerning its original purpose, nothing more can be said with any certainty.

**The Enkoimeterion**

The Enkoimeterion lies directly north of the Temple. It is a colonnade of approximately 74 metres, whose long axis is aligned east-west. It forms the northern boundary of the main sacred precinct. While it parallels the Temple to an extent, it extends farther west, and in this western extension it is built over two levels and abuts a spring; to the east is a small structure that includes basins

\textsuperscript{134} Committee for the Preservation of the Epidauros Monuments, \textit{The Propylon of the 'Gymnasion' and the Tholos in the Asklepieion at Epidauros}, Athens, 1988, 253.
\textsuperscript{135} LSJ s.v. \textit{θυμέλη} II, IV.
\textsuperscript{136} Committee for the Preservation of the Epidauros Monuments, \textit{The Propylon of the 'Gymnasion' and the Tholos in the Asklepieion at Epidauros}, Athens, 1988, 254; Burford, 1969, 66-68
and may have been used for bathing which adjoins the Roman library. At this eastern end of the Enkoimeterion, the 4th century structure accommodates an earlier Archaic well within its plan. The remains under the Enkoimeterion near this well include a small stoa with a mudbrick superstructure, oriented to the south, associated with a levelling of the rock around the earliest opening of the well, dated to the 6th century. This 6th century stoa and well may indicate early use of this space for sacred bathing and incubation, and this phase is sometimes referred to as the Hieron Loutron.

The Enkoimeterion was built in two phases during the 4th century BC. The first phase, the eastern ground-level section, was built contemporary with the completion of the Temple. This section was divided in two, defined by a façade of seventeen Ionic columns to the south and a rear wall to the north. Between these, another wall separated off the back area of the stoa, providing a dark, enclosed space.

The second phase dates from the late 4th or early 3rd century BC, and consists of an expansion of the stoa to the west. The terrain slopes away in this direction, and the existence of a drop in ground level led to the construction of two storeys in the western expansion. A lower ground floor was built, to support the extension of the original stoa. (See Plate 8.) The upper western floor extended the Ionic colonnade to a total length of thirty-one columns, crowned with a Doric entablature. High stone screens occupied the intercolumniations. (See Plate 9.) The lower western floor had a façade of eleven columns with two engaged columns, also screened, with the exception of openings for the entrance; within, a central line of six Doric columns provided support for the

137 Lambrinoudakis, 2002, 219
upper floor, and stone benches lined the walls. Some votive reliefs have been recovered from this area. A set of monumental steps, adjoining and paralleling the point of contact between the phases at the south, draws attention away from their differences. The Enkoimeterion survived in this form until the late 4th century CE.

Other Associated Structures:

Baths of Asklepios

During the Classical period, a rectangular bathhouse lay at the north-east end of the Enkoimeterion. This was rebuilt in the Roman period to encompass a structure incorporating a library and a bath complex, identified as the "Baths of Asklepios," which Pausanias tells us were built under the aegis of Antoninus, an otherwise unidentified Roman senator (Desc.Gr. 2.27.6). Lambrinoudakis's excavations have highlighted the relationship between this bath complex and the temple. At the front of the Temple stood a bronze statue of the god, whose base remains in place. Water was carried through underground pipes from the eastern part of the sanctuary to the base of the statue, where it circulated around the statue into a round basin. From this basin, partly through underground and partly through above-ground pipes, the water was brought north to a deep basin adjacent to the south front of the "Baths of Asklepios," where it appears to have been used for bathing.139 The association of the purificatory water, the statue of the god Asklepios, and the Enkoimeterion, bear on the experience of the supplicant, and I will return to this point.

139 Lambrinoudakis, 2002, 219
Sacrificial Altars

A. Petropoulou has discussed the case of preliminary sacrifice (*prothysis*) for those about to undergo incubation in the case of Asklepios at Epidauros.\(^\text{140}\) There are a number of altars which Petropoulou identifies for the dedication of *prothymata* (that is, bloodless preliminary offerings) in the central area of the temenos, dating from the 5th to the early 3rd century BC. Following the classification of G. Roux, they are divided into two types, "l’autel appareillé de style rustique" and "l’autel cubique a table épannelée." These may be classified in three groups of different alignments. The first group, of the former type, is east of the southern end of the Altar, and the evidence suggests that the base was meant to be accessed from the east.\(^\text{141}\) That is, from the direction of approach from the sanctuary of Apollo Maleatas on Mt. Kynortion. A second group of twelve grey limestone altars of the latter type run for 14.2m along the eastern side of the road east of Building E. From these altars, the 4th century Altar lies north-northwest.\(^\text{142}\) A third group of altars of mixed type were most likely located along the Sacred Way leading up to the Temple.\(^\text{143}\) This last group was contemporary with the construction of the Enkoimeterion.\(^\text{144}\) These altars remained in use until at least the 3rd century CE.\(^\text{145}\)

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\(^{140}\) Petropoulou, 1991


\(^{142}\) Rupp, 1978, 168, 172-173, 174-175, 179, 183, 197, 199-201, 203-206

\(^{143}\) Rupp, 1978, 192

\(^{144}\) Petropoulou, 1991, 28-29

Other Structures

South of the Temple, eastward of the Tholos, are the remains of at least three treasuries from the early 4th century BC. Behind these, outside the Late Roman (4th century CE) enclosure wall of the main sanctuary area, a Roman-period stoa with baths defined the north boundary of a loose square on whose eastern side lies the 2nd century CE Temple to Asklepios and the Egyptian gods, possibly also built by Antoninus (Pausanias, Desc. Gr. 2.27.6).

Section II

Building E.

Building E has also been referred to as the "Building of the Mysteries." For clarity's sake, we will refer to it as Building E. It stands on the east edge of the main Asklepieian sacred precinct, south of the Temple. As mentioned in the introduction to this chapter, the archaeological evidence suggests that the first structure on this site dates from the 6th century BC, and contained the first ash altar for sacrifices within the sanctuary. This early structure seems to have been contemporary with the Archaic well which was incorporated into the plan of the Enkoimeterion. Together the well and the ash altar most likely formed the two focal points of the early cult on this site.

In the introduction to this chapter, I referred to the excavations directed by Lambrinoudakis, who highlights the similarities between Building E and cult installations at the sanctuary of Apollo Maleatas. The early Classical phase of Building E lasted until the Hellenistic period. It possessed features associated with eating, probably ritual dining: a perimetric channel with running water to

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146 Lambrinoudakis, 2002, 217
carry away dirt and cuttings in the floor for a table or table and couch, the stoas, which provided shelter for the diners, and a layer of small stones on the floors of the stoas and the court around the altar, which would have made the ground harder and easier to clean.\textsuperscript{147} Its developed (Hellenistic-Roman) form consisted of a rectangular building 24.3 m by 20.7 m, with a perimeter colonnade and halls on the north, south, and east sides. The northwest corner contained a shrine to Apollo, while the central area appears to have remained open to the air, containing the small altar. I am inclined to follow Lambrinoudakis' interpretation of Building E as an area for ritual dining. I suggest that Building E represents a more exclusive dining area than the Hestiatorion, and perhaps one that represented a junction of the cult of Apollo and the cult of Asklepios, as indicated by Building E's orientation towards the slopes of Mt. Kynorton.

**The Temple of Artemis**

The Temple of Artemis stands just outside the Late Roman enclosure wall of the main precinct, 5 m south of Building E. It is built over the foundations of an earlier structure, one of a series of four similar buildings which predate it and extend to the west, which have the same orientation as Building E.\textsuperscript{148} Another 4\textsuperscript{th} century BC foundation, the Temple of Artemis is a small prostyle temple with a portico of six Doric columns, a pronaos, and a cella. It measured 13.5 metres by 9.6 metres, and is oriented east-west, with its entrance to the east. Within the cella, a colonnade of twelve Corinthian columns followed around the north,

\textsuperscript{147} Lambrinoudakis, 2002, 216-219. F. Robert, in "L'Édifice E d'Épidaure et la topographie du Hiéron d'Asclepios" (Bulletin de Correspondance Hellenique 57 (1):380-393 (1933)) previously suggested that the colonnades in Building E represented an early enkoimeterion/abaton, but as the excavations directed by Lambrinoudakis place the colonnades in the Hellenistic period, contemporary with the later Enkoimeterion, and as there is no well or spring within Building E (unlike the Enkoimeterion), we must consider this unlikely.

\textsuperscript{148} Lambrinoudakis, 2002, 220
west, and south walls. The statue of the goddess would have been framed centrally by the four columns against the west wall. Poros was used for its construction, with sima and tiles of marble. While the decorative scheme of the pedimental sculpture is unknown, three complete Nikai from the acroteria survive in the Epidauros Museum. The gutters of the cornice were adorned with dogs'-head spouts and palmettes, with boars-head spouts at the corners. It possessed a small altar of its own in front. There is a partial reconstruction on display in the Epidauros Museum.
The Hestiatorion

The Hestiatorion lies in a direct line south of the Temple of Artemis, outside the Late Roman boundary line of the central sacred precinct. Its date of construction has been confirmed as c. 300 BC from the pottery infill in the foundation bedding.\textsuperscript{149} Measuring in total 75.36m by 69.53m with a monumental propylon, it is set off centre towards the east of the south part of the temenos proper and projects beyond it.\textsuperscript{150} The main building consists of a central peristyle court, 33.12 metres by 33.12 metres. Each side of the colonnade possesses sixteen Doric columns, with a double colonnade to the north. There is thus a stoa on each side, with a double stoa to the north. These stoas give access to seventeen rooms of various sizes. The rooms correspond only in isolated cases. Poros was used for the foundations, with limestone for the lower courses. The excavators assume that the upper courses were built of unbaked brick.

The propylon is situated in a direct line with the west stoa of the peristyle and communicated with three rooms. There are two identical rooms at the edges, 9.94m by 6.03m, one immediately west of the propylon, and a larger one in the middle, 38.55m by 6.03m, which has a square projection on its north side. This large room and the second smaller room lie east of the propylon. The propylon itself lies more-or-less on the same line as the Sacred Way from the Propylon. Its columns, entablature, ashlar masonry were of hard poros stone, with a plaster covering. Wood was used for the ceiling, and the tiles were of clay. One ascended to the propylon via a ramp on the middle of the north side, measuring

\textsuperscript{149} Committee for the Preservation of the Epidauros Monuments, \textit{The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros}, Athens, 1988, 22.
\textsuperscript{150} Committee for the Preservation of the Epidauros Monuments, \textit{The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros}, Athens, 1988, 21.
4.20m by 7.65m with a 13% gradient. The Hestiatorion propylon had a column height of approximately 7.2m and a pitched roof. It postdates the construction of the rest of the Hestiatorion by at least a constructional phase, as it was built after the foundation of the walls of the north side of the Hestiatorion\textsuperscript{151}.

A full description of the interior layout of the Hestiatorion may be found in The Propylon of the "Gymnasium" and the Tholos in the Asklepieion at Epidauros and in Tomlinson's Epidauros. The interior arrangements encompass several rooms with evidence for couches, as well as courtyards that may have been used in ritual processions.\textsuperscript{152}

Excavation revealed that pits from an earlier use of the area, possibly associated with hearths and temporary wooden structures, were sealed over and went out of use after the construction of the Hestiatorion. However, the excavators identified hearths dating from the late 4\textsuperscript{th} century/early 3\textsuperscript{rd} century BC at the inner northwest and the inner southwest corners of the peristyle, lending credence to the idea that this space was used for ritual or associated with dining.\textsuperscript{153}

Some evidence suggests that the Hestiatorion complex suffered destruction by fire during the 1\textsuperscript{st} century CE. We do not know for certain whether it fell into disuse, but during the 2\textsuperscript{nd} century CE a building identified as an Odeon was built in the northern part of the peristyle court, incorporating material from the Hestiatorion. There is some suggestion that the cavea of the Odeon dates from the 3\textsuperscript{rd} century CE and thus comprises a later phase, but this is uncertain. Certainly most of the Hestiatorion went out of use after the construction of the

\textsuperscript{151} Committee for the Preservation of the Epidauros Monuments, The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros, Athens, 1988, 36-37
\textsuperscript{153} Committee for the Preservation of the Epidauros Monuments, The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros, Athens, 1988, 32
Odeon, but pottery evidence attests that the northern rooms continued in partial use until the Late Roman period.

Kavvadias identified the pre-Odeon structure as a gymnasium. However, Tomlinson, basing his opinions on the off-centre setting of the entrances to several rooms, and the presence of stone supports for benches in the large halls of the east and south sides, makes the case that it was a hestiatorion associated with the cult. He suggests that diverse rituals took place in the open court, and that these rituals were later housed in the Odeon. The Committee for the Preservation of the Epidauros Monuments in The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros supports his interpretation, as does Lambrinoudakis, who holds that in addition to being used for ritual dining, as attested by the couches and the remains of meals in the fireplaces in the court, it was used for ritual processions as well.

There is convincing evidence for a cult installation towards the end of the 2nd century BC in the propylon. The propylon was then essentially an independent structure, due to the deterioration of the Hestiatorion and the construction of the Odeon. A continuous wall closed off the far end of the propylon, and a podium was erected in the centre of the room created by the addition of this wall. An altar was constructed - externally - on the axis of the façade, a small-scale version of the sacrificial type. According to the excavators, this cult installation was most probably dedicated to Hygieia, but it does not seem to have drastically changed the form of the building.

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155 Lambrinoudakis, 2002, 223; Committee for the Preservation of the Epidauros Monuments, 1988, 32
156 Committee for the Preservation of the Epidauros Monuments, The Propylon of the 'Gymnasium' and the Tholos in the Asklepieion at Epidauros, Athens, 1988, 38. See Plate 17 for a depiction of Hygieia from Epidauros.
Dining in the Sanctuary of Asklepios

We do not actually know much about the practice of dining within the sanctuary. We know that it took place, for according to Pausanias the sacrificial offerings had to be consumed inside the sanctuary (Desc. Gr. 2.27.1), and the ground plans of the Hestiatorion and of Building E argue that communal feasting took place on both relatively large and small scales. We do not know how often communal dining may have taken place, nor how food at these dinners may have been apportioned, nor indeed have we more than a vague idea of who in particular participated in such communal dining. We do not know, for example, if sick visitors and healthy ones ate together or separately. It is reasonable to assume that communal feasting took place especially during major festivals at the sanctuary, and during the competitions, athletic and otherwise, in honour of the god, comparable to the communal dining that we know took place at Olympia during the games. We do not know if this communal dining included the theatrical/performative elements known from the public banquets of the Hellenistic and Roman periods, nor if they included the kinds of entertainment attested at the symposia of the Classical and Hellenistic elite - pipers, cithara players, girls and boys who dance, throw hoops or knives, somersault in and out of circles of swords, fire-eaters, singers - but we should not envision the communal dining experience in the Asklepieion as a necessarily staid or sedate occasion, but a potentially riotous one, as rowdy as any symposium. Potentially, too, crowded, as wealthy visitors and supplicants would have been attended by their own slaves, many of whom

158 Jones, 1991, 190-191
would undoubtedly have attended them at dinner. (The emperor Claudius is reported to have brought his own waiters to dinners in the residences of other elite Romans;\textsuperscript{159} while not rising to the level of the emperor, the very wealthy throughout history have travelled with significant retinues to mark their status and cater to their whims.)

\textit{Section III}

The Stadium, Katagogion, and Theatre are widely separated around the periphery of the main temenos area. The Stadium and associated athletic buildings lie west and south of the main sacred area, while the Katagogion lies east and south, to the southeast of the Hestiatorion. The Theatre is even further to the southeast, backing onto the slopes of Mt. Kynorton. What these installations have in common is that they all originally date from the 4\textsuperscript{th} century BC, and none of them are, strictly speaking, \textit{essential} cult structures.

\textbf{The Stadium}

The Stadium, used for athletics competitions, is of rectangular shape with a width of 23m, and total length of 196.44m, of which 181.3m formed the running track. The track was surrounded by a rainwater channel for drainage, and pillars along the sides marked every 32m. Initially, as at Olympia and Nemea, in the early part of the 4\textsuperscript{th} century BC, spectators sat on earth embankments. Soon, however, stone seating was erected along the sides near the starting blocks. This

The cult of Asklepios 420BCE-200CE

The games at Epidauros, the Asklepieian Games, were held nine days after the Isthmian Games, in late spring or early summer. The reward of the Asklepieian Games was not only a crown, as at Delphi, Nemea, Olympia, or Isthmia, but a prize: they were chrematitic, rather than stephanitic festivals. Nor were participants here protected by a sacred truce. It included competitions in both athletics and music, but we have no evidence for horse-racing. We know that the athletics competition included a *stadion* race, a *pankration*, and a pentathlon: the Stadium is similar to others of its kind in Greece, and probably the programme of events included the typical events of a Greek athletic competition. The musical competition took place in the theatre.

Pindar mentions Epidauros twice, both in odes praising winners of the pankration at Nemea: in *Nemean 5*, Pytheas of Aegina, c483 BC, who had

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161 Miller, 2004, 132
previously won a double-victory in the pankration at Epidauros, and in Nemean 3, Aristokleides of Aegina, c475 BC, of whom he writes,

\[ \text{τίν \ γε \ μὲν, \ εὐθρόνον \ Κλεοῖς \ ἐθελοίσας,} \]
\[ \text{ἀεθλοφόρον λῆματος \ ἐνεκεν} \]
\[ \text{Νεμέας \ Ἐπιδαυρόθεν \ τῷ \ ἀπό \ καὶ \ Μεγάρων \ δέδορκεν} \]
\[ \text{φῶς.} \]

*Because well-throned Kleo willed it and because of your victorious spirit, the light has shone on you from Nemea and Epidauros and Megara.* (Author's translation.)

implying previous victories for this athlete at Epidauros and Megara. Epidauros was, it seems clear, a well-recognised stop on the inter-city athletics circuit, although its competitions never attained the fame of the Olympian, Pythian, Isthmian, and Nemean games.

### The Katagogion

The early Hellenistic period saw the construction of a hostel, a *katagogion*, for the use of visitors to the sanctuary. It is unlikely that this housed the very ill or - if it housed women at all - the very pregnant, since we know from Pausanias *(Desc.Gr. 2.27.1)* that supplicants were not permitted to die or to give birth within the temenos of the sanctuary. Although the Katagogion is outside the
Roman wall which enclosed the main sacred precinct, both it and the theatre were probably still considered to be within the "sacred grove."

The Katagogion was 76m square, and most likely of two storeys. It consisted of four square courts, onto each of which opened forty rooms. It thus possessed a total of one hundred and sixty rooms. To its west and north, a two-storey bath complex was constructed around the same time, the Greek Baths.\textsuperscript{162}

**The Theatre**

Of all the theatres of the ancient world, perhaps more has been written about that of Epidaurus than any other. Therefore, I will give here only a brief description. It lies on one of the northwest slopes of Mt. Kynortion. Its first phase dates from the late 4\textsuperscript{th} century BC, with an orchestra 20.3m in diameter, a central altar, and a cavea of thirty-four rows of grey limestone divided into twelve tiers with fourteen stepped gangways. It initially accommodated approximately 6,000 spectators. A second phase in the 2\textsuperscript{nd} century BC added the epitheatre behind the original cavea, with another twenty-one rows of limestone benches with twenty-two gangways, which increased the theatre’s capacity to somewhere between 12,000 and 14,000 spectators. These two sections were separated by a covered passage.

Two passageways giving onto the orchestra separate the scaena from the cavea. These entrances were possessed of doubled doorframes. Only the foundations of the scenae survive. It took the form of a hypostyle stoa. Piers support the back, and four square interior supports would have upheld the roof. There are double rooms at each end. The proscenium, 22m long and 3.17m

wide, possessed two small side wings, and fourteen Ionic half-columns along the façade. Between these columns were panels on which the stage scenery would have been painted. Pausanias recommends the theatre for its symmetry and beauty:

"The Epidaurians have a theatre within the sanctuary, in my opinion very well worth seeing. For while the Roman theatres are far superior to those anywhere else in their splendour, and the Arcadian theatre at Megalopolis is unequalled for size, what architect could seriously rival Polycleitus in symmetry and beauty? For it was Polycleitus who built both this theatre and the tholos." (Desc. Gr. 2.27.5. Trans. Peter Levi, Penguin Classics edition, 1979.)

The musical competition of the Asklepieian Games took place within the Theatre. As at the Pythian Games, it would have included competitions in playing the kithara and the flute, among other instruments, and competitions in drama and for recitation. The first lines of Plato's *Ion*, in fact, inform us that the festival of Asklepios included competitions in music and in the recitation of the epics.

Σωκράτης: τὸν Ἰονα χαίρειν. πώθεν τὰ νῦν ἡμῖν ἐπιδεδήμηκας; ἦ δικοθεν ἐξ Ἐφέσου;

Ἰον: οὐδαμῶς, ὁ Σωκράτες, ὄλλ᾽ ἐξ Ἐπιδαύρου ἐκ τῶν Ἀσκληπείων.
Socrates: Welcome, Ion. Where have you come from now, to pay us this visit? From your home in Ephesos?

Ion: Not at all, Socrates; from Epidauros and the festival there of Asklepios.

Socrates: Is it so, that the Epidaurians honour the god with a contest of rhapsodes also?

Ion: Of course, and of other sorts of music.

(Plato, Ion, 530a, author's translation.)

Other Structures

The structures discussed above are the most significant of those within the sanctuary boundary. It is important to bear in mind that there were several other buildings, including wells and cisterns. In the northeast corner, for example, east of the Stoa of Kotys, there is another bath complex of Roman date. North of the Hestiatorion, in the 2nd century CE building which housed the cult of the Egyptian gods, a small square structure with a central court, hearth, and bothros, mystery rites for Isis and Osiris probably took place. In the Roman period, too, a library stood north and slightly east of the Enkoimeterion. There is also an altar in the central area of the sacred precinct identified as an altar to Apollo.
Experience and Healing at Epidauros

I have outlined in the preceding pages the most important known points of the archaeology of the sanctuary and its relationship with its city. To speak about the experience of the sanctuary, it is important to know first, as clearly as possible, what is there. But measurements, gradients, types of marble and so on give us limited information about how the people who visited the sanctuary understood and experienced it.

It is not, of course, possible to reconstruct any single individual's experience with any degree of certainty or exactitude without detailed descriptions in their own words. Even then, real mastery of the symbolic and experiential system which they inhabit is not possible for an outsider: real mastery of the symbolic logic of any set of rituals and experiences is, as Bourdieu notes, only possible for a person who,

"is completely mastered by it, who possesses it, but so much so that he is totally possessed by it... And this is because there can only be practical learning of the schemes of perception, appreciation and action which are the precondition of all 'sensible' thought and practice, and which, being continually reinforced by actions and
discourses produced according to the same schemes, are excluded from the universe of objects of thought."\textsuperscript{163}

In other words, much of human understanding is comprehended without working through the process by which we arrive at logical, scientific "objective" knowledge. We learn the frameworks of our realities and the freight of meaning behind the symbols with which we are in regular contact by living through them. That is to say, by experience: a Christian may not think messiah-sacrifice-redemption-afterlife or god-church-sin-guilt upon seeing a cross, but the association(s) is (are) latent in the symbol, at a pre-conscious level. This is the grossest, most obvious of examples: our daily lives are full of symbols and practices for which each person has a slightly different set of associations, and which each person experiences in their own unique way. "Objective" knowledge, the measurement of data, has limited utility for understanding human experience.

If we cannot access a single individual's unique experience - and this is particularly the case for antiquity, where the nature of the evidence imposes certain limitations - we can, however, amass enough data on the aggregate of experiences to suggest \textit{ways} in which the encounter with the world as embodied within the sanctuary shaped individual experiences.\textsuperscript{164}

So let's start by talking about movement and space, and the way that movement, both occasional and habitual, shapes our experiences of the places


\textsuperscript{164} A number of studies have examined aspects of experience with regard to archaeological remains: see, for example, Jones, A. & MacGregor, G., 2002, \textit{Colouring the Past: The Significance of Colour in Archaeological Research}, Bloomsbury, London; and Watson, A., & Keating, D., 1999, "Architecture and Sound: An Acoustic Analysis of Megalithic Monuments in Prehistoric Britain," \textit{Antiquity} 73:325-336; or Houston and Stuart's work on body and experience among the Maya (Houston, S. & Stuart, D., 2006, \textit{The Memory of Bones: Body, Being and Experience among the Classic Maya}, University of Texas Press, Austin).
we move through. Movement and action, *practice*, is what creates social space: that is, the experience of being in places together with other individuals. The thing about built space, in contrast to the natural landscape, is that it is always and everywhere to some greater or lesser degree *staged*: its design is always purposeful, and movement through built space is always to some degree controlled or encouraged to take place along certain axes. Depending on the individual, the axes of movement may vary: the Important Visitor travels along one path; the Unimportant Servant may take another.

Today, the modern visitor approaches the site of the Epidaurian Asklepieion from the opposite side to its monumental entryway in antiquity; from the south, rather than the north-west. The carpark where buses disgorge their tourists is east and south of the site, behind the stadion: the modern entrance, beside the museum/visitors' centre, is sandwiched between the Theatre and the Katagogion, with the bulk of the sanctuary site as well as the slightly more distant sanctuary of Apollo Maleatas on Mt Kynortion to the north hidden by mature pine trees and the slope of the land. Essentially, the modern visitor enters the sanctuary back-to-front. In antiquity, from Epidaurus town to the sanctuary of Asklepios, the route came from the north and east, passing around the height of Mt. Kynortion, where the sanctuary of Apollo Maleatas lies, before reaching the path to the sanctuary's monumental entryway. The route that led from Epidaurus town to the Asklepieion is the same route that connected Epidaurus to Argos and the southern Argolid: most visitors to the sanctuary therefore would have been presented with a similar prospect on their arrival: a monumental entrance leading on to rising ground and the main sanctuary complex. Behind it, either visible or perhaps hidden by trees, the Theatre; and

further distant, on the rising slope of Mt. Kynortion to the north and east, the sanctuary of Apollo Maleatas, perhaps visible, perhaps hidden by foliage. Movement into the sanctuary is movement upward as well as inward, from this gate whose outward face points away from the direction of Epidauros town. Only if one approaches from the direction of the Theatre or Mt. Kynorton does one descend to approach the sanctuary itself - whereas one descends away from the main area of the sanctuary to the stadion to the south, and again when leaving by the monumental gate.

A visitor who arrived in the third century BC would visit a sanctuary that possessed most of the major structures for which evidence survives, but had not yet acquired several of its later embellishments -- like the Katagogion, or the temple to the Egyptian gods -- nor had it yet decayed from its fourth-century peak. Let us imagine a third century BC visitor:

The visitor pours water over their head from the well by the sanctuary perimeter and moves up the slope from the monumental entrance towards the centre of the sanctuary. The sanctuary, during its peak, should be seen in the light of a village or a small town, with the same array of people and facilities. Imagine it crowded with dedications, teeming with statues in bronze and stone, painted vivid, eye-shocking colours: blue, yellow, red. Under the Stoa of Kotys, there are small votives for sale, and food, and wine; live pigeons and sheep and pigs for sacrifice to the god. When the breeze lifts, the scent of ash and smoke from the altars drifts to the visitor's nostrils, along with the water-rich smell of the baths. A small group of craftsmen are setting up scaffolding to rebuild the front of one of the buildings on the path leading towards the altar, while in the

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166 Goats were not sacrificed to Asklepios at Epidauros, as we are told by Pausanias (Desc. Gr. 2.26.9) that it was against the custom of the Epidaurians.
centre of the sanctuary, slaves are taking down dried garlands from between the columns of the temple buildings. A boys' choir is practising in front of the Hestiatorion.

Sound travels differently depending on atmospheric conditions. In an open space, in warm, dry conditions, a man's raised voice reaches 50-70m, while a shout reaches 67-118m. In cool, damp conditions, a raised voice can reach 120m. Higher pitched voices travel further.\(^{167}\) It is just over 200m from the monumental entrance to the main temple of Asklepios, and approximately half that from the Stoa of Kotys to the Temple. The path towards the centre of the sanctuary does not merely traverse a landscape, but a soundscape as well. As the visitor follows the path further in to the centre of the sanctuary, the sounds around them change, from the commercial soundscape associated with the Stoa of Kotys and its trade in sacrificial animals and small votives, to the prayers and conversation, the sounds of maintenance or rebuilding, and the sounds associated with sacrifice nearer the centre of the sanctuary area. Sound has a tangible affect on states of mind and the emotions, and it is thus important to keep this, as well as the changing olfactory and tactile sense-scapes, in mind for navigating the experience of the sanctuary. These cues condition experience of and response to the world, but are frequently overlooked in favour of less transitory, more visual/visible stimuli.

The path leads the visitor up past the Temple of Themis towards the main altar of Asklepios, in the centre of the sanctuary area. The visitor's attention is directed by the path of movement to the Altar of Asklepios and to the structures which overlook it: if the visitor stands a little west of the Altar, to the south they

are confronted with Building E, and behind it the Temple of Artemis, with the Hestiatorion visible in a direct line south from the altar. West looms the Temple of Asklepios with its brightly-painted Amazonomachy on the pediment and the Tholos half-hidden behind it; off to the northwest, the columned front of the Abaton with its latticed marble screens trails down to where the ground drops away to a spring. East of the Altar, a row of other altars extend along the edge of the centre of the sanctuary area. (After the second century CE, a temple to the Egyptian gods abutted the front of the former Hestiatorion, south of the Altar.)

The visitor who is drawn around the side of the Temple for a better look at the Tholos finds themselves confronting the Altar of Apollo and a group of treasuries dating from the fourth century BC. (In the second century BC, a stoa with a bath formed a backdrop to their remains.) In antiquity, supplicants would have taken part in processions in honour of the god: movement within the sanctuary area that carried ritual and symbolic weight, that directed the participants' somatic attention in specific ways and focused their concentration on the power of the god.

The modern landscape of the sanctuary is one of flat openness, rising gradually to the south where Mt Kynortion curtails the plain. It is punctuated by pines and a handful of half-reconstructed fourth-century BC structures - the reconstruction has been ongoing for years - but half-built white stone restorations do little to alter the sense of spaciousness. At 1600 hours on a hot August day with at least three hundred tourists on the site, I had no sense of being crowded, or of being overshadowed. We must consider how very different that somatic experience is in antiquity, when the visitor approaches the Altar and the Temple of Asklepios in the shade of tall buildings, and the sanctuary is thick with dedications and riotous with colour; when the visitor is reminded
with every step along the path to the Altar both of the power of the god and of the sacral nature of the space. The nature of the space, the movement inwards past votives referencing past cures and statues dedicated to the power of the god, directs the attention to the potential for religious healing - even if the visitor is not there as a supplicant seeking healing themselves. Indeed, as the sanctuary drew a significant proportion of its prosperity from its reputation as a locus for healing, it paid for the citizens of Epidauros, in a sense, to advertise: to encourage the telling and retelling of accounts where the god healed, or prescribed for the healing of a supplicant, or caused some other miraculous event.

And, in some cases, to record and display the narratives of miracles that emerge from this oral tradition.

The Iamata

There are four stelai containing inscriptions of cures, the iamata, which are also known as the miracle inscriptions. Fragments of stelai A, B and D were found near the eastern part of the Enkoimeterion, used as fill for the walls of a house. Kavvadias published Stele A in 1883, and the fragmentary Stele B and Stele D in 1885. Another version of Stele B was published in 1918, incorporating more fragments. Stele C was found in two pieces in the

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168 Kavvadias, P., 1883, "Επιγραφαὶ ἐκ τῶν Ἐπιδαυρία ἰασικαφών" 197-228 in Ἀρχαιολογικὴ Ἑφημερίς Τόμος 22 (Athenian Archaeological Society), Athens, 197.
169 Kavvadias, P., 1885, "Επιγραφαὶ ἐκ τῶν Ἐπιδαυρία ἰασικαφών" 1-28 in Ἀρχαιολογικὴ Ἑφημερίς Τόμος 24 (Athenian Archaeological Society), Athens, 1.
threshold of a chapel near the Propylon. They are high quality greyish limestone, and of the inscriptions which Kavvadias found, only the iamata were inscribed on this type of stone. A, B, and C are of approximately similar dimensions: c 1.70m high, c. 0.75m wide, and c. 0.16m thick. They date from the late 4th century BC. The back surfaces of all the stelai are rough and not intended for display. At least some of the stelai, Kavvadias theorised, and LiDonnici in the main agrees, were displayed inside the Enkoimeterion along the eastern wall, on the evidence of statue/stele bases identified there. If the stelai were displayed inside the Enkoimeterion, this has implications for the nature of access within it: the internal evidence of the inscriptions (4th century BC), along with Pausanias (2nd century CE), implies that the records of cures were on display to all visitors. For Pausanias says,

στῆλαι δὲ εἰστήκεσαν ἐντὸς τοῦ περιβόλου τὸ μὲν ἄρχαίον καὶ πλέονες, ἐπὶ ἐμοῦ δὲ ἐξ λοιποῖ

Within the enclosure stood slabs; in my time six remained, but of old there were more. (Desc.Gr. 2.27.3, author's translation.)

where περιβόλου apparently refers to the Tholos. In his time six of these stelai remained.

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172 Kavvadias, 1883, 198
173 LiDonnici, 1995, 16 n.7
174 LiDonnici, 1995, 17; IG 4(2), 70
175 Kavvadias, 1883, 217; LiDonnici, 1995, 18 and n.15, n.18
Therefore logically we must assume that either they were not on display inside the Enkoimeterion throughout their lifetime in the sanctuary, or that Kavvadias is wrong in his interpretation of the evidence. Perhaps originally they were set up inside the Enkoimeterion, marking them out as particularly special; and at some point in the intervening 400-500 years, were moved to the Tholos where they were on display to visitors like Pausanias; or perhaps the bases within the Enkoimeterion which Kavvadias identified as for the *iamata* were instead bases for stelai with other purposes.

Visiting the remains of a sanctuary today as archaeologists or tourists, we have no sense of the enormous *clutter* of votive offerings which filled the space in antiquity, which several ancient authors attest to. Pausanias (*Desc. Gr.* 3.26.1, 2.11.6) notes that sanctuaries were sometimes so cluttered with votives as to obscure the cult-image: every wall was covered in votive plaques and tablets, painted wooden or terracotta panels (*pinakes*), wreaths, small offerings strung up by a nail or a string; every open space was claimed by a statue or inscription. A 3rd century BC inscription from the Asklepieion on Rhodes informs us that sometimes this plethora of votives could even prevent people walking by. The *iamata*, standing inside the Enkoimeterion or the Tholos, would have been set apart from the votives outside. By virtue of their location and/or content, they would have been closely associated with the rituals surrounding enkoimesis. These human-sized reminders of the success of the enkoimesis rite and the power of the god - particularly if it were set up within the building where the rite took place - would have impressed upon the incubants, at least those who could read or who could have the inscriptions read

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to them, the potential for successful healing. It would have also given them a sense of connection with their predecessors, and reminded them that they had entered a space marked out by its relationship to divine visitation and miraculous healing.178

How do we analyse the inscriptions themselves? Let's start with where the stories in the iamata come from. Kavvadias in 1883 suggested that the corpus represents the collection by the official personnel of the sanctuary - the priests - of tales from earlier votive inscriptions, as well as the collection of an oral tradition.179 The internal evidence of the inscriptions themselves points to pre-existing narrative votive inscriptions within the sanctuary.180 According to LiDonnici, the linguistic and thematic features of the iamata indicate that the accounts were compiled from a variety of sources,181 and suggest that prior to the surviving 4th century inscriptions the corpus of tales had a "history of collection, arrangement and redaction... certain sections of the final product may have a longer and more involved history than others."182

An anecdote recounted by Cicero recounts how a friend pointed out to Diagoras of Melos at Samothrace the evidence for the power of the Great Gods as attested by the votives dedicated by sailors preserved through storms and distress at sea. Diagoras's reply? That men who are shipwrecked and die at sea do not live to dedicate votives.183 We must not forget that the erections of the miracle stelai were official business: the accounts contained within them represent the public face of healing at Epidaurus. Occasions where Epidaurian

178 Karelisa Hartigan sees the *iamata* in light of a performative act, or "guided imagery" which encourages the proper attitude towards healing. (Hartigan, 2009, 15-30.)
179 Kavvadias, 1883, 220.
180 E.g. A1, A3, A4, A15
181 Including, but not limited to, "narrative and pictorial votives, oral tales attached to sanctuary features, and state-sponsored inscriptions." LiDonnici, 1995, 40.
182 LiDonnici, 1995, 40
Asklepios did *not* provide miraculous intervention are not, in consequence, recorded, although at least two of the iamata (B3, C5), appear to attest supplicants who went first to the smaller sanctuary of Asklepios at nearby Troizen, failed to achieve the sought-after result, and consulted Epidauros (where a desired outcome was achieved) thereafter. This may represent a local rivalry also: our sanctuary is better than *yours*.

Dillon, in "The Didactic Nature of the Epidaurian Iamata," sees the iamata as representing a "specific didactic purpose,"\(^{184}\) designed to encourage ailing visitors to believe that the god *could* cure them, and offering an idea of what kind of behaviour was expected of the supplicants. He sees them as examples of beliefs about the god, and arguments by the temple authorities to "assert Asklepios' right to thanksgiving offerings."\(^{185}\) They may well have served this purpose, but it would be unnecessarily restrictive to imagine this was the only purpose they served: Jessica Hughes, for example, sees the fragmentation of the body expressed in (some) of them as comparable to the votive offerings in giving "visual form and social meaning to the otherwise intensely personal experience of illness,"\(^{186}\) a narrative reintegration of something broken.

In a later chapter, I discuss religious healing in ancient Greece in comparison with a selection of approaches to religious healing in other times and places: their commonalities as practices, and what sets them apart from each other. Prayers, as should be obvious, are not always answered. Religious healing, while

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\(^{185}\) Dillon, 1994, 253.

having therapeutic benefits,\textsuperscript{187} is nowhere close to universally efficacious, and we cannot claim universal efficacy for ancient divine intervention either.

The iamata represent, therefore, the \textit{kinds} of divine intervention which supplicants at the sanctuary hoped or could expect to experience, rather than a promise that such intervention would be forthcoming. It's important to note that Stele A starts "God Good Luck" and precedes the list of accounts with the heading "Healings by Apollo and by Asklepios" (\textit{IAMATA TOY AILOΔΩΝΟΣ KAI TOY ΑΣΚΛΑΠΟΥ}). While no accounts refer to both gods acting together, Asklepios is only specifically named in A2. We may see these accounts reflecting a continuing link with the shrine of Apollo Maleatas on Mt. Kynortion, or we may consider that it may not matter which god, particularly, is credited. (We must also not lose sight of the fact that the Epidaurians conceived of the Apollo Maleatas shrine and the sanctuary of Asklepios in the valley as being part of a unified sacred landscape, as comprising a single sanctuary.)

\textsuperscript{187} The therapeutic benefits of religious healing practices are much disputed, with competing theories about their efficacy, as placebo effect or otherwise.
### Table 1: Epidauros Iamata Stele A

<table>
<thead>
<tr>
<th>No.</th>
<th>Suppliant's name</th>
<th>Ailment</th>
<th>Other if not ailment</th>
<th>Manner of healing</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1 (1)</td>
<td>Kleo</td>
<td>Pregnancy (present)</td>
<td></td>
<td>After sleeping within the Abaton</td>
<td>Pregnant for 5 years</td>
</tr>
<tr>
<td>A2 (2)</td>
<td>Ithmonika of Pellene</td>
<td>Pregnancy (desired)</td>
<td></td>
<td>Sleeping within the abaton (twice)</td>
<td>Pregnant for 3 years</td>
</tr>
<tr>
<td>A3 (3)</td>
<td>A man</td>
<td>Paralysis of fingers</td>
<td></td>
<td>Sleeping &quot;here&quot;</td>
<td>Scoffed at the cures</td>
</tr>
<tr>
<td>A4 (4)</td>
<td>Ambrosia from Athens</td>
<td>Blind in one eye</td>
<td></td>
<td>Sleeping &quot;here;&quot; the god cut her sick eye and poured medicine over it</td>
<td>Scoffed at the cures; required to dedicate a silver pig after healing</td>
</tr>
<tr>
<td>A5 (5)</td>
<td>A boy</td>
<td>Mute</td>
<td></td>
<td>In the sanctuary, &quot;performed the opening sacrifices&quot;</td>
<td>Implied apparition of the god</td>
</tr>
</tbody>
</table>
Bourke

The cult of Asklepios 420BCE-200CE

and did the required things," sleeping not mentioned

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A6 (6)</strong></td>
<td>Pandaros of Thessaly</td>
<td>Marks or tattoos on his forehead</td>
<td>Sleeping &quot;here&quot;</td>
</tr>
<tr>
<td><strong>A7 (7)</strong></td>
<td>Echedoros</td>
<td>Took money on behalf of Pandaros to make a dedication at Epidauros; failed to do so</td>
<td>Punished, not healed, when sleeping here Received the marks of Pandaros in addition to his own</td>
</tr>
<tr>
<td><strong>A8 (8)</strong></td>
<td>Euphanes of Epidauros (a boy)</td>
<td>Stone (kidney or bladder stone?)</td>
<td>Sleeping &quot;here&quot;</td>
</tr>
<tr>
<td><strong>A9 (9)</strong></td>
<td>A man</td>
<td>Blind in one eye</td>
<td>Sleeping; the god</td>
</tr>
<tr>
<td>A10 (10)</td>
<td>A boy</td>
<td>A broken cup</td>
<td>poured a drug in his eye</td>
</tr>
<tr>
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</tr>
<tr>
<td>A11 (11)</td>
<td>Aischines</td>
<td>Blinded</td>
<td>Blinded by thorns while climbing a tree to see into the Abaton</td>
</tr>
<tr>
<td>A12 (12)</td>
<td>Euhippos</td>
<td>A spearhead in his jaw</td>
<td>Sleeping here</td>
</tr>
<tr>
<td>A13 (13)</td>
<td>A man from Torone</td>
<td>Leeches (probably)</td>
<td>Sleeping here; the god cut open his chest with a knife, took</td>
</tr>
<tr>
<td>A14 (14)</td>
<td>A man</td>
<td>Stone (in penis)</td>
<td>A dream of sex with a beautiful boy</td>
</tr>
<tr>
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</tr>
<tr>
<td>A15 (15)</td>
<td>Hermodikos of Lampsacus</td>
<td>Paralysed</td>
<td>Sleeping here</td>
</tr>
<tr>
<td>A16 (16)</td>
<td>Nicanor</td>
<td>Lameness</td>
<td>Awake in the sanctuary</td>
</tr>
<tr>
<td>A17 (17)</td>
<td>A man</td>
<td>Ulcer of the toe</td>
<td>Asleep outside the Abaton in the day; healed by a snake</td>
</tr>
<tr>
<td>A18 (18)</td>
<td>Alketas of Halieis</td>
<td>Blind</td>
<td>A dream in which the god appeared</td>
</tr>
<tr>
<td>A19 (19)</td>
<td>Heraieos of Mytilene</td>
<td>Bald</td>
<td>Sleeping here, the god put a drug on his head</td>
</tr>
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<td>---------------------------------------------</td>
</tr>
<tr>
<td>A20 (20)</td>
<td>Lyson of Hermione (a boy)</td>
<td>Blind</td>
<td>Awake, cured by a dog</td>
</tr>
</tbody>
</table>
Table 2: Epidauros Iamata Stele B

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Ailment</th>
<th>Other if not ailment</th>
<th>Manner of healing</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1</td>
<td>The mother of Arata of Lacedaimon, on her behalf</td>
<td>Dropsy</td>
<td></td>
<td>Sleeping here, dream vision of the god</td>
<td>Proxy healing</td>
</tr>
<tr>
<td>B2</td>
<td>Hermon of Thasos</td>
<td>Blind</td>
<td></td>
<td>Sleeping here</td>
<td>Punished by restoration of ailment for not bringing the offering</td>
</tr>
<tr>
<td>B3</td>
<td>Aristagora of Troezen</td>
<td>Worm</td>
<td></td>
<td>Sleeping in Asklepieion at Troezen</td>
<td>At Troezen, the sons of the god must wait for the god's return from Epidauros to complete</td>
</tr>
<tr>
<td></td>
<td></td>
<td>the healing</td>
<td></td>
<td></td>
<td></td>
</tr>
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<td>---</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td><strong>B4</strong></td>
<td>The father of Aristokritos of Halieis</td>
<td>Aristokritos missing in a sea-cave</td>
<td>Sleeping in the Abaton</td>
<td>Son found</td>
<td></td>
</tr>
<tr>
<td>(24)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B5</strong></td>
<td>Sostrata of Pherai</td>
<td>False pregnancy, inability to walk</td>
<td>On the road home from sanctuary, apparition of Asklepios cut her belly open and sewed it up again</td>
<td>Slept in sanctuary but had no clear dream</td>
<td></td>
</tr>
<tr>
<td>(25)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B6</strong></td>
<td>A boy from Aigina</td>
<td>Growth on his neck</td>
<td>While awake, cured by dog</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(26)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B7</strong></td>
<td>A man</td>
<td>Festering sore inside belly</td>
<td>Sleeping here, Asklepios performed surgery on him</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(27)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B8</strong></td>
<td>Kleinatas of Thebes</td>
<td>Lice</td>
<td>Sleeping here</td>
<td></td>
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</tr>
<tr>
<td>(28)</td>
<td></td>
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<td></td>
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<tr>
<td>B9</td>
<td>Hagestratos</td>
<td>Headache and sleeplessness</td>
<td>Sleeping in the Abaton</td>
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<td>(29)</td>
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<tr>
<td>B10</td>
<td>Gorgias of Herakleia</td>
<td>Festering wound in the lung</td>
<td>Sleeping here, the god removed a barb from his lung</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(30)</td>
<td></td>
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</tr>
<tr>
<td>B11</td>
<td>Andromache from Epirus</td>
<td>Wanting children</td>
<td>Sleeping here</td>
<td>Son born later</td>
<td></td>
</tr>
<tr>
<td>(31)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B12</td>
<td>Antikrates of Knidos</td>
<td>Blind in both eyes, spearhead in his face</td>
<td>Sleeping here, the god removed the spearhead</td>
<td>Sight restored</td>
<td></td>
</tr>
<tr>
<td>(32)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B13</td>
<td>Thersandros of Halieis</td>
<td>Consumption</td>
<td>Back at home in Halieis, cured by a snake which had rode the wagon from</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(33)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Epidauros</td>
<td></td>
<td></td>
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<td>---</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>B14</td>
<td>A woman from Troezen</td>
<td>Wanting children</td>
<td>A son born here, vision within a year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B15</td>
<td>A man from Epidauros</td>
<td>Lame</td>
<td>Sleeping here, received instructions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B16</td>
<td>Kaphisis</td>
<td>A punishment from the god for scoffing</td>
<td>Healed after praying to the god</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B17</td>
<td>Kleimenes of Argos</td>
<td>Paralysis</td>
<td>Sleeping in the Abaton, vision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B18</td>
<td>Diaitos of Kyrna</td>
<td>Paralysis of knees</td>
<td>Sleeping in the adyton, vision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B19</td>
<td>A woman from Keos</td>
<td>Wanting children</td>
<td>Had five children (not at once)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B20</td>
<td>Timon</td>
<td>Spear wound under his eye</td>
<td>Sleeping here, the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B21</td>
<td>Erasippa from Kaphyiai</td>
<td>Pain in the stomach, fever or swelling, inability to keep food down</td>
<td>Sleeping here, god gave her a drug to drink and told her to throw up</td>
<td></td>
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<tr>
<td>-----</td>
<td>------------------------</td>
<td>---------------------------------------------------------------</td>
<td>------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B22</td>
<td>Nikasiboula of Messene</td>
<td>Wanting children</td>
<td>Sleeping here, vision of the god with a snake</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Twin boys born within the year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B23</td>
<td>A man from Kios</td>
<td>Gout</td>
<td>While awake, bitten by a goose in the feet</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Stele C

We are not able to reconstruct all of Stele C, and many of the cures are fragmentary. Therefore I have left out C9 through C13 (52-56), where neither name, gender, nor ailment are given.

Table 3: Epidauros Ianata Stele C

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Ailment</th>
<th>Other if not ailment</th>
<th>Manner of healing</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1 (44)</td>
<td>A girl</td>
<td>Mute</td>
<td></td>
<td>Saw a snake in the sacred grove</td>
<td></td>
</tr>
<tr>
<td>C2 (45)</td>
<td>Melissa</td>
<td>Tumour in the right hand</td>
<td>A viper, location unclear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C3 (46)</td>
<td>Kallikrateia</td>
<td>In search of gold buried by her dead husband</td>
<td>Sleeping here, a vision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C4 (47)</td>
<td>Amphimnastos the fishmonger</td>
<td>Punished by the god for failing to dedicate what he</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C5 (48)</td>
<td>Eratokles of Troezen</td>
<td>Pus</td>
<td>Promised</td>
<td>Cured at Epidauros</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
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<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Slept at Troezen, ordered to go to Epidauros by a vision of the god</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C6 (49)</th>
<th>A girl from Epidauros</th>
<th>Dropsy</th>
<th>---</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C7 (50)</th>
<th>A man (uncertain)</th>
<th>--</th>
<th>Abaton</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C8 (51)</th>
<th>--</th>
<th>Mute</th>
<th>---</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C14 (57)</th>
<th>--</th>
<th>Paralysis</th>
<th>Dream vision</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C15 (58)</th>
<th>--</th>
<th>Wounded, a spearhead</th>
<th>Something involving a snake</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C16 (59)</th>
<th>A boy</th>
<th>---</th>
<th>An instruction from the god</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C17 (60)</th>
<th>Anaxagora</th>
<th>--</th>
<th>--</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>C18</th>
<th>A man</th>
<th>--</th>
<th>--</th>
</tr>
</thead>
<tbody>
<tr>
<td>(61)</td>
<td>(62)</td>
<td>(63)</td>
<td>(64)</td>
</tr>
<tr>
<td>-------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>C19</td>
<td>A man of Argos</td>
<td>Epilepsy</td>
<td>Sleeping here, a vision</td>
</tr>
<tr>
<td>C20</td>
<td>Herakleitos of Chios</td>
<td>Invoking gold</td>
<td>Sleeping here, a vision</td>
</tr>
<tr>
<td>C21</td>
<td>Damosthenes of ---</td>
<td>Paralysis of the legs</td>
<td>Sleeping here, a vision, ordered to remain for 4 months</td>
</tr>
<tr>
<td>C22</td>
<td>A man</td>
<td>Blind</td>
<td>Sleeping here</td>
</tr>
<tr>
<td>C23</td>
<td>Pamphaes of Epidaurus</td>
<td>A cancerous sore (or a tooth infection)</td>
<td>Sleeping here, a vision, the god took out the sore</td>
</tr>
</tbody>
</table>

Stele D is a fragment which contains only four partial cures. The ailments are not restored. I have not, therefore, included it in these tables.

Of the 61 miracles listed above, 16 are for girls or women. Of these, C3 has nothing to do with health and sickness, C17 has no ailment available and seven
(of which five involve supplicating the god in matters of fertility) have to do with pregnancy in some form. So of the fourteen where we know the ailment, seven have to do with pregnancy.

Of the remaining 45 miracles, four are uncertain with regard to name and/or gender. For the purposes of this calculation, I assume they too are men. Of these 45, five (C20, C4, B4, A10, and A7) are not to do with sickness per se, while for C7 and C18 the ailment is unknown, leaving us with 38. Of these 38, C15, B20, B10, and A12 involve spear or arrow wounds. The most common ailments among men are blindness either of one or both eyes (eight incidents: A9, A11, A18, A20, B2, B12, B20, and C22: there is one incident of blindness involving a woman), or some form of paralysis (five incidents: A3, paralysis of the fingers; B17, not qualified; B18, of the knees; C14, not qualified; C21, of the legs). Other ailments include lameness or paralysis (seven incidents), dropsy (two incidents), festering sores or wounds (four, counting the toe ulcer), tumour or growth, headache, stomach sickness, and epilepsy. We can assume that these are proportionately representative of the kinds of ailment:

- severe enough that the cost of travel and religious treatment was a worthwhile trade for the supplicant for the chance of a cure

but also

- sufficiently moderate that travel to a healing sanctuary remained viable.

When one is on one's deathbed, it is not usually possible to travel very far. We can hazard the supposition - with some degree of confidence - that the
injunction which Pausanias reports against giving birth or dying within the temenos of the sanctuary (Desc. Gr. 2.27.1) would have rarely run the risk of being breached: severe afflictions, such as are occasionally reported in the Hippocratic Epidemics, would have carried off their sufferers in short order, or except in the cases of those prosperous enough to travel by litter or by cart, well-attended by servants, rendered travel even within the hinterland of Epidaurus a difficult proposition.

So, therefore, the iamata cures represent the hoped-for outcomes of individuals who are afflicted, but not so badly they cannot travel, and who are sufficiently prosperous that they can leave their work for part of at least two days\textsuperscript{188} and afford the necessary offerings. We are not dealing with day-labourers, and we are almost certainly not dealing with marginal free craftsmen or their families, but with their more prosperous employers and competitors, with relatively substantial citizen-farmers (tenant or freeholding), and with the wealthy landowning class. While the modern term "middle class" is not precisely appropriate to the economic experience of antiquity, it may help to contextualise the experience of healing in the Epidaurian sanctuary (contra Christian healing pilgrimage sites) to think of it as something which belonged - generally, if not universally - to relatively prosperous citizens of nearby Greek cities and their families. There are, as it were, barriers to participation: slaves and such free persons as lived a hand-to-mouth existence (two groups which together more documented periods of history indicate are often a majority of the total population) rarely have the same degree or kind of access to social

\textsuperscript{188} One day coming, purifying and preparing; at least one night in enkoimesis; one day going home. Epidaurus, the nearest polis, is still three hours' walking distance by foot. Farming, however, has always had periods of hurry-up-and-wait, which would permit such travel.
experiences and practices as their more prosperous neighbours. We must always bear this in mind.

So, therefore, what kinds of divine interventions did such individuals hope to experience? We can divide them into three main types:

- healing as a result of contact with a sacred animal
- healing as a result of sleeping within the Enkoimeterion alone or sleeping within the Enkoimeterion and receiving a vision, and
- contact with the god.

This final category is particularly interesting, for it often shows the god (presumably Asklepios, although his name is given specifically only once in the iamata) behaving as a Hippocratic physician would. He carries out surgery, applies drugs, and gives instruction on regimen. His cures are attested to be miraculously effective, in these cases, but, conceptualised within the dream experience, they are recognisably the same genre of cures/treatments as are available to mortal physicians. Versnel discusses this duel presentation of Asklepios, and the tension inherent in the depictions of a god who sometimes acts like a mortal physician, and sometimes not, in detail: it is important to hold this tension in view.

**Water in the Cult of Asklepios at Epidauros**

The importance of water to Asklepieian cult -- indeed, to Greek religion generally -- is universally acknowledged, though opinions are divided in the case

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of Asklepios whether it held a primarily ritual role, whether it held an actively therapeutic role from the beginning, or whether the therapeutic role developed alongside the siting of sanctuaries of Asklepios near hot springs in the Hellenistic and later period (as in, for example, Asia Minor). Monika Trümpfer has outlined the evidence for bathing facilities and curative waters in the Epidaurian sanctuary. In her 2014 article, "Bathing in the Sanctuaries of Asklepios and Apollo Maleatas at Epidauros," Trümpfer argues that the identification of the structure sometimes referred to as the Hieron Loutron, immediately to the north of the temple of Asklepios, and at the east end of the 4th-century Enkoimeterion, as intended for bathing is a flawed one. The structure lacks evidence of the basins and waterproofing typical of baths -- although its water features connect with pipes that run beneath the Temple. The so-called Greek Baths, however, are firmly identified as baths, and remained in use into the Roman period. Trümpfer points out that the absence of heating installations suggest the building "served for simple washings and immersion baths in cold water." There are inscriptions from Epidauros which may indicate the presence of at least one additional bath facility, but opinion is divided over whether or not these inscriptions refer to the Greek Baths. Based on the archaeological evidence, the Greek Baths are the only major bathing facility known for the sanctuary until the Roman period. During the Roman period, however, three -- possibly four -- baths with heating facilities were

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192 Trümpfer, 2014, 217

193 Trümpfer, 2014, 219 n.27
constructed, though none of these are fully published or securely dated. At least one of these baths was financed by the senator Antoninus, according to Pausanias (Desc. Gr. 2.27.6), but which is unclear. According to Trümper, bathing facilities at Epidauros lagged behind the standard of bathing facilities elsewhere until the Roman period: "Epidauros did not visibly profit from or participate in the major development of bathing culture and standards that occurred in Greece in the second century BCE. [The lack of changes suggests] that baths constituted a luxury and not a dire necessity central to the cultic life."195

Water at the Epidaurian Asklepieion came from a variety of springs. We do not actually know much about how water was used in the cult, although we can assume that (cold) baths had some curative or ritual role from the beginning. The cult of Asklepios, like other cults in Greek antiquity, relied on the purificatory properties of water (though fire also purifies): "Lustral water," as Robert Parker points out, "had to be pure, and drawn from a flowing source."196 But that water held importance here, and across Asklepieia in the Greek world, cannot be in doubt.

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194 Trümper, 2014, 221
195 Trümper, 2014, 230
Chapter Four: Two Local Asklepieia

This chapter outlines the archaeological and epigraphic evidence from the small sanctuaries of Asklepios at Corinth and on the Athenian acropolis, respectively. The purpose of this chapter is first to examine what we know or can extrapolate about experience and practice(s) at these smaller local sanctuaries, which drew visitors predominantly from their own locale, and then to compare these practices to what we know or can extrapolate about experience and practice at larger sanctuaries, which drew visitors from a much larger geographical area. These major Asklepieia comprised those at Epidaurus, Kos, and Pergamon, and our focus for comparison in this study is primarily the Epidaurian sanctuary. What was the relationship of these smaller sanctuaries to their respective towns? How did visitors interact with the sanctuary landscape, and was it different than at a large sanctuary? Can we identify different approaches to the religious healing experience between small and large sanctuaries, and if so, what does it mean for the experience of religious healing in antiquity in general?
Corinth

The Town

The town of ancient Corinth lies approximately 3km inland from the Gulf of Corinth and its ancient harbour of Lechaion, at an elevation of approximately 80 metres, 4km distant from the centre of the modern town and approximately 8km distant from the Saronic Gulf. The American School of Classical Studies at Athens began systematic excavations in 1896, which have continued to the present day.

Corinth is famously "well-watered." The geology of the area sees soft, poros limestone layered over harder marl, and it was the soft, easily-workable limestone that led to Corinth taking a pole position in early monumentalising architecture, with the example of the 7th century BC Temple of Apollo. While the earliest evidence for cult activity in the area dates from late 11th century BC Isthmia, there is evidence which suggests that cult activity took place on the site of Corinth proper from the early 10th century BC. By the 8th century, the time when Corinth's colonists settled on Kerkyra and Syracuse, the local pantheon included at least Zeus, Hera, Poseidon, Aphrodite, Kore and Demeter, and Apollo, and further cult foundations took place in the 6th century: an aniconic stele-shrine beneath the agora's South Stoa, a large monumental

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197 In the centre of the agora. Measurement of elevation taken from GoogleEarth 2011.
200 Bookidis, 2003, 248
201 Bookidis, 2003, 249
temple, possibly to Zeus, north of the theatre,\footnote{202} and a shrine to Apollo on the site of the later Asklepieion. That later sanctuary, of course, we will be discussing in detail shortly.

From the 8\textsuperscript{th} to the middle of the 7\textsuperscript{th} century BC, Corinth was ruled by the Bacchiad family (Baxh\-i\-dai), who were replaced in the mid-7\textsuperscript{th} century by a succession of tyrants, who were in turn replaced by a moderate oligarchy in the 6\textsuperscript{th} century BC. Around the same time, under Corinth's aegis, the Isthmian games were founded at Isthmia on the far side of the isthmus. A wealthy city due to its control of trade across the isthmus, Corinth took part in the Persian Wars, and thereafter allied with Sparta during the Peloponnesian Wars, and against Sparta during the 4\textsuperscript{th} century Corinthian War. During the Hellenistic period, it fell under Antigonid control, and later, the control of the Achaean League. In 146 BC, during the Roman war against the Achaean league, the city was sacked by Lucius Mummius. The site appears to have been minimally inhabited until its refoundation as a Roman colony by Julius Caesar in 44BC (as the \textit{Colonia Laus Iulia Corinthiensis}), at which time it underwent what we may see as a form of urban regeneration. A new population comprising many Roman colonists (many of whom would have been former soldiers) would certainly have effected many changes on the social, cultural, and cultic landscape of the city of Corinth. Old cults and practices died out or underwent change, while new ones were introduced.\footnote{203} One of the sanctuaries which continued, with some changes, was the sanctuary of Asklepios, near the north wall of the city. This sanctuary

\footnote{202 Bookidis, 2003, 253}{New practices included the burial of curse tablets in the sanctuary of Demeter and Kore. (see Bookidis, 2003, 257).}
continued in use until a destruction phase in the late 4th century CE,\textsuperscript{204} after which the evidence suggests the site was reused as a Christian burial area.

But the Christianisation of Roman Corinth is not our focus, and the letters of the Christian apostle Paul who visited the city - still, at that time, a relatively cosmopolitan mercantile entrepôt in the Roman province of Achaea-- give little evidence as to the state of the Greek cults there at that time. The 2nd century travel-writer Pausanias, is little better: when it comes to details, in Corinth as so often elsewhere, we must rely upon archaeological good fortune.

**The Asklepieion**

The Asklepieion at ancient Corinth lies approximately 0.5km north-north-west of and downhill from the agora, at an elevation of approximately 30m above sea level.\textsuperscript{205} It is on a direct line downslope of the theatre, and it is probable, although not confirmed by excavation, that the line of the ancient road identified east of the theatre\textsuperscript{206} continued downhill to pass east of the Asklepieion. As the sanctuary and the ramp to the so-called "Lerna spring" were entered from the east, such a road would have provided the Asklepieion with a direct spatial and visual connection with the theatre.\textsuperscript{207}

\textsuperscript{204} De Waele, Ferdinand, 1933, "The Sanctuary of Asklepios and Hygieia at Corinth, American Journal of Archaeology, Vol. 37, No. 3 (Jul. - Sep., 1933), 417-451, 435
\textsuperscript{205} Lat. 37.91063650462636, Long. 22.877558472272312
\textsuperscript{207} If not quite so immediate and concrete a connection as that between theatre and sanctuary at Epidaurus, where the theatre overlooks the sanctuary from the north; nor Pergamon, where the theatre directly abuts the sanctuary to the north; nor yet at Athens, where the sanctuary overlooks the theatre of Dionysos. Karelisa V. Hartigan has written a small study on the connection between performance and healing in the cult of Asklepios, comparing it to modern America, in *Performance and Cure: Drama and
The site of the Asklepieion sits at the very northern extremity of the old city, and its northern side is bonded into the city wall. To the north and northwest the land drops away: over the course of 100 metres the elevation changes by 13%, or an angle of elevation of approximately 42 degrees. From the northernmost edge of the Asklepieion, one has a view across the plain to the Gulf of Corinth, and across the Gulf to the peninsula of Perachora, where the Heraion of Perachora lies on the end of the cape, while to the south-south-west, the impressively sharp peak of the Akrokorinth rises on its limestone butte to an elevation of 575m above sea level, at a distance of just over 2km.

The sanctuary itself comprised the temple precinct, and may also have included the spring area to the west, known as the Lerna spring. It is not possible to be completely certain on this matter, for the connection between the spring and the temple precinct is not easily defined in the archaeological record. Two distinct phases can be identified, however, in the connection between spring and temple: first, the phase during which a ramp ran along the south side of the temple precinct and gave access into the lower area of Lerna; and subsequently, a phase after the ramp was built over.

The area containing the Asklepieion - that is, the northern precinct of the ancient city of Corinth - is not archaeologically well known. With the exception of the Asklepieion itself (excavated under the supervision of Ferdinand Jozef Maria de Waele, a Flemish archaeologist, between 1929 and 1934, and then again in 1946-1947 by Carl Roebuck), excavation has only taken place on a trial basis. Our knowledge of the area around the Asklepieion is therefore not

extensive, and largely reliant in terms of interpretation on a passage in Pausanias:

"Not far from this theatre is the ancient gymnasium, and a spring called Lerna. Pillars stand around it, and seats have been made to refresh in summer time those who have entered it. By this gymnasium are temples of Zeus and Asclepius. The images of Asclepius and of Health are of white marble, that of Zeus is of bronze." (Pausanias Desc. Gr. 2.4.5. Trans. Peter Levi, Penguin Classics edition, 1979.)

In 1830, William Martin Leake, a Fellow of the Royal Society, published a book in three volumes on his travels in the Morea, as the Peloponnese was then known. In it he remarks upon the remains of a temple, which he presumes to have been dedicated to Apollo. Actually, he remarks upon two: but the first\textsuperscript{208} is certainly that of the Temple of Apollo as drawn by James Stuart in 1751 and Luigi Mayer in 1775.\textsuperscript{209} The second, for which he gives the certain evidence of column drums and column fragments, is certainly close by, if not hard upon, the site of the Asklepieion. "At a short distance to the northward of this ruin [the Temple of Apollo]," he says, "on the brow of the cliffs overlooking the plain and bay of Lechaeum, there is an artificial level, on which I remarked the

\textsuperscript{208} Leake, W.M., 1830, \textit{Travels in the Morea Volume III}, John Murry, London, 245
\textsuperscript{209} Mayer, Luigi, 1803, \textit{Views in the Ottoman Empire Chiefly in Caramania: a part of Asia Minor hitherto unexplored; with some curious selections from the islands of Rhodes and Cyprus, and the celebrated cities of Corinth, Carthage, and Tripoli: from the original drawings in the possession of Sir R. Ainslie, taken during his embassy to Constantinople.}
foundations of large building, and some fragments of Doric columns." He informs us that by his calculations upon the dimensions of the shafts and the fluting, he reckons the temple to have been a hexastyle of approximately 75 feet in breadth; in modern measurements, approximately 22.8 metres. The temple of Asklepios is less than half so wide, and not so long, so if Leake is to be believed, a structure considerably more massive was also to be found in the vicinity. Leake does not distinguish the column remains on which he bases his calculations from the foundations and other remains upon the bluff. I believe it is thus plausible to hold that the temple of Zeus mentioned by Pausanias lies immediately adjacent to the Asklepieion at the south, upper side, not the gymnasion. Ferdinand De Waele reports that in 1916 B.H. Hill discovered the remains of a further seventeen column bases east of those reported by Leake, but details of their dimensions are not given. This may be a colonnade, or it may be part of the temple or temple complex posited by Leake.

On its own, this is of minor significance. However, the adjacent presence of a major sanctuary places the Asklepieion more concretely in an interconnected landscape of cult, and presents a different set of implications vis-à-vis the orientation of supplicants towards the sanctuary of Asklepieion during their approach as would be presented by a gymnasium in a like position. A temple of one of the Olympians stimulates other associative and symbolic connections than a gymnasium would. It may bring to mind Zeus killing Asklepios for

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210 Leake, 1830, 247
212 Leake also makes mention (Leake, 1830, 249) of seven standing columns which he implies are nearby, and which he ascribes to the temple of Athena Chalinitis mentioned by Pausanias as being beside the theatre (Pausanias, Desc. Gr. 2.4.1), but in the absence of any geographical marker in relation to the features of the landscape which can definitely be identified from Leake's description (to wit, the Temple of Apollo and the Asklepieion bluff), it seems overly generous to ascribe to these any position in relation to the sanctuary of Asklepios.
bringing a man back to life, and Apollo's resurrection of his son; whereas a
gymnasium may have more associations with the personal and the social body:
the ideal of health and youthful (male) beauty. Both of these associations may
be evoked within the same short span, however, because Pausanias mentions
both temple and gymnasium.

But this is speculation, which without further excavation cannot be
confirmed. Let us proceed to the archaeology that we can confirm.

We can identify two main phases in the use of the sanctuary, the main
Hellenistic phase and the main Roman phase. The evidence of the foundation
cuttings indicates the existence of a previous shrine on this site: indeed, the
Hellenistic temple was carefully cut along the beddings for the walls of the
earlier shrine. But very little else may be said about this earlier phase save that
the 6th century evidence suggests it was originally sacred to Apollo. There is
evidence of votives to Asklepios on the site from the late 5th to late 4th centuries
BC. The early buildings were destroyed in the late 4th century, permitting a late
4th-/ early 3rd century rebuilding and monumentalisation of the sanctuary.

The chronology of the sanctuary precinct may be divided into two main
periods based on its connection with the so-called "Lerna Spring." During the
Hellenistic period, the sanctuary and spring area communicated directly in
terms of water resources, and in all probability, via a stair built into the
"Abaton" building at the west end of the sanctuary; as well as less directly via
the entrance ramp to the court of the "Lerna Spring." (See Plate 11 and Plate 12.
See Plate 13 for a sketch of movement within the sanctuary.) This entrance ramp
ran east-west along the southern perimeter of the main sanctuary. The nature of
the entrance and its arrangements vis-à-vis entry to the sanctuary at the east
end of the ramp remain conjectural, and we have no evidence for the original
height. The entrance to the ramp would have presumably been on the line of the sanctuary's east wall, but - since the entrance to the precinct seems to have been at the south east corner, according to the excavators, near the ramp - it is improbable that there was a connecting entrance between ramp and precinct through the precinct wall. However, we cannot overlook the possibility that ramp and precinct entrance may have possessed a shared, decorative/monumentalising entrance which has not survived.

The ramp itself measured 4.7m in width, and stood open to the sky. The retaining walls were covered in light blue stucco, as opposite to the white stucco which was used in the precinct and in the "Lerna Spring" area proper. It is probable that the walls were used for display, as there are nail holes in some of the blocks: the excavators suggest votive limbs or tablets, but one may suggest that wreaths, mouldings, and other decorative elements were also affixed to the walls.

A monumentalised entry gate stood at the western end of the ramp, opening into the "Lerna Spring" area. It lay on the line of the median wall of the abaton building, although the foundations between the wall and the gate were not continuous. Evidence remains of cuttings for securing the gate doors. The entrance here was formalised by the erection of an Ionic propylon, composed of three columns flanked at each end by half columns set against the wall of the "Lerna Spring" court and the southwest corner of the abaton. Excavations brought to light the remains of an Ionic entablature block, with white stucco, traces of red paint, and red leaf-and-dart moulding.

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215 Roebuck, 1951, 66
The hollow of the "Lerna Spring" area formed an elaborate fountain court area. A rectangular court measuring 38m by 36m, approximately 4m below and to the west of the rock outcrop of the precinct, during its *floruit* it comprised an open, paved square surrounded by a continuous colonnade. At the rear of the south colonnade, and behind the colonnade to the southeast and the southwest, were a series of capacious reservoirs, the remains of which may still be seen cut into the rock of the bluff surrounding the "Lerna Spring" court.

The abaton of the upper precinct was built out over the east side of the "Lerna Spring" area. Here, opening from the east side, was a row of three dining rooms, occupying the "lower ground floor," so to speak, of the abaton. The second floor of the abaton - what I will refer to for convenience as the "upper ground floor," as it is at ground level to the upper precinct - rose above the roof of the colonnade. At the north end of this structure the excavators have reconstructed a stairwell leading between the upper and lower levels. At the south end, a spring house was cut into the scarp of the southeast corner of the precinct outcrop. This spring house and reservoir (Reservoir I) connected to the lustral basin at the southeast corner of the "upper ground floor" of the abaton through a series of pipes, although this lustral area appears to have gone out of use within a generation of its construction.

In the mid-1st century CE, the "Lerna Spring" area was cut off from the Asklepieion by a building constructed over the ramp. The ramp and entrance court were made into a row of cellars for a structure built above them. This structure, long and rectangular in form, had its ground floor approximately at the level of the main precinct.216 Entry to this new building appears to have been from the sanctuary precinct itself. The interior arrangement of the structure is

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216 Roebuck, 1951, 77
unknown. It is possible that it comprised shops or accommodation for visitors,\textsuperscript{217} but it is likely that this building was used for storage, for the cellars - formed of six light cross-walls built across the ramp, one across the former gate, and two across the forecourt - had no intercommunication between them, and no trace of stairs. As may be seen from the plan, the north wall of the structure was built on the north wall of the ramp, and carried on across the entrance court to the Lerna spring house, bisecting the court along an east-west axis. The rear wall of the structure was formed by the south wall of the ramp. Reservoir I went out of use, and it is possible that the south wing of the abaton was demolished, although this is uncertain.\textsuperscript{218}

This remodelling was a consequence of destruction of Corinth in 146 BC. The filling of this new structure accumulated until the early Claudian period, but the majority of it is debris from the Hellenistic sanctuary. It is likely that during the late second and first centuries BC the "Lerna Spring" area declined rapidly from its decorative and monumentalised \textit{floruit}, as there is evidence that during the first century BC a road crossed the "Lerna Spring" paved area: cart ruts extend from the ramp to the southeast corner of the Lerna paved square.\textsuperscript{219} This road passed down into the plain at the north-west corner of the square, breaking through the city wall, and its existence is almost certainly related to the Roman centuriation and limitatio of their Corinthian colony.\textsuperscript{220}

There were, therefore, during the Hellenistic \textit{floruit} of the sanctuary, two main axes of connection between the main temple precinct and the "Lerna Spring" area: the ramp, and the (posited) abaton stair. During the Roman

\textsuperscript{217} Roebuck, 1951, 80
\textsuperscript{218} Roebuck, 1951, 79
\textsuperscript{219} Roebuck, 1951, 82
floruit of the sanctuary, the physical connection between the two areas was much reduced, to the extent that there may not have been internal intercommunication.

We will thus consider first the form of the main temple precinct during the Hellenistic period, and follow this by considering the changes which had taken place by the mid-second century CE, around the time of the visit of Pausanias to Corinth, a period which may be considered as the Roman floruit of the cult of Asklepios in Greece.

The structures on the site of the Asklepieion survive primarily as foundation cuttings on the bedrock. The alignment of the structures within the precinct give weight to the supposition that entrance was from the east, although the Greek levels were cut away in later building, and the entrance itself has not been discovered. The south east corner of the precinct has the remains of a small Greek water basin, giving an additional indication as to the location of the entrance. This basin, the "East Water Basin," is preserved to a depth of 0.53m. According to the excavators, it comprised a small porch-like structure with a rear wall and two frontal columns. The basin was cut from a large single block of poros, measuring on the inside 0.98m by 0.66m. Water was carried under pressure through a terracotta and lead pipe which entered from the west end. North of this pipe there remains the bedding for a stele 0.35m wide. Whether this stele was votive or otherwise is impossible to know, but it is tempting to suggest that, as at Epidaurus, a stele near the entrance may have carried an abjuration to purity for the supplicants.221 The East Water Basin may have gone

221 cf Porphyrius, On Abstinence II.19: "It is necessary for the one who enters the sweet-scented temple to be pure (τό νόημα): for purity is to have holy things in mind."
out of use when the south colonnade was built in the Roman period, as around that time or soon thereafter it was filled in.

North of the water basin, 10.5m east of the temple, there is a long rectangular cutting in the rock, 8.5m by 1.6, centred on the axis of the temple, and of the same width, which we may identify as an altar. It was probably a simple rectangular structure with orthostats for sides, but no blocks remain. On the west side of the cutting, there are two cuttings for the bases of statues or stelai, though it is not possible to say which.

Nearby is a large poros block with a hemispherical cutting in its centre and a raised edge around the margin to keep a cover stone in place, identified by both Roebuck and De Waele as an offertory box similar to those found at the Peribolos of Apollo in the centre of Corinth, and at Thera. It seems to have been designed for small monetary offerings from worshippers, and eleven bronze coins were found here, all predating the 146BC damage to the temple precinct in the Roman sack.

The Hellenistic Temple is centred almost precisely between the north and south limits of the sanctuary precinct. It is not, however, centred between the east and west limits, but is set back towards the west end, closer to the West Building/Abaton. The cuttings for the walls were made along the beddings for the walls of the earlier shrine, and the cult statue, on the evidence, also remained in the same location as in the earlier temple. This new Hellenistic temple was Doric in order, measuring 8.32m by 14.93m, prostyle with four columns. The evidence indicates that the temple possessed both pronaos and cella. The frieze across had eight triglyphs and seven metopes, although we do

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222 Roebuck, 1951, 28; De Waele, 1933, 428
223 De Waele, 1933, 428
not know what the theme of the decoration was: down, fifteen triglyphs and fourteen metopes. The height of the temple walls was about 5.73m, and the pedimental height approximated 1.25m. There was a narrow ramp from the base of the stylobate to the precinct floor: the stylobate itself rose to a height of c. 1m, making the total height the Temple stood above the precinct floor approximately 8m. It was covered in hard white stucco and coloured paint picked out the detail of the decoration. The building was in use until the sack of the city in 146BC, and it was repaired after the refounding in 44BC. In the fourth century CE, the sanctuary was destroyed and the temple dismantled.

Scattered around the sanctuary precinct are cuttings in the rock designed to hold wooden posts. There is no regularity in their arrangement, but the majority are along the sides of the temple. The excavators suggest that the posts held votive objects, possibly replicas of human limbs (which have been found in numbers at Corinth) pierced with holes for suspension by a thong or on a spike. It is also possible that the wooden posts supported wooden tablets recording cures. Two metres north of the temple there are other cuttings, 0.7m by 0.6m by 0.4m. Their purpose is unknown, but the excavators suggest that they may have been holes for trees. Without artificially made holes, there could be no trees on the rock hill of the site, and the excavators consider trees plausible because Pausanias specifically mentions Asklepieian groves at Titane and Epidauros, indicating that shrubbery may have been important to the cult.

The floor of the precinct was paved with white and blue water-worn pebbles bedded in cement, laid in three alternating layers to a thickness of 0.23m. There

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224 Roebuck, 1951, 34
225 Roebuck, 1951, 40
226 Roebuck, 1951, 41
was a 0.02m layer of cement laid over the pebbles, which may be associated with the construction of the colonnades.

The Hellenistic precinct possessed colonnades on its north, west, and south sides.²²⁷ There may have been an eastern colonnade, but no evidence for this survives. The colonnades were all very narrow: the south colonnade, which comprised a row of thirteen column bases, was only 0.63m from the original wall of the ramp, and appears to date from the late 3rd century; the north colonnade's column bases lay 0.7m from the exterior wall of the precinct (which is also the north wall of the city). The north colonnade joins the east wall of the "abaton" building. It had a frieze and triglyphs, which aren't preserved, stucco covered its poros blocks. Some traces of red paint indicate the decorative was colourful. The west colonnade began in the form of a porch for the lustral room attached to the south end of the abaton, and was extended along the east side of the abaton building to the join with the north colonnade. There may have been an eastern colonnade, but no evidence for this remains.

The south colonnade was destroyed at the time of the construction of the Roman building over the ramp, leaving the west and north colonnade in place. The north colonnade was in use during the early Roman period, until at least the end of the second century CE, but it was destroyed or altered before the final destruction of the sanctuary in the fourth century CE.

The Abaton building²²⁸ is a double-level building on the western edge of the hill. The lower section is on the level of Lerna, as we have already discussed, composed of dining rooms. The upper section (the "upper ground floor") is on the level of the main precinct. There is significant variation in the form of

²²⁷ Roebuck, 1951, 58-59
²²⁸ Roebuck, 1951, 42
buildings identified as abatons or enkoimeteria across the sanctuaries of Asklepios in the ancient Greek world. It is entirely possible that some of the buildings identified as abatons served different purposes, as we know from Aelius Aristides that in Pergamon, it was not always necessary to incubate inside a building, and Aristophanes' Wealth (740-1) does not specify that the incubation took place inside a building.229

This abaton building comprised a large hall with two small rooms to the south. These two south rooms are the lustral room and another room that extends over the reservoir. The lustral room is 5.10m by 1.7m and has six steps down to a small platform separated from a draw basin by a parapet. The steps were made by cutting the natural stone which was then cemented and stuccoed. The basin was supplied by a terracotta pipe, and the lustral room formed the centre of an elaborate water circulation system. However, it appears that it may have gone out of use shortly after construction due to the cracking of the rock above the reservoir room (i.e., the rock underneath the lustral room). It is possible that lustral functions were transferred to the fountain house on the ramp.

The interior arrangements of the large hall are unknown. On the north side, the evidence suggests that a staircase up to the upper ground level gave access to the interior from the open court in front of the row of dining rooms on the lower ground level.

The evidence for the function of the dining rooms is given by the well-preserved southernmost room, where there are five couches and part of a sixth along the walls. Traces indicate that the couches and walls were originally

229 Cf. discussion p182.
covered in red stucco. No traces have been found of a kitchen: it is possible that food was cooked in the open.
Votives

The votives recovered from the Corinthian Asklepieion are, with a handful of exceptions, mould-made terracottas. Some of them are painted - red signifies male, white female - and many are pierced by holes near the top from which they would have been suspended. They range from approximately life size to small representations, but approximately life size is more popular in the surviving examples of votive body-parts, as opposed to typoi, from Corinth. We know next to nothing about their handling or display. They were visual reminders of illness and of the sanctuary's healing purpose: were they also tactile reminders? Did they serve some practical purpose besides visual display? Did visitors touch the rough terracotta while hoping that they might receive relief from their ailments?

We do not know. But we do know that the deposits from which most of the votives were excavated are securely dated between the late fifth and the late fourth centuries BC, or from c. 425 BC to c. 325 BC. Roebuck's excavation report lists the best preserved of these votives, which I have tabulated below.
Table 4: Well-preserved votive body-parts from the Asklepieion at Corinth

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head</td>
<td>6</td>
</tr>
<tr>
<td>Upper part of face</td>
<td>1</td>
</tr>
<tr>
<td>Ears</td>
<td>5</td>
</tr>
<tr>
<td>Eyes</td>
<td>3</td>
</tr>
<tr>
<td>Tongue (?)</td>
<td>1</td>
</tr>
<tr>
<td>Male chests</td>
<td>3</td>
</tr>
<tr>
<td>Breasts</td>
<td>11</td>
</tr>
<tr>
<td>Genitals (male)</td>
<td>18</td>
</tr>
<tr>
<td>Arms &amp; parts of arms</td>
<td>14</td>
</tr>
<tr>
<td>Hands</td>
<td>11</td>
</tr>
<tr>
<td>Fingers</td>
<td>3</td>
</tr>
<tr>
<td>Legs &amp; parts of legs</td>
<td>21</td>
</tr>
<tr>
<td>Feet</td>
<td>17</td>
</tr>
<tr>
<td>Base for male genitals (probably)</td>
<td>1</td>
</tr>
<tr>
<td>Plait of hair</td>
<td>1</td>
</tr>
<tr>
<td>Small thigh bone</td>
<td>1</td>
</tr>
<tr>
<td>Internal organ of doubtful identification: either stomach, womb, or bladder</td>
<td>1</td>
</tr>
</tbody>
</table>
Corinth votives and osteoarchaeological evidence

Sherry C. Fox analysed 33 bone lots from Corinth excavated by ASCSA between 1960 and 1963, dating mainly to the Roman and late Roman periods, with some Hellenistic remains. The minimum number of individuals represented is ninety-four, of which fifty-nine were identified as adults. 30.5% of these were female, 39% male, and 30.5% of indeterminate sex. Age at death was estimated for forty-four individuals. Thirty-one of the total number of individuals were under approximately twenty years of age; five (one male, three female, and one indeterminate) aged between twenty-one and thirty; two (one male, one female) between thirty-one and forty; one (male) between forty-one and fifty; four (one male, three female) between fifty-one and sixty; and one (male) over sixty-one years of age. Several individuals had ante-mortem tooth loss and dental caries; at least ten individuals presented evidence of periodontal disease; five individuals suffered periapical abscess; four individuals had articular pitting on the condyloid process (the articulated part of the jaw) from either trauma or osteoarthritis; and one adult individual had osteomyelitis, an infection of the bone marrow, in the mandible. Eleven individuals presented evidence for osteophytosis (creation of bone spurs along the joints) which may have been osteoarthritis; there is possible evidence for anaemia in fourteen individuals; five individuals with possible evidence for diffuse idiopathic skeletal hyperostosis (DISH), a disease which causes inflammation and calcification of the spine; three individuals with healed fractures; two sub-adult individuals

230 Fox, Sherry C, 2005, "Health in Hellenistic and Roman Times" 59-82, in Helen King, Health in Antiquity, Routledge, 65.
231 Fox, 2005, 66
with infection of the bone marrow (osteomyelitis); two individuals with inflammation of the bone or cartilage (osteochondritis); one individual with arthritis from a toe fracture; one individual with osteochondroma, a benign tumour of the long bones; one sub-adult individual with a giant-cell tumour of the tibia, a rare and usually benign tumour which, if malignant degeneration occurs, frequently metastasises to the lungs; one individual with an osteoma, or bone growing on another piece of bone; one individual with a cranial infection; one sub-adult individual with a jaw infection; one individual with possible healed rickets; and one individual with a deformation of the metatarsal (long bone in the foot).

While this osteoarchaeological data can throw light upon the types of ailments which leave marks upon the bones, it is a very small and chronologically scattered sample set; one which, moreover, cannot cast any light upon ailments which leave no physical traces in bone matter. The proportion of ailments affecting the feet and legs in this small sample is outnumbered only by the proportion affecting the teeth and jaw. Votives representing the teeth and the jaw cannot be identified from the Corinth evidence, but the (relatively) high proportion of leg and feet ailments is reflected in the surviving votives. So we can see from the osteoarchaeological evidence that ailments of the spine, legs/feet, and jaw/teeth, were well-represented - as we should expect from a society without the benefit of modern dental hygiene, and one in which hard manual labour was by far the most common way of making a living.

The presence of these votives (see Plate 19 and Plate 20 for examples) is not merely a theoretical signifier. In the life of the sanctuary, they are visual presences and also tactile ones. Whether they are offered in hope of healing, or in thanks for it, their practical effect is to bring parts of the body before the
attention of a visitor, either as representations of localised affliction or synecdochically standing for the whole body, or, per Jessica Hughes, as a fragmentation that was seen "as a symbolic representation of what was perceived as actually happening to the body, both in the experience of disease, and in the process of healing."\textsuperscript{232} As physical presences, then, they impinge on a visitor's awareness, and direct the visitor's attention both to the external structures of the body and to the nature of the interaction with the god or the sanctuary that caused them to be produced and dedicated.

\textsuperscript{232} Hughes, 2008, 224.
Athens

The most probable date for the introduction of the cult of Asklepios to Athens is sometime in 420/19, during the short-lived Peace of Nikias. It seems likely that the initial establishment of the cult was at Zea near the Piraeus, for in Aristophanes' Wealth the character Pluto is taken to bathe in the sea for initial purification (653ff), and an Asklepieion has been identified in that location, but before long, a sanctuary had been established on the south slope of the acropolis. Two hundred inscriptions relating to this site date from between 400 BCE to the period 250-300 CE. The city Asklepieion is also mentioned in Dio Laertius 4.5.24, with reference to the healing of the philosopher Krantor; in Xenophon, Mem. 3.13.3; and in Aeschines 3.67.

Noted epigrapher Sara B. Aleshire discusses the inscriptions evidence at length in her 1989 monograph on The Athenian Asklepieion: The People, Their Dedications, and The Inventories, and her 1991 collection of essays, Asklepios at Athens. For our purposes, it is sufficient for the moment to note that the evidence for the use of the sanctuary is strongest between c. 350BCE and 200BC, and again in the 1st and 2nd centuries CE. Inscriptions relating to repairs and embellishment of the sanctuary in mid-1st century BC suggest that the Asklepieion was damaged in the Sullan sack of 86 BC, and thereafter repaired. Between 25BC and 10CE, the priesthood ceased to be an annual one.

234 Aleshire, Sara B., 1989, The Athenian Asklepieion: The People, Their Dedications, and The Inventories, J.C. Gieben, Amsterdam, 6
235 IG II(2) 1046, 3174, 4464
236 See also SEG XXL497, SEG XXV.134
and because instead a priesthood awarded for life (idian bion). At this time also, the lesser role of zakoros associated with the sanctuary was restricted to Athenian citizens.

Although the last known priest of Asklepios, c.300 CE, was Nikagoras Minoukianos, the Asklepieion remained an active shrine until well into the 5th century CE.

The location of the sanctuary

The city Asklepieion is located on the south slope of the acropolis, on one of three terraces which rise in elevation from east to west. It is adjacent to the Theatre of Dionysos, which lies to the east; and to the Odeion of Herodes Atticus, which lies to the west. It is situated between the Peripatos, the processional route which circumnavigated the acropolis, and the acropolis rock. The easternmost end of this terrace is bounded at the south by the retaining wall of the Theatre of Dionysos, and at the north by a cut-away of the facing rock of the acropolis. The terrace adjacent to the east contains the remains of a spring house originally built in the sixth century BCE, and a building of the Ionic order with four rooms behind a porch. It also contains the foundations of temples to Isis and Themis. The terrace adjacent to the west has no discernable Classical or Hellenistic remains.

In a 2009 article, Michaelis Lefantzis and Jesper Tae Jensen discuss the evidence for the (much-disputed) early development of the site. They pay particular attention to the structure known as the bomos, although they decline to identify it securely as an altar. They suggest that the first phase of this
structure, while not ante-dating 418/7 BCE, dates from the end of the fifth century BCE, while the second phase lasts from c. 400 BCE until ca. 360-350 BCE. While the authors fail to state outright their interpretation of the bomos structure, the article implies that they see it as a cult structure whose proportions are fundamental to the sanctuary's layout.237 This does not preclude its function as an altar, and in the absence of a convincing identification as something other than a bomos, I feel justified in employing its long-standing interpretation as a sacrificial altar.

The early Asklepieion is defined by the bomos and the bothros, the altar and the sacred pit. (See Plate 9.) The dating of the pit is disputed: its lip can be dated no earlier than 350 BCE, due to the materials and manner of its construction.238 The lip may be a later addition to an existing structure, as the walls are similar to the South Slope Spring House. The function of this pit is obscure, although care was taken to incorporate it into the plan of the later Doric stoa. It is possible that it was a reservoir. It may predate the sanctuary, but Lefantzis and Jensen argue on the basis of its proportions and the material of its inner facing that it was planned at the same time as the bomos's second phase and the peribolos, c. 415/4 BCE.239 It was certainly part of the sanctuary from the first quarter of the fourth century BCE, along with the peribolos, or enclosing wall. The stonework of the peribolos has been dated to the late fifth century BCE240, a date which is supported by the evidence of the Telemachos inscription, which says, "When Karias was archon, a peribolos was built apart from the wooden

238 Metzger, Henri, and Martin, Roland, 1949, "Recherches d'architecture et de topographie à l'Asclépieion d'Athènes," Bulletin de correspondance hellénique Vol. 73, 316-350, 322
239 Lefantzis and Jensen 2009, 111
240 Wrede, Walter, Attische Mauern, Deutsches Archäologisches Institut, Athens, 1933, 30-1, 56.
The remains of the peribolos are identified with the poros foundations of a wall which marks the western limit of the Asklepios terrace (extending south from the Doric stoa for 7.12m before returning to the east). Therefore, we may see an early sanctuary of Asklepios as consisting of the altar and the bothros which may have been a water reservoir, and thus used for purification (like the well at the entrance to Epidauros' much larger sanctuary), entered from a wooden propylon and surrounded by an enclosing wall. The unbuilt area would have been planted with appropriate vegetation, and very quickly it would have begun to fill up with dedications: pinakes, inscriptions, etc. This is the basic outline of the sanctuary for approximately the first hundred years of its existence. Changes to the sanctuary's plan, including the construction of a temple building and a covered stoa, would take place during the third century BCE.

On the north side of the shrine, a Doric stoa was built circa 300/299 BCE, the remains of which are still to be seen today. This stoa incorporates the bothros at its western end. It also gives access to the Round Spring House by a shallow tunnel in the rear, just east of the short axis of the stoa. During the imperial period, this stoa was rebuilt with changes in plan, most probably in the 2nd century CE.

In the centre of the sanctuary are the foundations of a small temple, as well as the altar discussed above. The use of pi-clamps in the foundation blocks

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241 SEG XXV.226; cf. text and translation in Wickkiser, 2008, 67-70
242 Beyond this wall, the area between the eastern and middle terraces is marked by the foundations of another wall: these two walls are nearly parallel, and form a corridor from the Peripatos to the acropolis rock.
243 The Telemachos inscription makes reference to a "planting" of the sanctuary during the archonship of Kleokritos, in 413/2 BC.
244 It is possible that a temple existed during this century, but there are no surviving archaeological remains to indicate it, and the inscriptive evidence does not argue strongly one way or the other. As an altar was the only structure truly vital for most of the sacred activities of the Greeks, and as the sanctuary of Asklepios at Athens was a small, local sanctuary, I am not inclined to think that a temple existed here prior to the remains which we do have.
indicates that the surviving remains of the temple are not earlier than c.300 BCE. This temple was equidistant between the Doric stoa and the Corinthian stoa built on the south side of the sanctuary in the first century BC and dated by inscriptions to the reign of Augustus.

Inscriptional evidence suggests that in the mid-2nd century CE the sanctuary was embellished with propylaia and paving. Around this same time, Herodes Atticus and his daughter, Athenias, were honoured with statues at the Asklepieion. There may have also been cult to Hygieia in the sanctuary from an early period, as the head from a statue of Hygieia dating to the 4th century BC was found there.

**Context**

Situated on the south slope of the acropolis, the Asklepieion is blocked from any view of the Agora or the Areopagus by the acropolis rock itself, although its location affords it a fine view of the Temple of Olympian Zeus to the south and west, where the Classical city’s defensive walls once passed near the line of the River Ilissos.

To approach it from the east along the Peripatos, you pass behind the Odeon of Herodes Atticus, with the imposing Acropolis Propylaia and the temple of Athena Nike looming atop the steep rock on one's left. In the 2nd century CE, you would pass in front of temples to Themis and Isis, which lie between you and the acropolis rock. Further down the slope, on your right hand side, you

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245 IG II(2) 3187, IG II(2) 3188
246 IG II(2) 4073
247 Athens, National Museum inv. 190; cast from the Ashmolean Museum B114.
would be able to see the roof of the 2nd century BC Stoa of Eumenes, which stretches from the Odeon to the Theatre of Dionysos. The curve of the theatre’s theatron is visible up ahead. You would pass the early spring house, and the Ionic building with its four rooms and porch. Reaching the eastern limit of the temenos of the sanctuary of Asklepios, you would see a small propylon, giving access to the sanctuary’s courtyard. The altar stands in front of the temple, which lies on an east-west axis in the space between the two colonnades.

An enkoimeterion building has not been securely identified. While incubation may have taken place in the temple, as we have previously discussed, Aelius Aristides implies that in Pergamon in the 2nd century BC, incubation could take place in any public building in the sanctuary, and it is likely that this was true for Athens. There is no evidence either in Aristophanes’ Wealth that the incubation took place in an enclosed building. (See Plate 10 for a sketch of ways of movement through the sanctuary.)

Every sanctuary in Greece possessed its fair share of dedications, and the Asklepieion is no exception. The inventory lists were set up in plain sight, and other dedications would have been in plain view, such as typoi and model body parts. While the inventory lists only cover especially valuable dedications - gold, silver, marble - we know that in Athens as elsewhere there also existed a significant amount of terracotta and pottery dedications. We may also posit pinakes and dedications in wood, although these do not survive. The Asklepieion may also have been home to certain civic records: in 1876, a

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248 Cf. p170
249 Aristides, Hieroi Logoi, 47.43; 48.9, 71, 80; 49.7
document relief recording a treaty between Athens and Korkyra, which dates to 376/5 or 375/4 BC, was found at the site of the Asklepieion.  

From Inventory IV we have some idea of how the more valuable dedications were displayed in the interior of the temple. Dedications covered the west wall of the temple, against which the cult statue stood, and the east wall, where the entrance was. There were also dedications on the cult statue itself. Dedications were displayed on the roof rafters and the ridge beam, and on the long walls of the temple. The dedications on the long walls of the temple were arranged in four rows. The fourth row was about halfway up the walls. As Pausanias (Desc. Gr. 1.21.4) mentions paintings worth seeing in the Asklepieion, we may therefore take it that the upper half of the long walls was home to frescoes, pinakes, or both.

What were these dedications, here in Athens where our evidence has so many lists? Largely, they consisted of:

i) anatomical votives, like those from Corinth;

ii) typoi, the plaques which depicted individuals (not always with the deity);

and

iii) coins, mostly drachmas, sometimes tetradrachms.

Certain kinds of votives appear to be more numerous in different areas. Inventory IV tells us the anatomical votives occur more commonly in the first two rows of the north wall. Typoi are mostly found on the left wall, in the first, third and fourth rows. Dedications of coins are more scattered, with only one on

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251 Athens, National Museum inv. 1467; cast in the Ashmolean Museum, D90.
252 See, for example, Aleshire, 1989, 119-120, 223-224; Aleshire, 1991, 41-46
254 Aleshire 1991, 45
each long wall. On the west wall and the roof beams, more coins can be found, while the largest concentration is on the east wall, with eleven in one spot.255

It seems that particularly valuable - or easily pilfered - dedications were kept on the roof beams, where Inventory IV mentions four vases, one crown, and five pieces of jewellery. Eight seal stones were kept on the right hand of the cult statue, and so was one gold typos, while other votives are mentioned as having been put in the keeping of the priest.256

The remains of ancient temples today, and even their museum reconstructions, seem barren and austere: white marble, grey limestone, plain plaster, empty interiors. The evidence of the inventories seems rather to suggest that we should envision their interiors much more along the lines of those Catholic (or Orthodox) cathedrals cluttered with centuries of rich accumulation, gaudy with an abundance gold, silver, paintings and statues - a clutter not infrequently overdone and garish to the modern eye. (Although I would hazard that Greek temples possessed less in the way of velvet hangings and drapery than any medieval cathedral.)

The physical remains from the Athenian Asklepieion are among the more scanty of the sites considered in this study. The structural remains are among the least well preserved upon excavation, after Corinth, and votive finds are thin on the ground. However, we have evidence to compensate for this lack in the form of the inventory lists. Nine of these are preserved, in states of preservation ranging from the extremely fragmentary to the substantially complete. Sara B. Aleshire published text, translation and commentary on all nine in her 1989 The Athenian Asklepieion.

255 Aleshire, 1991, 45-46
256 see eg. Inventory IV, 116; 121
I have already mentioned Inventory IV above. Aleshire dates its erection to 274/3 BCE, although previous scholars have argued for a date closer to 300 BCE. Inventory I, II, VI, VII, VIII, and IX are fragmentary and partial, and thus contain only a small amount of useful information. Inventories III, IV, and V are more helpful, though still incomplete.

Table 5: Dates of the Athenian Inventory Lists

<table>
<thead>
<tr>
<th>Inventory no.</th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
<th>VI</th>
<th>VII</th>
<th>VIII</th>
<th>IX</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date (BCE)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.350-340</td>
<td></td>
<td>343/2</td>
<td>329/8</td>
<td>274/3</td>
<td>244/3</td>
<td>c.229-210</td>
<td>215/4</td>
<td>c.180-160</td>
<td>165-86</td>
</tr>
</tbody>
</table>

The earliest inventory lists (I, II, and III) date prior to the construction of the Doric stoa and the remains of the third-century CE temple, arguing for a vibrant and active sanctuary during the fourth century. No inventory list survives that can be dated after the Sullan sack of Athens in 86 BC, and all the available evidence suggests that the sanctuary, like the city itself, did not fully recover until the mid-first century CE.

What kind of illnesses can we say were among those for which supplicants visited the sanctuary here? We must bear in mind that the Athenian Asklepieion was a local sanctuary, and could not be expected to draw visitors from outside the city itself: Attica boasted a more famous healing sanctuary in the form of the Amphiareion at Oropos, approximately 40 km from the city of Athens. (A little more than a day’s walk, to use a rubric with which the inhabitants of ancient

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257 Aleshire 1989, 215
Attica would themselves have been familiar.) We have the accounts of the inventory lists to draw on for evidence, as well as a handful of surviving votives in stone excavated at the Asklepieion. The inventory lists record dedications of objects made from gold, silver, bronze, wood, horn, glass, and other materials which remain unspecified but which we may safely assume included terracotta, and which may have also included dedications in stone.

These votive dedications are recorded in the inventory lists, and we have thus no firm idea of the scale of the majority of the Athenian votives. It seems plausible to suggest that they were comparable in size to the surviving Corinthian votives. Were they taken down from their places within the temple and handled from time to time, before their disposal? We do not know. But from the inventory lists, it is clear that they presented an impressive visual display, testament to the sanctuary's wealth and the god's power. If even a small sanctuary such as the Athenian Asklepieion could command such an array of precious votives, how much more dazzling must the larger sanctuaries of Asklepios have been?
Table 6: Votives in the Inventory Lists from the Asklepieion at Athens

<table>
<thead>
<tr>
<th>Type of body part</th>
<th>Number of instances</th>
<th>Male</th>
<th>Female</th>
<th>Other information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body, half body, lower/rear part of body</td>
<td>68</td>
<td>19</td>
<td>29</td>
<td>20 not specified</td>
</tr>
<tr>
<td>Head</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Face</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lower part or half face</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eyes</td>
<td>154</td>
<td></td>
<td></td>
<td>13 single, 141 pairs</td>
</tr>
<tr>
<td>Nose</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jaw</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mouth</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teeth</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ears</td>
<td>25</td>
<td></td>
<td></td>
<td>13 single, 11 pairs, one set of 4</td>
</tr>
<tr>
<td>Part of ear (uncertain)</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neck</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chest</td>
<td>2</td>
<td>1</td>
<td>1 uncertain</td>
<td></td>
</tr>
<tr>
<td>Breasts</td>
<td>13</td>
<td></td>
<td></td>
<td>10 single, 3 pairs</td>
</tr>
<tr>
<td>Body Part</td>
<td>Count</td>
<td>Single</td>
<td>Pairs</td>
<td></td>
</tr>
<tr>
<td>--------------</td>
<td>-------</td>
<td>--------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td>Abdomen</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pubic area</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Genitals</td>
<td>15</td>
<td>10</td>
<td>5 not specified</td>
<td></td>
</tr>
<tr>
<td>Heart</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bladder</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arms/hands</td>
<td>23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fingers/toes</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legs</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hips</td>
<td>2</td>
<td></td>
<td>Both pairs</td>
<td></td>
</tr>
<tr>
<td>Knee</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lower leg</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feet</td>
<td>2</td>
<td></td>
<td>Both pairs</td>
<td></td>
</tr>
</tbody>
</table>
One of the notable things about the inventory lists from Athens, in comparison with the surviving votives from Corinth, is the preponderance of eye-dedications at Athens. While the surviving physical dedications from the Athenian Asklepieion include only two instances of eyes - the majority, as at Corinth, appear to be or include legs - in the inventory lists, eyes predominate. We have no idea if eye ailments were more or less common at Corinth than at Athens: the evidence is not one-to-one comparable. But from the evidence of the dedications, eye infections must have been very common in

258 The surviving physical dedications known from the Athenian Asklepieion include:

- Athens Epigr.M 2777 and Athens N.M. 2544B, which show relief scenes with eyes;
- Athens Epigr.M: Svoronos pl. 232, II, 1482; IG II(2) 4407: pair of female breasts 4th BC;
- Athens Epigr.M 3513: female breast, 2nd CE;
- Athens Akr.M 3687: male abdomen, navel to mid thigh;
- Athens Akr.M 3689, male abdomen and right leg broken off above knee;
- Athens Akr.M 3688, male abdomen and right leg broken off at mid thigh;
- Athens Akr.M 3690, vulva - find spots uncertain, Asklepieion probable;
- Athens Epigr.M 8414, frontal view of female thighs, "To Asklepios and Hygeia, Zosime a prayer," 2nd CE;
- Athens Epigr.M 8768, lateral view of leg facing right, broken off above knee, "Menestratos a prayer set up..." 1st BC;
- Athens N.M. 2571, lateral view of leg facing left, foot broken off above ankle: "Sosibos to Asklepios and Hygeia, a prayer," date uncertain;
- Athens Epigr.M 8413, lateral view of leg facing right, from above knee down, broken off above ankle: "To Asklepios Soter and Hygiea, a prayer [by] Teptianos on behalf of his son Kornoutos," Roman period;
- IG II(2) 4506, male leg, "Eukarpas a prayer," 1st-2nd CE;
- Athens N.M. 2442, lateral view of leg facing right, date uncertain;
- IG II(2) 4429, apparently lost: right foot: ["somebody] to Asklepios on behalf of his child having vowed set this up," 4th-3rd BC;
- Athens Epigr.M 8415, lateral view of left foot with lower leg, facing right: "Tib. Aphrodisios to Asklepios and Hygiea a prayer set up," 1st-2nd CE;
- and Athens Epigr.M 8419, pair of feet on base. "Phl. Epiktetos to Asklepios and Hygiea, a prayer." 1st CE.
ancient Athens, with its dust and its breezes, and they are one of those chronic, recurring complaints that might spur people to go out of their way to seek treatment.

It is not possible to give a precise ratio of named male to female dedications, due to the fragmentary preservation of the inscriptions. However, in Inventories III, IV, and V, there are 101 preserved mentions of female names to 136 mentions of male names, with 8 fragmentary names of uncertain gender. (See Plate 21 for a chart.) In these Inventories, there are 108 instances of eyes associated with a named supplicant whose gender can be determined. 46 instances are associated with female names, and 62 with male names. There are 11 instances of a face (or part thereof) associated with a named supplicant, of which 9 are associated with female names. The sole instance of a neck is associated with a female name. Both instances of hips are associated with a female name. There are 7 instances of a breast or breasts, of which 6 are associated with female names. There are 9 instances of genitalia, of which 7 are associated with male supplicants and 1 is associated with a female supplicant on behalf of her son. There are 29 instances of a leg or legs, of which 10 are associated with female names and 19 with male. There are 19 instances of an ear or ears, of which 10 are associated with female names and 9 with male. There are 8 instances of mouths, of which 4 are associated with female names and 4 with male. There are 12 instances of hands, of which 6 are associated with female names and 6 with male.

We may thus conclude that men and women were approximately equally likely to seek cures at the sanctuary of Asklepios on the Acropolis for ailments of the hand, eye, ear, and mouth. We may tentatively conclude that men suffered ailments of the leg at a higher rate than women, which we may explain through
men's greater social and economic exposure to the world outside the *oikos*: leg injuries remain common in farming and construction work, at sea and at war.

Men are more likely to seek cures for genital ailments, whereas women are much more concerned with ailments of the breast. This seems obvious, for with breasts and male genitals, as they are externally visible organs, ailments or peculiarities are more easily brought to the notice of the person to whom the organs belong - more so, at least, than female genitals. Disorders of the genitals or breasts that don't fit our modern understanding of a disease -- erectile dysfunction, for example, or problems with lactation, which have been and remain common across all classes of people -- may also be represented by these votives. As some problems with lactation can be extremely painful, it would not be surprising if some of the incidences of breast votives were dedicated by women suffering from issues associated with breastfeeding.

Hips have long been associated with child-bearing: it is a truism of folk medicine that narrow-hipped women have more difficulty giving birth (and indeed, a particularly difficult childbirth has been known to dislocate a hip) which might account for our only two instances of hips being associated with women's names.

That leaves the case of faces, a preponderance of which are associated with female names. The modern observer might be tempted to read a continuity of female beauty culture all the way back to the Classical period, an invisible companion of the publicly celebrated beauty of the heroic nude male body. We know that the hetairai of the Classical period were known for their beauty as well as their other accomplishments, but we know much less about image of the ordinary wife, mother or daughter in antiquity. Mirrors are a frequent find in graves across the ancient Greek world, however, as are perfume jars and items
of personal adornment, so it is entirely likely that women in the Greek world valued their appearance highly. What we can say from the data, at least, is that it appears that women were more concerned with ailments of the face than were men.

But from the data provided by the inventory lists, women comprise approximately 40% of dedicators, with men comprising 60%. Which is to say the ratio of dedications made where we can identify the dedicator as a woman as to where we can identify the dedicator as a man is approximately 1:1.4. There are obvious problems with taking this figure for granted, but taken as is, it represents a strong level of participation by women in the votive aspect of the cult of Asklepios and thus by extension in religious healing at the Athenian Asklepieion. Dare we suggest that this ratio held true into the Roman period, or outside Attica? Perhaps it is telling that when he wrote a mime that takes place at the sanctuary of Asklepios on the island of Kos, Herodas chose to focus on the visit of two local women to the sanctuary, and their sacrifice for health to the god.259 Aristophanes, too, in Wealth sees nothing out of the ordinary in old women being present for incubation.260 Women, it seems, formed an active percentage of supplicants, and certainly formed an active percentage of those who left dedications recorded in the inventory lists at Athens. Women, of course, are just as likely to fall prey to infectious diseases as men, and we should consider that they are likely to have been represented in similar proportions elsewhere in the Greek world, especially given that in many societies - ancient Greece not excepted - the care of the sick and the preservation of the health of the family unit are seen as falling with a woman's purview.

259 Herodas, Mime IV.
260 Aristophanes, Wealth 674.
Though they open, perhaps, a narrow window on the relative participation of men and women in religious healing at the cult of Asklepios in Athens, the Inventory lists tell us relatively little. We can see that some of these votive offerings represent a not insignificant investment of resources: solid gold or solid silver eyeballs do not represent pocket change at any but the very wealthiest levels of society. And yet for many of the dedications, the material is not specified and may well have been pottery only. The Inventory lists may allow us a window on to the participation of women in religious healing and piety in the cult of Asklepios, but the data does not give us insight into the economic or social status of participants in religious healing at the Athenian, or indeed any other, Asklepieion.

**Corinth and Athens and Epidaurus: some comparisons**

Visiting the sanctuary of Asklepios at Athens is a different experience to visiting the sanctuary of Asklepios at Corinth, and both are different to visiting the Asklepieion at Epidaurus, or indeed at Kos, at Pergamon, or at any other site in the ancient world. What differences can we identify between sites that affected the visitor's or supplicant's experiences? In what ways were the visitor's experiences similar?

At Athens and at Corinth, the sanctuaries are located within the city itself. This aspect of location is more pronounced at Athens, where the Asklepieion sits on the side of the acropolis, but at Corinth the sanctuary still lies inside the city walls. The Epidaurian Asklepieion lies approximately eight kilometres distant from Epidauros town, and its immediate context is thus different. (While the
Asklepieion at Pergamon is situated adjacent to the city, it is not centrally located within the civic area; and the Asklepieion at Kos, too, lies some four kilometres distant from the centre of the ancient city, and at the smaller site of Lebena the sanctuary of Asklepios also lies outside the boundaries of the civic area.)

The larger sanctuaries were villages unto themselves, and at times - for example, during festivals - probably played host to the population of a small town, but they stand physically apart from built landscape of the *asty* in a way that the smaller civic sanctuaries discussed here do not. The local visitor to the Athenian or Corinthian Asklepieion can, perhaps, stop by with relative ease on their way to somewhere else within the city walls, where for a visitor at Kos or Epidauros, or even at Pergamon, this is far less feasible.

They also stand apart because of their size and their lavish monumentality. The sites of the sanctuaries of Asklepios at Corinth and at Athens are relatively modest: they never attained the richness, in terms of monumentalisation, of those extramural sanctuaries with international reputations. They are also relatively compact: when these sanctuaries reached their respective peaks of monumentalisation, the main temenos areas would have been positively cramped if more than a few dozen people were attempting to circulate within the sanctuary area, unlike the large extramural sanctuaries, which had space for at least several hundred people to circulate in and about the temenos area.

There are significant differences between the Athenian and Corinthian Asklepieia in terms of their *centrality* within the civic religious landscape, of course. Imagine, at Athens, the approach to the Asklepieion on the south slope of the acropolis, above the agora, through the bustling heart of the city: the visitor approaches a temenos within a section of the landscape set apart for
sacred activities and certain civic activities touching on sacred things - for even the venerable institution of the Areopagos, which the visitor would pass if they approached the acropolis from the direction of the agora, concerned itself with judging cases of impiety and cases, like murder, where pollution had been incurred. In the shadow of the sanctuaries of the city's tutelary deities and close by monumental space sacred to Dionysos - the Theatre of Dionysos - the cult of Asklepios at Athens, despite its modest physical proportions, could be associated with the grandeur and influence of these cults, whose structures dominated the centre of the city physically and whose festivals dominated its ritual calendar.

The sanctuary of Asklepios at Corinth is not so centrally located within Corinth's civic landscape. At Corinth, the agora and the acropolis are not located as close to each other as they are at Athens, as the Akrokorinth is several kilometres' walk uphill from the agora. The Asklepieion is not associated with either, but instead possesses a location at the northern margins of the urban area: the very limit of the walled town. While according to Vitruvius\(^{261}\) this north-facing, elevated site is ideal for a sanctuary of Asklepios, the fact remains that while it stands beside a busy thoroughfare, it is not associated with the heart of the civic sacred landscape in the same way as the Athenian Asklepieion is. Yet neither the Corinthian nor the Athenian Asklepieion is set apart from the general fabric of the civic landscape in the manner of the larger extramural sanctuaries, which form loci for sacred things within a wider landscape controlled by the city but not intrinsically part of the city's space.

More subtle differences are more difficult to quantify, owing to the perennial problem of lack of data. But we can set these broad differences alongside certain

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\(^{261}\) *On Architecture*, 1.4.1-3;
similarities, and strive to find continuities of experience between Asklepieia in different locations. For even beyond what is common in general among sanctuaries to the Greek gods - the presence of an altar to the god of the sanctuary; a temple building; dedications in stone and wood - there are definite similarities between the Asklepieia. The one that stands out most is the presence and provision of water for the sanctuaries. Water, in the form of springs and baths, is archaeologically attested to have been an integral part of the fabric of the sanctuaries of Asklepios, and the literary evidence suggests that it played an integral part in human practice at and concerning the sanctuaries, as well. From Pluto's immersion in the sea in Aristophanes' *Wealth* to Aelius Aristides' cold plunges and running around naked in winter which he discusses in his *Hieroi Logoi*, water's role is, if not central to practice, certainly vital.

The other continuity is, of course, the god himself and the nature of the visitors' expectations vis-à-vis the power of the god. While there are sanctuaries of Asklepios that do not appear to be associated with religious healing (the sanctuary at Messene is perhaps the best-known example), the link between Asklepios, health, and healing remains an enduring one. The visitor comes to these sanctuaries conscious of the god's power over sickness and over sick bodies, the power to make well - and the power to (re)afflict - a consciousness reinforced within the sanctuary by inscriptions and dedications. The sanctuaries of Asklepios are places where the sick body - the sick body that can

262 Aristophanes, *Wealth*, 655-657
263 eg. Aristides *Hieroi Logoi* II.74-80; see also Oration 39.1-18, "To The Well in the Temple of Asklepios."
265 See *iamata* #A7: Echedoros receives the tattoos of Pandaros for failing to render unto the god his due.
266 Matthew Dillon sees the *iamata*, indeed, as serving a specifically didactic function in this regard. (Dillon, 1994, 240.)
be well, or at least better - is pressed to the forefront of a visitor's mind; where the possibility of transition, past or future, from sickness to well-being exists centre-stage.

We have previously discussed sickness and wellness within Greek society, the kinds of sickness experienced and the way in which religious healing forms one strategy among several in the search for relief from suffering. But what is religious healing? How is religious healing experienced? How should we think of "healing cult"? And how can we reach across two millennia to talk about the kinds of religious healing undergone by the ancient Greeks?

These questions form the focus of our next chapter.
Chapter Five: Comparing Religious Healing Across Cultures

It is at this point necessary to define in more rigorous terms what is meant by "religious healing" or "healing with a religious element." Modern biomedicine conceives of itself in purely mechanistic terms: effect proceeds from cause, never the other way around; everything may be explained in a rational and "objective" framework. Religious healing operates outside a purely mechanistic context. It involves the intervention of a supernatural power or force in the healing process, usually solicited by the sick person. It may take place instead of, or alongside, mechanistic efforts to relieve suffering. It has been a part of human efforts to relieve suffering throughout recorded history, and continues to be so in many contexts today, where it is often referred to under the rubric of "faith healing."

In this chapter, we compare religious healing across different time periods and contexts in order to see what can be said to be "universal" - or at least sufficiently common as to approach universality. By comparing and contrasting, we can attempt to see what religious healing is at its most basic, and also investigate how religious healing in the cult of Asklepios during the period of our investigation is different from - and similar to - religious healing in the medieval cult of the saints, or faith healing in modernity. The comparison is useful because it provides us with conceptual context for religious healing in

267 And mechanistic or non-mechanistic efforts to explain suffering: for the evidence of a debate on explanations of disease causality, see Hippocrates, On the Sacred Disease.
general. Let us refer back to Pierre Bourdieu, and remember that *habitus* -- the system of structuring dispositions -- conditions human practice and human responses to stimulus.
Religious healing and the medieval cult of the saints

Our modern European ideas of religious healing cult, that is to say healing through faith or activity as a result of visiting a specific location (a cult site or sanctuary) and/or performing specific actions, owes much to the medieval Christian cults of saints and their relics. This is only natural: saints' cults have dominated religious healing and pilgrimage as well for the better part of two millennia, and the site of Lourdes especially continues to attract supplicant pilgrims in their millions on an annual basis.

On the face of it, the similarities are seductive. There is a fixed location, or at any rate a physical embodiment of divine presence, in the built structure of the church, saint's tomb, and/or reliquary. This has its counterpart in the temenos of antiquity, with the sacred enclosure, sacrificial altar, and/or cult statue. Minor cult sites drew their supplicants from nearby regions; major ones could receive supplicants from not only the area round about, but from the whole extent of the known world. In some cases, particularly in the Eastern Church, medieval saints' cults also practised incubation.268 Both medieval and ancient supplicants existed in a world where the existence of divine intervention was not generally doubted, and where medical intervention was expensive, frequently painful, and its success - if success occurred - often limited.

But closer comparison between ancient healing cult and the medieval cults of the saints and their relics reveals some very major differences. For ancient sanctuaries were held to be polluted by the presence of death, or of the dead (as

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well as by birth): at Epidauros and at Delos, for example, it was forbidden to die or to give birth within the boundary of the temenos area. But saints were dead mortals: holy, but dead. Altars were built over saints' graves; the devout visited saints' tombs because of a belief that the dead saint continued to partake in the doings of the earthly sphere through the medium of their physical remains. "The bones provided," says John Crook,

"a channel of communication, a 'holy hot-line,' between earth and heaven. Furthermore, the relics of a saint were a source of spiritual power (virtus or potentia) which could be used, for example, in healing infirmities; this power was accessible at the grave of the saint. Indeed, by the end of the fifth century, perhaps much earlier, the saints were conceived as actually dwelling at their tombs as well as being present in heaven."269

This belief in the actual presence, praesentia, of saints at their graves and in their relics, may perhaps be associated with the Christian idea of the ultimate physical resurrection of the dead, a concept not widely shared in antiquity. But this enduring connection between heavenly power and earthly matter made manifest in the virtus of the dead saint's bones directly contradicts much ancient thought about the separation between the earthly and the heavenly spheres. We see an example of this thought in Plutarch's Romulus 28.6-8:

269 Crook, John, 2011, English Medieval Shrines, Boydell and Brewer, 5
"To reject entirely the divinity of human virtue, were impious and base; but to mix heaven with earth is foolish. Let us therefore take the safe course and grant with Pindar that:

Our bodies all must follow death's supreme behest,
But something living still survives, an image of life, for this alone
Comes from the gods.

Yes, it comes from them, and to them it returns, not with its body, but only when it is most completely separated and set free from the body, and becomes altogether pure, fleshless, and undefiled. For 'a dry soul is best,' according to Heracleitus, and it flies from the body as lightning flashes from a cloud. But the soul which is contaminated with body, and surfeited with body, like a damp and heavy exhalation, is slow to release itself and slow to rise towards its source. We must not, therefore, violate nature by sending the bodies of good men with their souls to heaven, but implicitly believe that their virtues and their souls, in accordance with nature and divine justice, ascend from men to heroes, from heroes to demi-gods, and from demi-gods, after they have been made pure and holy, as in the final rites of initiation, and have freed themselves from mortality and sense, to gods." [Trans. Bernadotte Perrin, Loeb Classical Library, 1914.]
Saintly relics, on the other hand, are - for the most part - fleshly relics, and draw their *potentia* from the intimate connection between the dead flesh and the saint's soul as a conduit for divine power. Greek antiquity drew strict boundaries between mortal and divine, with death being the most impassable of these. "It is not right," as the goddess Artemis says in Euripides' *Hippolytus* (1437-1438), "for me to look upon the dead, /And stain my eyesight with the mists of dying men." (Author's translation.) Peter Brown would have it that early Christianity, and its attendant cult of the saints, sees in effect a reversal of much previous ancient thought about the relationship between humans and divinity.270 The notion of sin, of which illness was seen either as the result or as evidence, also brings subtle differences of worldview and experience into play. While in Greek antiquity the idea that the state of the body reflected the state of the soul was indeed a commonplace, as we have seen, and the idea that sickness might be a collective or individual punishment from the gods for impiety held social currency, the idea of a penitential pilgrimage for sin-related sickness and the idea of suffering as *redemptive* are peculiarly Christian inventions in European history. "[R]epeated acknowledgement of one's sin, combined with the harsh conditions of the road, lent a distinct penitential quality to the journey, which in turn affected the relationship between pilgrims and saints."271

We can see also distinctly different practices at the sites of saints' cults in comparison to ancient healing sanctuaries. Apart from water, there is no evidence that ancient supplicants at pre-Christian healing sanctuaries ingested

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270 Brown, Peter, 1981, *The Cult of the Saints: Its Rise and Function in Latin Christianity*, Chicago University Press, Chicago, 6. We can complicate this theory, however, when it comes to the treatment of bones ascribed to heroes such as Orestes and Theseus, which received reverence and cult. Nonetheless, in the general case, Brown's argument is persuasive.

any substance that was especially associated with the god or the site. But one of the most common practices at medieval healing shrines was the ingestion of matter which had been in contact with the shrine, reliquary, saint's body or grave, including dust, stones, paper, and candlewax.\textsuperscript{272} Water was sold or distributed which had had a saint's relic dipped in it. These things were held to be particularly efficacious for healing.\textsuperscript{273}

There are also no accounts from the healing shrines of antiquity of the kind of religious hysteria that occasionally came in to play with medieval saints' cults. Describing an account of the feast day of St. Denis at the church of St. Denis near Paris, Scott writes, "Events got so out of hand that the monks charged with responsibility for displaying the great relics were forced to flee with them through the church windows."\textsuperscript{274} This might be a case in which we merely lack the evidence of such energetic devotion from antiquity, but it speaks to a personal fervour and an enthusiasm in religious practice that is more similar to Dionysiac rites than what is attested of the healing cult of Asklepios.

There are, however, also practical similarities with healing cult from antiquity. While the practice of incubation or \textit{enkoimesis}, sleeping within the sanctuary area in order to receive healing or prophecy in dreams, tended not to play as large a role in the healing cult of the saints as it did in the cult of Asklepios in antiquity - with the exception of some shrines in the Eastern Church - but staying overnight within the sanctuary area does play a large role in the cult of the saints. Instead of sleeping in an enkoimeterion, however, supplicants would spend the night in the nave of the church, or beside the shrine, in vigil and prayer. When miraculous cures occurred at the shrine (as

\textsuperscript{273} Scott, 2010, 88
\textsuperscript{274} Scott, 2010, 87
opposed to being reported, and being ascribed to having visited the shrine, later) this is when they were likely to take place.\textsuperscript{275} There are, however, accounts of healing through incubation at saints’ shrines in the early medieval/late antique Western Church: for example, Gregory of Tours recounts a miracle of St. Martin related to him by Vulfolaic, where a Frankish nobleman’s son slept inside the church building and was cured of deafness and dumbness.\textsuperscript{276}

A majority of saintly healing miracles, as we know from eleventh and twelfth century records, did indeed take place at or near the shrine, in the vicinity of the saint’s relics.\textsuperscript{277} Although we lack extensive information about miraculous cures in the ancient world, we can parallel this with the \textit{iamata} from Epidauros, most of which imply that the cures described took place within the sanctuary. But in the medieval period it was not unknown for the incurably ill to remain at the shrine, supported by the alms of the faithful.\textsuperscript{278} While we have evidence for wealthy men remaining at sanctuaries of Asklepios for some time to pursue cures,\textsuperscript{279} this kind of charity is not something we have any evidence for from the sanctuaries of Asklepios in the ancient world. Indeed, the idea of incurably - and potentially fatally - ill people remaining indefinitely within or around the boundaries of the sanctuary seems as though it would go poorly with the prohibition on dying within the \textit{temenos} area.

\textsuperscript{275} Scott, 2010, 88
\textsuperscript{276} Gregory of Tours, \textit{The History of the Franks} VIII.16
\textsuperscript{277} Webb, 2002, 58
\textsuperscript{278} Webb, 2002, 53
\textsuperscript{279} See, for example, the inscription of Marcus Julius Apellas (IG IV(2) 1.126, Edelstein & Edelstein 432), who stayed at a sanctuary of Asklepios for at least nine days, and "stayed on." Philostratus’s \textit{Life of Apollonius} (1.10) implies that a stay of some length is normal for those who make significant offerings: \textit{ο̣ δὲ θαυμάσας ἔρη \'μᾶλλον, ὅτι μὴς ἱκετεύσας ποτὲ ἑνταῦθα μὴ διατήρησας, ὅν οἱ ἄλλοι χρόνον, μὴς ύπάνας πο παρὰ τοῦ θεοῦ, μὴ ἄπερ αἰτήσαν ήθεν ἔχον.} The Palatine Anthology (6.330) suggests that Aeschines the Rhetor stayed in a sanctuary of Asklepios for three months.
Aelius Aristides is the prime example of a man who remained at a sanctuary of Asklepios for some time pursuing treatment or a cure for his ailments. In some respects, his devotion to the god parallels the religious fervour with which some medieval pilgrims approached their saints and their deity, but we have no evidence to assess how typical - or not - Aelius Aristides was among his peers in terms of his religious devotion. In terms of the length of his stay, his own writings give us evidence that he was not atypical.

Some supplicants did stay for lengthy periods in or about the shrines of the saints, but did not need alms to sustain them, like for example Leunast, the archdeacon of Bourges, who spent some weeks at the shrine of St. Martin of Tours. Where Aelius Aristides seems to have spent much of his time at the sanctuary of Asklepios in Pergamon in consultation with the medical professionals associated with the sanctuary, in undergoing enkoimesis, bathing, and trying out new regimens vouchsafed to him either in dreams from the god or by the medical professionals, Gregory of Tours informs us that Leunast of Bourges spent his time in fasting and prayer in order to have his blindness cured: the doctors he had consulted, he consulted either before or after attending at the shrine - at least according to Gregory. While Aelius Aristides adjusted his diet and propitiated Asklepios as well, it seems that the range of activities in which the ancient supplicant engaged as a matter of course was somewhat more varied than that open to penitent and/or sick supplicants in the medieval cult of the saints.

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280 C.A. Behr calculates the time Aristides spent at the Asklepieion in Pergamon to be not less than two years, between 145 CE and 147 CE. See Behr, C.A., 1968. Aelius Aristides and the Sacred Tales, Hakkert, Amsterdam, 26. Aristides refers to this period as his καθέδρα, his period of idleness. (Aristides Hieroi Logoi II.70, III.44)

281 Gregory of Tours, The History of the Franks V.6
But in contrast to what Gregory implies about Leunast, and similarly to at the ancient healing sanctuaries, it appears that medical professionals were often present at or near medieval saints' shrines. Monastic establishments (which grew up around saints' tombs, or acquired saints' bones in the process called translation, or got hold of relics through less official means) often had sections dedicated to the tending of the sick. One ninth-century plan for an abbey of St. Gall includes a physician's house, a pharmacy, a building for bloodletting, an infirmary, and a kitchen, bathhouse, and herb garden specifically for the care of the sick.\footnote{Porterfield, Amanda, 2005, Healing in The History of Christianity, Oxford University Press, Oxford, 79.}

So we can see that there are significant differences in how the healing cult of the saints was seen as mediating divine power vis-à-vis the cult of Asklepios. These differences are consonant with other changes that had taken place in attitudes and approaches towards the divine over the course of later antique and early medieval history. Penitence and expiation, grace and gratitude, came to take on a greater significance than the reciprocal\footnote{Reciprocal simplifies a more complicated system of relations visible in the evidence for humans addressing divinities in antiquity. "If I have ever done anything for you, do something for me," is a sentiment that occurs, but so does "If you have ever done anything for me before, do something for me now." There is a sense that the \textit{continuity} of the beneficial relationship matters as much or more than its tit-for-tat nature.} association between mortals and deities which played such a large part in their respective roles in antiquity. At the same time, saints, themselves once mortal but imbued with divine power, came to operate as intermediaries between mortal and immortal realms. There are differences, too, in practices. Let us outline them briefly. Christian supplicants at centres of religious healing commonly engaged in the consumption of matter associated with the saint's tomb or saint's relics, a practice for which we have no evidence in the cult of Asklepios. Saints' cult did
not have a role for animal sacrifice in associated rites, as the cult of Asklepios did. The centres of religious healing associated with the cult of the saints accepted death within the confines of the sanctuary area: it was not held to be polluting as death in ancient Greek society was held to be polluting, as concepts of pollution changed from antiquity into the Christian era. Sin is not at all the same thing. The belief in the active power and potential of saints' relics may have a parallel in antiquity in the importance attached to heroes' tombs and assumed remains, but there is no evidence to suggest that physical relics assumed any importance to Asklepieian healing cult in the way that saints' relics did to healing in the cult of the saints.

But we are able to see resemblences and parallels between the two kinds of healing cult. Both tended to monumentalise their most important sites. Both engaged in forms of ritualised movement within a sacred area: processions, rites, sometimes music. Both operated with the presence of a community of people associated with the cult as well as visiting supplicants. The medieval cult of the saints sometimes involved incubation with the sacred area, which was a common rite in the cult of Asklepios for those seeking healing. Both usually involved some kind of dedication or donation to the saint or god during or after the course of a visit to the sanctuary. And both saint and god are conceived of as active agents who can directly affect their supplicants, although the saint may be seen as a mediator of divine grace rather than an independent actor.

**Modern religious healing**

Modern healing with a religious dimension is often today discussed under the rubric of "alternative medicine." It exists alongside, in competition and in
conjunction with, the explicitly scientific-rational way of seeing, categorising, and treating illness espoused by biomedicine. It is not my intent to discuss the comparative efficacy of the different ways of seeing, categorising, and treating illnesses for any period: in the modern period, however, questions of comparative efficacy obtrude into the illness/healing experience a little more closely than before. When there are generally-accepted (mostly) effective treatments for certain illnesses, and when these are known and available to the people and communities who also, or instead, engage with their illnesses through the medium of explicitly religious healing processes or acts - religious or ritual healing - one must take into account the complexity of individual understandings of, and individual responses to, cultural contexts and illness experiences. This is especially important if, as we mean to, one intends to employ insights and models gained from modern studies of religious healing to cast light upon or to interrogate aspects of religious healing in the ancient world.

Experience is culturally, as well as individually, specific. So too is illness: not only illness categories, but beliefs about and responses to illness. In the following pages, we will briefly survey a selection of approaches to illness and religious healing from the 20th century, before returning to consider how what we can learn from well-documented modern approaches to illness and religious healing may be applied to the much less well-documented experience of healing cult in the ancient world. Among those approaches, we will look at religious healing among Catholic Charismatics in the USA and among the American Navajo people in the 1980s, healing with a religious dimension in Nepal in the 1980s-1990s, and healing among the Kalahari !Kung in the late 1960s. We will then consider similarities and differences among them, in search of a common
thread or at least some useful probabilities which may contribute to our understanding of the ancient material.
Healing Among The !Kung San

Let us begin with the !Kung. The !Kung, also sometimes spelled !Xun, are among the indigenous people of southern Africa who maintained traditional hunter-gatherer ways of life up to the latter part of the 20th century. These indigenous peoples are collectively referred to as, variously, San, Bushmen, and Basarwa, and their land included Angola, Botswana, Namibia, South Africa, Zambia and Zimbabwe. From the 1950s to the 1990s their traditional range was vastly reduced and their people encouraged, sometimes forcibly, into settled farming lifestyles.

For a description of healing among the !Kung, I rely primarily on the ethnographic research conducted by Richard Katz, assisted by Richard B. Lee, over the course of three months in 1968 and published in 1982 as Boiling Energy: Community Healing Among The Kalahari Kung. When discussing the !Kung of the late 1960s, I follow Katz in using the present tense, but it is necessary to keep in mind that Katz's research, like much anthropological study, is necessarily temporally limited, and the "ethnographic present" does not represent a universal and unchanging now.

The !Kung studied by Katz live in the north-western Kalahari. Their way of life is primarily that of hunter-gatherers, although some !Kung have made the
change to being settled agricultural labourers for Botswana farmers. Society is relatively equal. Individual bands average about fifty persons, but visiting is frequent in areas where different bands gather, and territories are not defended. There is little personal or collective property, and much freedom of movement. Food surpluses are rare, and food is not gathered until it is required. Sixty to eighty percent of the food is supplied by gathering, generally done by women, with the remainder coming from hunting, mostly done by men, although gender roles are not rigidly defined. Food is divided among the band at its home camp, and often shared with neighbouring bands, particularly in the case of large animals. The !Kung are relatively well-nourished, but have high childhood mortality: they have a life expectancy at birth of approximately thirty-two; at age fifteen, the average life expectancy is mid-fifties. Between eight and eleven percent of their population are over sixty.

Healing, for the !Kung, is a public and social activity. Healing takes place during all-night dances - commonly a dance called "the Giraffe" dance - involving the whole community. Healers are not a special class or caste in !Kung society, and healing is not separated from the other activities of daily life, although healers must "obey a series of dietary taboos" when they are learning to enter the altered state that allows them to access healing power, and thereafter in their subsequent experiences with healing. But more than ten percent of women and fifty percent of men become healers over the course of their lives: it is integrated into community life. The religious/transcendental

290 Katz, 1982, 35.
element present in healing is not conceived of separately to the other elements of life.

Apart from the healing that takes place in dances, the !Kung use herbal medicines and healing massages to treat less serious ailments. Cuts and abrasions are usually treated with salves, while aches and tiredness are treated by massage.²⁹¹ !Kung who have access to antibiotics will also use these.²⁹²

The all-night dances take place approximately four times a month - although there is no set pattern, and the dances, which are spontaneously organised, can take place more frequently, or not happen at all for long stretches of time. A fire is built up and kept going through the night, around which women sit, singing and clapping. Men, sometimes joined by women, dance around the singing women. Writes Katz:

"As the dance intensifies, num or spiritual energy is activated among the healers, both men and women, but mostly among the dancing men. As num is activated in them, they begin to kia or experience an enhancement of their consciousness. While experiencing kia, they heal all those at the dance. Before the sun rises fully the next morning, the dance ends. Those at the dance find it exciting, joyful, powerful. 'Being at a dance makes our hearts happy,' the Kung say."²⁹³

²⁹³ Katz, 1982, 34.
Num was originally, the !Kung say, given to the !Kung by their gods. Num comes up in the body with heat, the heat of the fire and the heat of the dancing. Num is painful. It boils. As one begins to enter the state of kia, it hurts. Dau, one of the !Kung who heal, says, "What happens in kia is that it hurts in the gebesi, the pain is great on the sides and in the stomach. Your belly and spine quiver. Your vision becomes funny in that when you look at people or the fire, you will see the fire as if it is way above the ground or at eye level." The !Kung consider that to enter kia and to come back from this altered state is to die and come back. In kia, healers go to each person at the dance and heal. They generally put one hand on the person's chest, the other on the back, and pull out the sickness, while screaming and howling - "an expression for the pain and difficulty of this healing work." They then shake their hands towards the night's darkness in the space beyond the dance, casting away the sickness. During this process, healers address the gods and the spirits of the dead !Kung ancestors, berating or pleading them to leave the people alone and stop afflicting them. Sickness happens when the spirits of the dead, in conjunction with the lesser god of !Kung religion, attempt to make off with living person into their own realm. Spirits can additionally bring misfortunate and death by allowing or causing injuries and accidents. In kia, Katz says, healers confront the dead relatives of the sick person, and express the desire of the living to keep the sick person with them - although the realm of the spirit is not seen as bad, as such.
Healers in *kia* use *num* to "pull out" sickness. One respected !Kung healer, Kinachau, describes how he sees things while experiencing *kia*:

"Num teaches you how to recognise sickness and remove it from others. When you are pulling out the sickness, you see properly. You see little things, like twigs... Little things, things sent by god that are troubling people. You see and you pull... Your eyes are open then because you have to see the people. However, the fire is shimmering. Looking at the fire makes your eyes tremble, but you turn away because you want to see people so you can heal them... We pull everybody. We look for what's wrong with a person, so that we can remove it. When we pull, we go from person to person at the dance, and even if we don't see anything wrong, we pull. But in other cases, we see something specific and we pull strongly to remove it."\textsuperscript{299}

Healers sometimes heal outside the context of the dance, most often sick members of their own family or the very ill.\textsuperscript{300} Healers also heal themselves.\textsuperscript{301} They also sometimes burn plants that are said to contain *num* and essentially fumigate the person to be healed with it, or pass a coal or burning branch from the fire over and around the person to be healed.\textsuperscript{302}

\textsuperscript{299} Katz, 1982, 82.
\textsuperscript{300} Katz, 1982, 50.
\textsuperscript{301} Katz, 1982, 87.
\textsuperscript{302} Katz, 1982, 204-205.
Katz's research focuses on the healers, rather than the healed. There is little here to indicate how the healed experience what the !Kung refer to as "pulling out the sickness." Afterwards, after a dance, they feel "good" or "happy," but testimony comparable to how the healers experience their *num* is not discussed. However, a picture emerges of the !Kung approach to healing which we may compare to other forms of healing with a religious element.

!Kung healing:
- takes place in the centre of the community
- is not hidden or secret
- involves healing powers within individuals
- involves healers in a confrontational relationship with otherworldly beings
- involves healers who mediate between the healed and divine beings
- is not seen as universally powerful or effective
- does not put failure of healing down to a fault in the healer or the sick person
- operates as preventative as well as therapeutic
- does not involve a fixed place or structure
- involves altered state of consciousness on the part of the healer
Healing Among New England Catholic Charismatics

"Catholic Charismatic Renewal," the Catholic Charismatic movement in the United States, brings the distinguishing forms of Pentecostalism into a Catholic context. Like Protestant Pentecostalism, the Catholic Charismatics tend to practice prayer meetings and emphasise a direct relationship with the Christian God through "baptism in the Holy Spirit." This baptism in the Spirit, the Charismatics believe, opens people to spiritual gifts, including glossolalia, prophecy, and faith-healing.

It is this latter which is important to this thesis. I will briefly examine its features, drawing on the ethnographic work of Thomas Csordas, who studied healing and ritual among Catholic Charismatics in New England during the 1980s. Csordas' work is explicitly interested in ritual and phenomenology, as well as experience and embodiment, which is important, as this research project is primarily concerned with the experience.

Catholic Charismatics are part of the shift in Christianity in the post-Enlightenment period away from suffering and self-mortification in the image of the crucified Jesus of Nazareth, towards a relationship with faith that places more emphasis on spiritual power, spiritual growth, and divine healing. Illness, for the Charismatics, is regarded as an obstacle to spiritual growth, and so participating in healing - being healed - is normal for Charismatics seeking a

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closer relationship with the Christian God. Conversely, spiritual growth is seen as conducive to health.

The Charismatic movement divides healing into three distinct but interrelated types:

"[P]hysical healing of bodily illness, inner healing of emotional illness and distress, and deliverance from the adverse effects of demons or evil spirits."^304

Physical healing is the most straightforward: it involves prayer, the laying-on of hands by healing ministers, and sometimes the anointing of the sick person with oil that has been blessed ("holy oil"). The prayers include ones for: relief or healing from illness, success in biomedical treatment, and an end to suffering in death.

Inner healing can be directed at removing the effects of a specific traumatic life experience, or it can be directed towards the complete reinterpretation and a "making-whole-in-the-Spirit" of an entire life. The participant in inner healing often experiences vivid imagery in association with the healing process, which is seen as a sign that healing is in fact taking place.

Deliverance heals the person from the influence of demons or evil spirits. These evil spirits are not seen as in sufficient control to require that the person undergo a Catholic rite of exorcism, but they are still believed to be having an injurious effect on the person's life and health. Evil spirits are "discerned" by the healing minister or the supplicant person. They are removed by means of a "prayer of command" on behalf of the healing minister. While healing ministers

^304 Csordas, 2002, 14
specialise, most at various times make use of all three types of healing. The Charismatics employ religious healing in quest of an ideal self: one both physically and spiritually healthy.

"Charismatic ritual healing," says Csordas,

"presumes two closely interrelated capacities of self: the capacity to be 'wounded' or 'broken' and subsequently healed by divine power in a way that roughly corresponds to the professional medical system's notion of cure; and the capacity to achieve spiritual 'growth' and 'maturity' in a way that roughly corresponds to the aspirations of contemporary holistic and New Age healing... Charismatic healing's motive of growth makes creation of a sacred self programmatic from the outset."}

Of eighty-seven healers interviewed by Csordas, twenty-six have professional training in some area of professional psychology, counselling, or biomedicine. Eighteen are priests, seven nuns, and sixty-two are laypeople, of which forty-five are women. Sixty percent, or fifty-three, practice only in the setting of a prayer group or a Charismatic "covenant community," while a further twenty-one practice outside of any specific group affiliation, and thirteen are associated with counselling centres. Fourteen of the eighty-seven receive payment, while

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305 Csordas, 2002, 14
306 Csordas, 1997, 26
seven work full time in their "ministries" without receiving payment for healing.\textsuperscript{307}

Charismatic healers have all experienced healing themselves. They have gravitated towards a healing role either because as a group leader or a priest or as a health-care professional it is expected of them, or because they have been asked informally by others in a process which grew into a more formal recognition of their healing "giftedness," or because their individual prayer practice in community settings "naturally" moved towards healing.\textsuperscript{308}

While all Charismatic healers are, naturally, part of Charismatic communities and networks and see themselves as members of that community, the same is not true of all patients/suppliants. Approximately 30\% of attendees in large healing-service gatherings are, in Csordas' terms, "fully active Charismatics," while about 35\% are practically uninvolved in the Charismatic movement, with the remainder being active to a greater or lesser degree. 86\% of Charismatics at these healing services report having experienced divine healing, while only 59\% of non-Charismatics report the same thing.\textsuperscript{309} 77\% of participants are women.\textsuperscript{310} There appears to be very little difference, proportionally, between the genders, in the number of times a person reported experiencing religious healing or participating in healing prayer. Similar proportions across gender also apply in those who have experienced altered state of consciousness, referred to as "resting in the Spirit" by Charismatics, at the healing services or prayer

\textsuperscript{307} Csordas, 1997, 27
\textsuperscript{308} Csordas, 1997, 29
\textsuperscript{309} The relatively high proportion of reported religious healing experiences among non-Charismatic participants as versus what may be expected from the general population reflects the fact that the non-Charismatic participants are self-selecting for willingness to engage with religious healing, while the significantly higher proportion reported by Charismatics reflects the normalisation of religious healing within the Charismatic community.
\textsuperscript{310} Csordas, 1997, 31
meetings. It seems that religious healing in the Charismatic community is relatively gender neutral.

Some more numbers: 24% of the attendees at healing services surveyed by Csordas report no specific problem that brought them to the healing service. 18% report seeking a combination of types of healing, while 24% seek physical healing alone, 22% the healing of emotional problems, and 12% spiritual renewal. 40% of those seeking healing for physical issues are non-Charismatics, with 24% being fully active Charismatics, with the proportions of those seeking healing for emotional issues being 34% to 26%. Fully active Charismatics are more likely to combine categories (30% to 23.4% non-Charismatics). While non-Charismatics most frequently report seeking healing for physical illnesses, Charismatics most often mention no problem in particular. It seems that non-Charismatics are more likely to have a specific problem of which they want to be healed, while fully active Charismatics treat religious healing as a normal part of their religious life, whether or not they have a specific problem. But participants, whether fully active or with little connection to the Charismatic movement, share similar interpretative and cultural frameworks with regard to religious activity: their religious worldviews overlap or coincide.

The Charismatic movement is a modern one, arising in a society where biomedicine and its claims to rational pre-eminence are almost universally accepted. Access to biomedicine is, therefore, widely available. It is not seen as incompatible with Charismatic religious healing. 79% of Csordas' surveyed participants in healing services seeking physical healing have in fact additionally consulted a doctor or surgeon for their ailment, while 39% of those seeking

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311 Csordas, 1997, 32
312 Csordas, 1997, 33
healing for emotional issues have attended a psychologist or psychiatrist.\textsuperscript{313} Participants in Charismatic religious healing, then, utilise both rational-technical and religious-spiritual approaches to healing. We may use this divide in categories because it is appropriate to a 1980s American context: the participants may use these categories themselves, or consider healing in terms of sliding scale in which no hard and fast division exists.

Csordas identifies four different types of Charismatic healing event: public services with multiple patients; smaller services which take place after prayer meetings; services in private for a single patient; and healing prayer alone for oneself or others who are not present. Large public services generally feature a primary or principal healing minister and staff. Each person seeking healing gets at least some personal attention from the primary healer or from teams among the staff. During the service the primary healer circumambulates the church, sprinkling the assembled people with holy water and periodically touching individual heads and shoulders; the primary healer gives a sermon on religious healing; the staff lead the assembly in Charismatic music and songs; participants are invited to recount their previous experience with religious healing; participants come forward one by one for individual healing prayer with the primary healer or their staff and are anointed with sacramental oil and prayed over in a process that includes the laying-on of hands. In smaller services after prayer meetings, religious healing may take place in a separate room, in a more private context, and healers and patients are more likely to have a continuing relationship within their community.\textsuperscript{314} Healers may work in teams

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\textsuperscript{313} Csordas, 1997, Table 2.3
\textsuperscript{314} Csordas, 1997, 37; see Csordas 1997, 38 on private and solitary religious healing
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of several people, and conceive of this as using complementary religious gifts in the healing process.315

So much for the structure of Charismatic healing events and the participants therein. How do the participants conceive of their experience with religious healing? One man, an active Charismatic, who had backaches but had never attended a doctor, felt that one religious healing session had got rid of the majority of his backaches, and those that occasionally occurred thereafter were much reduced in severity. He experienced altered state of consciousness during the service, "resting in the Spirit," but only realised that a cure had taken place when time had passed without the backache returning. "I ceased to get backaches with very rare exceptions, and even those I got have been unlike the others. Every once in a while I would feel a backache just barely starting, and I would thank God for having cured it, and usually it just goes away."316

A woman, another active Charismatic, sought religious healing after a long-running problem with serious winter colds and sore throats. During the healing service which she attended, she experienced altered state of consciousness, "resting in the Spirit," but did not perceive any immediate change in her health:

"I just felt very peaceful, and nothing spectacular happened at all. I felt that things were well between me and the Lord, there was nothing dramatic, nothing special. I didn't really know [I was healed] until I started passing through those times - usually November is flu month, the worst. I really had to pass through these times of year

315 Csordas 1997, 39
316 Csordas, 1997, 68
before I would get much clue. Otherwise I felt absolutely nothing special, and I no idea [sic] of being healed, I just kind of felt, "Well, I hope I am." When symptoms presented themselves again: "I didn't have the total debilitating body weakness that I had previous times. I was able to at least creep around."317

So we can pull out some features of Charismatic religious healing. Charismatic religious healing:

- takes place within communities
- involves healing powers within individuals received from a deity
- involves healers in a confrontational relationship with otherworldly beings
- involves healers who mediate between the healed and divine beings
- is not seen as universally powerful or effective
- operates as preventative as well as therapeutic
- can put the failure of the healing process down to a flaw in the supplicant or the healer
- is often incorporated into other religious rites and occasions within the community
- involves an relationship between a supplicant and a deity
- does not necessarily take place in a fixed structure or location
- can involve altered state of consciousness on the part of the supplicant

317 Csordas 1997, 69-70
Religious Healing Among The Navajo People in the American South West

The Navajo (Diné) are an Athabaskan (or Dene) people who migrated into the area now known as the US Southwest around 1400 CE. The contemporary Navajo Nation occupies a reservation of 17.5 million acres across New Mexico, Arizona, Utah, and Colorado, whose existence and boundaries were imposed by treaty in 1868. Over 150,000 persons, most of who belong to the Navajo people, dwell in this area. Their culture and society is, naturally, affected by the American history of colonisation and racism, and by interactions with the surrounding, dominant, white/Anglo society and the politics of representation. For the purposes of this comparative exercise, we will be drawing on the work of Thomas Csordas, who conducted ethnographic research on Navajo religious healing practices during the 1990s, and the 2000 issue of Medical Anthropology Quarterly.\textsuperscript{318}

In contemporary Navajo society, three different forms of religious healing co-exist. Traditional Navajo healing exists alongside the Native American Church’s healing, as well as Navajo Christian faith healing, practiced by Pentecostal preachers with laying-on-of-hands in revival meetings, and Catholic Charismatic prayer groups who integrate Navajo and Catholic Charismatic practices. The Native American Church is a pan-Indian movement involving the sacramental use of peyote, and its religious healing is done by the roadman and involves the Plains Indian-style sweatlodge. Traditional Navajo healing is the

\textsuperscript{318}Medical Anthropology Quarterly New Series, Vol. 14, No. 4, Dec., 2000: Theme Issue: Ritual Healing in Navajo Society
only form indigenous to the Navajo people, and is practiced by a medicine man (the hataali) with chanting and sand-painting, and the diagnostician, who "works by methods such as hand-trembling, crystal-gazing, or star-gazing."\textsuperscript{319} These are distinct traditions, but in practice not wholly separate.\textsuperscript{320} According to Csordas, for Navajo people in general, sacred knowledge is both "powerful and potentially dangerous,"\textsuperscript{321} and spreading it around can weaken or abuse its power, or cause it to turn against the original holder of the knowledge. But the modern Navajo cultural landscape is heterogeneous, which must be remembered in any discussion of healing and religion.\textsuperscript{322}

Although Csordas' ethnography, and that of the investigators who collaborated on the US National Institute of Mental Health's "Ethnography of Therapeutic Process in Navajo Healing" project, treats of all three kinds of religious healing to be found on the Navajo reservation, for the purposes of this comparative exercise, we will restrict ourselves to the traditional Navajo forms of religious healing.

"The idea that health and well-being are associated with balance or harmony between an individual and his or her environment is common among many Native Americans... Harmony or balance requires the establishment and maintenance of proper relationships guided by principles such as respect, reverence, kindness, and cooperation. The

\textsuperscript{319} Csordas, 2002, 151
\textsuperscript{321} Csordas 2002, 150
Illness involves the breakdown of relationships between humans, landscapes, and superhuman beings; healing involves the reestablishment of those relationships according to the cultural norms of Navajo life.324

Traditional Navajo religious healing consists of diagnostic, curative, and restorative practices administered by religious specialists who possess a religious gift or special training or both. There are dozens of ceremonies, with healing practices varying in length from a prayer which takes an hour to a "sing" or chant which takes place over nine nights.

"Some of the procedures involved in the ceremonies include praying and singing; ingestion of herbal medicine, including emetics; bathing with yucca soap; sandpainting; consecration of the hogan; and the offering of corn pollen. The specific ceremony that is held depends on the findings of the diagnostic process."325

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323 Lewton and Bydone, 2000, 479.
324 Lewton and Bydone, 2000, 480.
325 Lewton and Bydone, 2000, 481
Relatives and family play a large role in the healing process. Relatives can play a role in making a diagnosis or in contacting a traditional diagnostician or healer.

The traditional diagnostician determines the cause of the illness, for Navajo illnesses, within the framework of traditional healing, are not defined by symptoms but rather by the forces which cause them. Illness results from exposure to certain natural phenomena, including lightning, wind, water, certain kinds of animals, ceremonies, and ghosts of the dead. Contact with these things causes "infection." The illness thus produced may manifest in various physical symptoms, although the effects of "infection" may not manifest immediately, but return to affect the person even after a long period. The cause is more important in approaching a path to treatment than the symptoms expressed, but in the narrative of illness, seldom do participants in traditional healing identify a single cause for their illness. This is particularly notable when it comes to the Navajo causal construal of cancer, where lightning plays a large but not the sole part in the sick person's ideation of what caused their suffering.

The multiplicity of possible causes, and the importance of cause to treatment, means that it is often necessary to consult a diagnostician to identify a primary cause. Knowledge of the cause is important in choosing the ceremony to be performed for healing, and affected persons often seek out more than one

327 Milne and Howard, 2000, 546
328 Csorda, 2002, 203-212
diagnostic opinion before arranging a healing ceremony, and misdiagnosis is often blamed for a failure of healing.329

There are three traditional forms of diagnosis, all of which involve a mild form of altered state of consciousness: "stargazing," whereby one either looks at the stars directly or through a crystal and receives information about the patient, "listening," whereby the pertinent information is heard rather than seen, and "hand trembling," whereby the diagnosis is interpreted through an involuntary motion of the hand.330 Ability to use these forms of diagnosis is seen as a gift which cannot be learned, but which develops spontaneously and is then controlled with the assistance of a more experienced diagnostician. Diagnosticians are not usually able to combine the different forms of diagnosis. "Hand trembling" is the form which predominates. Diagnosticians can be either male or female. The diagnosis interaction takes approximately an hour. It is initiated by the patient, who approaches the diagnostician, often at home.

"Diagnosticians... stressed that they were able to diagnose without any information whatsoever from a patient, but most also said that they typically begin by asking some basic questions... Following this exchange, a blessing is made in the form of a line of corn pollen drawn on the fingers of the hand and up the arm. Then a prayer appealing for Gila Monster's guidance is spoken, and the hand trembler goes into a mild trance. It is Gila Monster, one of the Holy People, who communicates information

329 Milne and Howard, 2000, 547
330 Milne and Howard, 2000, 548
about the patient's condition to the diagnostician. Dialogic exchange continues throughout the diagnostic encounter, with the healer acting as interlocutor between the patient and Gila Monster. According to consultants, this information most often takes the form of visual images or simply abstract "knowledge." The diagnostician then relates this information to the patient, asking additional questions about the meaning of the information received...

in general, correlating the patient's life experience with the diagnostician's knowledge is seen as validating the diagnosis."

Once the illness is diagnosed, the affected person is treated by through a ceremony performed by a religious specialist, called a singer or chanter or medicine man in English, a class of people who are overwhelmingly men. Ceremonies may also have a prophylactic purpose.

"Ceremonies attempt to redress the patient's illness performatively through identification of the patient with the diyin diné'é. In Traditional ceremonies, the medicine man speaks prayers that the patient repeats verbatim. In these prayers, the patient is progressively identified with the Holy People until he or she is literally speaking in the first person as one of the diyin diné'é... In the ceremony's culmination, the patient sits on a carefully prepared and

331 Milne and Howard, 2000, 549-550
properly blessed sandpainting. Sandpaintings... represent the Holy People in their anthropomorphic form. The deities are said to be drawn into the ceremony by their attraction to their own likenesses, and through the symbolic merger of patient and deity, healing occurs."\(^{332}\)

Traditional ceremonies generally require the resources of the family, for example in providing food for the participants of a ceremony. Ideally such ceremonies take place in a hogan, a traditional Navajo dwelling, and are attended by as many members of the patient's family as possible. The participation of family members is seen as vital to the ceremony's effectiveness.\(^{333}\) The ceremonies include songs which recount historical and religious knowledge, creating a sense of the patient's place within a Navajo universe: connecting and, in some cases, re-connecting, sickness and sick bodies and the healing process to Navajo lifeworlds. The ritual brings into higher relief the meanings associated with illness in the patient's experience within the Navajo religious universe.\(^{334}\) (Ignorance, Reichard contended in 1950, was seen a "major source of ills"\(^{335}\) in traditional Navajo healing thought.) The role of the Holy People (Navajo divinities) as creative and protective forces is emphasised. Some of the healers conceive of the ceremonies in the light of relating their patients to the different spiritual beings in terms of kinship, and of reconnecting their patients to the geography of the Navajo creation.\(^{336}\)

\(^{332}\) Milne and Howard, 2000, 546
\(^{333}\) Lewton and Bydone, 2000, 482-3
\(^{334}\) Lewton and Bydone, 2000, 483
\(^{336}\) Lewton and Bydone, 2000, 483-4
Traditional Navajo religious healing thus:

- often involves several members of a family or community
- does not involve the whole community
- involves two separate kinds of specialist
- involves altered state of consciousness on the part of the diagnostician
- involves healers who mediate between supplicants and divine beings
- involves healing as a learned technique or process
- and diagnosis as an inborn talent
- usually operates as therapeutic
- can operate as preventative
- the healing itself takes place in a specialised religious structure
- can put the failure of the healing process down to a flaw in either the process or the healer
- involves - or invokes - a relationship between the supplicant and divine beings
Religious Healing Among The Yolmo People of Nepal

For a brief consideration of religious healing among the Yolmo people of Nepal, we will draw primarily on the anthropological work of Robert R. Desjarlais, who lived and studied among the Yolmo people in the Helambu region of Nepal for over a year in the late 1980s. For the Yolmo people, health is when the "heartmind" (or *sems*) and the body are together and in concert. Sickness happens when the heartmind is disturbed, or goes away from the body. Thinking too much about faraway places, or the past, or the dead, may cause the heartmind to leave the body and dwell in those places or with those things instead, opening the way for illness to affect the person. Thinking too much about things one cannot do may result in the same outcome. "...[A] villager must 'keep the heartmind clear' by prohibiting it from dwelling on times, places, or possibilities that cannot be realised. What the body requires for health is a mindful presence in its immediate environment, free of lingering distractions." Concerns related to pollution (*sgrīb*) and to action, karma (*las*) also enter into the Yolmo universe of health and sickness. Childbirth and death bring pollution. Menstruating women are impure. Pollution is considered to adhere to bodily surfaces, causing skin rashes and/or wounds, and causing the one affected to become fatigued and slow of wit. "Consequently, feelings of fatigue or weariness can spark concerns that the body has been soiled [by pollution]. These concerns tie into notions of social status and relational selves, for 'pollution' can be transferred from one person (usually of lower status) to

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338 Desjarlais, 1992, 80
another (usually of higher status)."\textsuperscript{339} Las is related to order, and determines the course of one's life and one's misfortunes. Often illnesses will be held to be governed by karma. But the Yolmo people also "fear the whimsical attacks of malevolent shades,"\textsuperscript{340} spirits of the dead or of inimical forces that cause illness and distress. Witches, deities, demons, and the ri bombo, the "forest shaman," are all forces that can afflict a Yolmo person. Dreams are important for diagnosis. The presence of decay in one's dreams signifies ill-health; corpses, cremation grounds, walking alone at night, crossing rivers.

"Qualities of integration, balance, and fortitude tend to define Yolmo bodies in health, a sense of fragmentation, imbalance, and weariness mark them in illness...When well, the body is often said to be 'light', 'clean', and 'straight'. If the heartmind is 'big' and the 'life-span' is 'as complete as the full moon,' a person cannot be 'touched' by illness. Healthy villagers typically dream of sunrises, sporting new clothes, and climbing high into the Himalayas to drink its untainted snow."\textsuperscript{341}

Illness, for a Yolmo person, is an entropic process affecting both body and spirit. "Spiritual (and hence physical) affliction often relates to a deterioration of vital life-forces. The image of the moon highlights the process: life-forms wax and wane through the reincarnations of life."\textsuperscript{342}

\textsuperscript{339} Desjarlais, 1992, 80  
\textsuperscript{340} Desjarlais, 1992, 82  
\textsuperscript{341} Desjarlais, 1992, 83  
\textsuperscript{342} Desjarlais, 1992, 87
The shaman, the *bombo*, is a practitioner of religious healing who is called upon when a person suffers illness or distress in order to recover or restore lost life-forces. The ill person calls upon a *bombo* to divine the causes of their distress. If the results of the divination do not fit with the person's experience or perceptions, they may consider the shaman to have "worked falsely"\(^{343}\) and seek out another opinion: another shaman to perform a divination or to practice a ritual of healing. The shaman's ability to perform an effective divination relies on his (for only men are shamans among the Yolmo) relationship with the gods. The shaman is a mediating figure, who hosts deities within his body and maintains a connection with a divine "teacher" who instructs him. This teacher, or guru, is passed down from *bombo* to student.\(^{344}\) The shaman can divine through his own dreams, through examination of the pulse, and through a rice divination.\(^{345}\) If the cause of the illness revealed by the divination is minor or otherwise not serious, the shaman acts as healer without the need for an extended ceremony (referred to as "playing the drum"). But if the illness is of a more serious kind, the shaman will return to perform a healing ritual on an favourable evening. The shaman may be called in by the afflicted person themselves, or by their family. The family is usually present during the divination and the healing ritual.\(^{346}\) Neighbours and kin attend the divination.\(^{347}\)

A Yolmo *bombo*’s divination is a lengthier and more complicated practice than the diagnosis of a Navajo diagnostician: the preliminaries to a rice divination take over an hour. The shaman begins by binding his body to supernatural forces to protect it against the actions of ghosts, demons, witches

\(^{342}\) Desjarlais, 1992, 181
\(^{344}\) Desjarlais, 1992, 166
\(^{345}\) Desjarlais, 1992, 169
\(^{346}\) Desjarlais, 1992, 169
\(^{347}\) Desjarlais, 1992, 170
and so on. He consecrates his moveable altar and drum and bells - the bells will be strapped around his chest - and then offers incense to local and regional deities as purification, and calls the deities into rice cakes set up on his altar. Then he calls one of the deities into his own body in order to continue the divination, while singing and beating the drum. The god's "breath" enters the shaman, and the shaman begins to shake. The god relates, through the shaman's voice, divinations for the afflicted person and their family, and then for the neighbours present. The shaman experiences a kind of altered state of consciousness during the divination.348

Religious healing practices take place after the divination. They may first involve the "cutting" or "casting away" or "sucking out" of harms: the shaman may transfer the harm of the illness into a small animal like a chicken, which is then killed and its blood fed to the gods on the shaman's altar. This is to remove physical pains from the body. To cast away a supernatural agent which is causing harm, the shaman wears a white garment and dances and drums around the afflicted person with a dog's skull attached to the foot. The shaman calls the supernatural agent into the skull, binds it there, drags it outside, and buries it in a hole. To suck out harm, the shaman calls into himself "the heartmind of a tiger", crawls around, sniffs the afflicted person for hidden harm, and removes it by "biting" the afflicted person and then spitting fluids and insets into a bowl. Witchcraft may be made to "come undone" by slapping family members with leafy branches that have been soaked in hot water; or the shaman may "step over" and thus dominate and remove a supernatural agent, or "throw" a ghost away from an ill person.349

348 Desjarlais, 1992, 170
349 Desjarlais, 1992, 193
If the afflicted person is still weak, still not healed, after these practices, the shaman then performs a ritual to "enhance" the afflicted person's "life span." The shaman calls on the deities, and calls them to return the "life" to the afflicted person. He sings the "life forces" back into the afflicted person, starting at the feet and continuing to the head, in a chant in which the afflicted person and their neighbours and kin also participate.\textsuperscript{350}

If the divination has revealed that the illness has occurred because the afflicted person's spirit has become lost, the \textit{bombo} will go on to perform a ritual in which he searches for the lost spirit in order to return it to the body. On a blanket behind the shaman's altar, a swastika or a cross is made from rice grains on which the afflicted person must sit, often with a white garment draped over them. In front of them is a board containing certain kinds of food - curd, rice, egg, etc. The shaman then begins to drum, and calls on guardian deities to come to his assistance, while he searches in spirit for the afflicted person's lost spirit. These spirit journeys are recounted as dangerous, strenuous and frightening, but at last the shaman will "hook" the spirit and pull it back, while drumming and chanting, while other participants in the ritual will pass incense around the afflicted person, and perform other acts intended to restore "life" and the "spirit" to the afflicted person.\textsuperscript{351}

Yolmo religious healing practice, then:
- often involves several members of a family or community
- does not involve the whole community
- involves one healer and his assistants
- involves altered state of consciousness on the part of the healer

\textsuperscript{350} Desjarlais, 1992, 199
\textsuperscript{351} Desjarlais, 1992, 203-206
- involves healers who mediate between suppliants and divine beings
- involves healing as a learned technique or process
- usually operates as therapeutic
- involves healers in a confrontational relationship with otherworldly beings
- does not take place in a specialised religious structure
- can put the failure of the healing process down to a flaw in the healer
- involves a relationship between the supplicant and divine beings
Some considerations

These brief sketches of religious healing among contemporary peoples are necessarily compressed. But if we are to consider how religious healing operated in antiquity, we must consider how it operates in a variety of settings for which we have greater documentation. What can the similarities and the differences among a selection of more contemporary healing practices offer us in terms of tools to investigate, and perspectives on, ancient religious healing?

First, let us consider the similarities among the religious healing practices we have highlighted from the modern period.

All of them involve community to a greater or lesser degree: in the case of the Navajo, the community involvement might only extend as far as the immediate or extended family, whereas in the case of the !Kung the entire community is involved in the dances. In the case of Catholic Charismatics, the community involved is a community of association, whose members may or may not possess strong ties outside the context of religious gatherings. But in all cases, more individuals are involved - to a greater or lesser degree - than in the biomedical paradigm of the (economically rational) individual who chooses to consult individual representatives of the medical establishment. Or rather, more people are involved: one thing that emerges from the view of religious healing practices is how much they invoke communal bonds and call upon collective energies; how much they create, or recreate, social connections and meanings.

All these practices are intended as therapeutic, but can also operate as prophylactic measures.
All of these practices also involve a mediator or guide between divine (healing) forces and the supplicant, in their diverse ways. Even in Catholic Charismatic practice, which places the most emphasis on an individual relationship between the supplicant and the deity, the group prayer leader or healer most often assumes a mediating or initiating role in the interaction between the supplicant and the healing experience. In traditional Navajo religious healing, that mediator or guide is the *haatali*, the chanter, while among the !Kung, the healer in *kia* fits this role.

There are different ways in which the divine (healing) forces are conceived of as "present" within the healing experience, as part of the interaction: culturally contingent ways. In religious healing in the cult of Asklepios, the god's presence is assumed because of the location - the temenos, from which the god is only seldom portrayed as absent\(^352\) - or by virtue of a dream interpreted as coming from or featuring the god. Dreaming, too, is a culturally conditioned practice.\(^353\)

I use the terms "interaction" and "healing experience" because we stand at the limit of language here. Exact precision is not possible. The experiences which the patients, the supplicants, the people who want or are about to enter into a practice that falls along a continuum of "religious healing experiences" or which can be included in a narrative of healing - these experiences are culturally contingent and socially conditioned. Apart from some broad structural similarities, the outlines of the events, the processes, the practices themselves are very different. Moreover, each person will experience the practices and healing encounters in a manner conditioned by their own circumstances.

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\(^352\) As he is in the inscription concerning Aristagora of Troezen (LiDonnici B3), where the god is portrayed as absent from the Troezen sanctuary because he is in Epidauros.

"Healing experience" is a broad and vague term for a broad and vague category of practices and experiences. Likewise, "interaction" is an imprecise description for the variety of practices and encounters which take place as the patient/supplicant proceeds on a course which may be interpreted within a narrative of healing/recovery. But they are the best descriptions on hand for the purpose of drawing comparisons between broad structural similarities.

To reach for other similarities, as opposed to the marked differences between each of these approaches to religious healing and their different social and cultural orientations, is to stretch the data beyond what is reasonably apparent. Instead, let us consider the similarities between these approaches, and those in evidence in the medieval (healing) cult of the saints. From there, we can see if there is anything of particular use for us in considering the healing cult of Asklepios in antiquity.

The cult of the saints, too, has a communal or collective element. Communities here may be involved in the decision to undertake pilgrimages to healing sites: where sickness and sin are visible together in the community of origin, then the community in the form of its authority figures may impose a pilgrimage on the individual, or more generally and less formally, encourage one. But the communal element does not end once the supplicant leaves their original community of residence. For if they undertake to travel to a healing site at some distance from their residence, even if it is only a day's travel, it is unlikely they are travelling alone during their journey. Fellow-travellers - be they family members and servants or fellow-suppliants - form a community of intention, supportive of and participating in the practices that lead to the healing encounter. At the saint's shrine - or at least at the more significant shrines, in possession of a church, or abbey, or monastery - the supplicant
encounters another community, this one of religious personnel and other supplicants, alongside whom they participate in customary Christian Masses and devotions.

The practices involved in the medieval healing cult of the saints may be either therapeutic or preventative.

And, like our more contemporary examples of religious healing, the medieval cult of the saints also possesses mediators, or guides, between the supplicant and the divine healing forces. In this case, we can identify two kinds of participants in a mediating role. There are the religious personnel, who prescribe what the supplicant should do in terms of official religious activity at the shrine: attendance at masses, confessions, and other rituals, the giving of offerings or alms, the purchase of tokens to wear or of water to drink sanctified by contact with the saint's relics. These human presences do not channel healing force, or intercede directly between supplicant and divine beings in the same way as we can see in contemporary !Kung or Catholic Charismatic religious healing practice, although in a role as conductor of or guide to the rituals they may in some sense parallel the Navajo *haatali* who creates or recreates for the patient a connection to the narratives of the divine world and the original mythic creation. But they are nonetheless present.

The second kind of participant, and the one whose conceptual position within the medieval lifeworld most closely parallels the role of mediator between divine (healing) force and human supplicant which we see among the !Kung and the Catholic Charismatics, is the figure of the saint itself. The saint, by virtue of their *praesentia*, is for the medieval individual really present both at the shrine and in the divine world. Like the Nepalese shaman (*bombo*) who travels in spirit while seated beside a patient, they exist in two (or more) places at once. The
idea of the saint is thus ideally placed to operate in this mediating role. This role is reinforced not only by the concept of the saint's mortal remains as a conduit for *potentia*, but by the Catholic doctrine of the intercession of the saints. The saint's role in official, as well as popular, theology is to mediate between humans and the Christian god. The supplicants themselves do not have to approach otherworldly forces directly, but rather through the intermediary of the saint.
Bringing the Contemporary into the Past

What does this mean for understanding participation in the healing cult of Asklepios in antiquity? Above, I brought together a diverse selection of contemporary accounts of religious healing, and compared them to what is known of religious healing in the medieval cult of the saints, to see what commonalities emerge. The points they have in common provide a useful frame for considering the cult of Asklepios in antiquity. But before proceeding on this point, it is necessary to make a few observations on the limits of this method.

The anthropological accounts of religious healing draw their information from a limited period of time: a few months, in some cases; in others, a few years. Documentation is copious but it does not really allow us to witness change over time. For the medieval period, we draw on a variety of sources from a variety of places and a variety of periods to create a comparable picture: we do not have same kind of access to, the same kind of information about, how medieval people thought about the healing cult of the saints as we do with those contemporary religious healing practices whose participants have discussed or explained their approaches to religious healing. And consequently that access is complicated not only by the problems of perspective and interpretation which always attend the outsider's attempt to understand emic experiences and ways of thinking - lifeworlds - but by the absences in our information; the scattered, piecemeal nature of historical evidence for experience.

This problem is visible in the medieval material. It is multiplied a hundredfold when we come to consider the material relating to religious healing
from antiquity, and we must bear the fact that, in comparing modern and ancient evidence, we are not comparing like with like: we are comparing evidence that is chronologically limited to a space of a few months or a few years - at the very most, a few decades - with evidence from points along a continuum of six hundred years. This is not to say that we cannot make valid and useful comparisons, or suggest valid and useful ways of thinking about the ancient evidence, but it is important to acknowledge that the kinds of evidence we have from antiquity, and the paucity of direct personal testimony regarding religious healing, means that we have no way to chart change over time in emic ways of conceptualising religious healing. Suggesting possible emic experiences is ambitious, but achievable. But like-with-like comparisons between e.g. contemporary accounts and ancient Greeks are not, because of the nature of the evidence.

Let us instead highlight how commonalities between modern and medieval accounts can help us think about religious healing in antiquity. As in modern and medieval religious healing practices, community in antiquity played a role in the supplicant's experience, even if we cannot now reconstruct all of the ways in which it operated. But the other broad commonality between the modern and medieval religious healing practices is the presence of a mediating figure. What I want to consider, here, is whether or not we can see mediating figures or guides in the evidence from the healing cult of Asklepios in antiquity, and how that absence, or presence, affects how we can think about the practices of religious healing in Asklepieia.
Mediation and Intermediation

Our evidence for the internal operations of Asklepieian ritual is slight. We have discussed the archaeological evidence from our exemplars at length. The literary evidence is limited. We have no description such as comes to us from modern anthropology, but between Wealth, Aelius Aristides, epigraphy, archaeology, and analogy to other cults and their rituals, we can consider the figures that the visiting supplicant might encounter, and whether or not any of them fit the role of mediator between human and divine forces that emerges from contemporary religious healing practices.

While the specifics of the cult personnel may differ from place to place, in the ancient Greek world, every cult of Asklepios possessed a chief priest, whether elected or hereditary. At Athens the priest was selected by lot (Edelstein and Edelstein #494; IG II(2) no. 1163, 288-7BC), and probably served for a fixed term. Among his other duties, he appears to have been ultimately responsible for the inventory lists previously discussed. At Pergamon, the priesthood of Asklepios seems to have altered from an elected or appointed priesthood to a hereditary one at some point during the 2nd century BC, when the Pergamene civic authorities bestowed priesthood of Asklepios and the gods of the Asklepieion on one Asklepiades the son of Archias and his descendents in perpetuity (Edelstein and Edelstein #491; Inschriften von Pergamon II no. 251). We lack similar information on the nature of the priesthood at Corinth, at Kos, or elsewhere, although at Epidauros the priesthood was overseen from Epidauros town, and presumably appointed from among the town's elites. The
priesthood, at least in the early period, appears to have changed hands yearly.\textsuperscript{354} The inscriptions and the literary evidence, such as we have, refer to these individuals as \textit{iepevς}. Responsible for overseeing sacrifices, they were entitled to a share of the meat from the sacrifice, and in many cases the fruits and cakes dedicated on the altars - an entitlement which is comically played in Aristophanes' \textit{Wealth}. (Aristophanes \textit{Wealth} 676-681) They were, as the Pergamene inscription attests,\textsuperscript{355} and by analogy with the priests of other cults, responsible for "orderly behaviour" (\textit{eikonimias} l.24) within the sanctuary. The Pergamene priest also has authority over (\textit{kurieneronta}, being master/lord) the \textit{paida} of the sanctuary (\textit{kurieneronta teωn ierωn paianov}, l.26), which here we should probably read to mean that the priest is legally responsible for the slaves associated with the sanctuary. Slaves very rarely emerge into any kind of prominence in our evidence for ritual practice, or merely day-to-day life in ancient Greece, but we should consider how much invisible work in the daily life of a healing sanctuary - work that never rises to the level of inclusion in our sources - might have been done, and done by unfree labour. Drain-clearing. Tending to plants. Touching up paintwork. Polishing votive offerings.

It is unclear whether any particular sanctuary has a single \textit{iepevς}, or whether there could be more than one. We often find references to "priests" in the plural, but it is just as likely that this is a non-specific reference to the official holder of the priesthood and his assistants. For there are three other terms (not including \textit{doulos} and \textit{paida}) which appear in our sources and refer to personnel associated with the healing cult of Asklepios: \textit{neokoros}; \textit{thetapeuntis}; and \textit{prophiηης}.

\textsuperscript{354} Burford, A., 1969, 220-221.
\textsuperscript{355} \textit{Inschriften von Pergamon} II no. 251, Edelstein & Edelstein 491
A νεωκόρος was a temple-warden, a sacred official.\cite{356} ζάκορος is another word for a sacred official or temple attendant, and etymologists consider a ζákορος to have been of higher status than a νεωκόρος. That said, in the material related to the sanctuaries of Asklepios at Corinth, Athens, Pergamon, Kos, and Epidauros, there are many fewer mentions of a ζákορος\cite{357} than νεώκοροι. The νεώκοροι are mentioned multiple times in reference to Kos and Pergamon. It is the νεωκόρος who, in Herondas’ fourth mime, the two ladies visiting the sanctuary of Asklepios on Kos call to approve of their sacrifice of a cock as thank-offering to the god; it is the νεωκόρος who then recites a short and seemingly-official prayer; and it is the νεωκόρος who takes custody of the priest’s portion of the sacrificial animal.\cite{358} (It is also, possibly, the νεωκόρος who is responsible for opening the door to the inner part of the temple, but this is not explicit in the text.) Concerning the sanctuary of Asklepios at Pergamon, Aristides mentions νεώκοροι several times. At Orations XLVII.11 (Edelstein & Edelstein #485), the text implies that the νεωκόρος was responsible for the keys to the temple ("...the νεωκόρος was bringing back the keys. And the holy place happened to be shut at this time"). At Orations XLVIII.29 (Edelstein & Edelstein #495) we learn that the Pergamene sanctuary had more than one νεωκόρος, for Aristides names one Philadelphos as τῶν νεωκόρων ἄτερος, where ἄτερος implies that he is one of at least two - and if Aristides is using ἄτερος loosely, as ἄλλος, it could mean that more than two νεώκοροι had roles at the Pergamene Asklepieion.

\cite{356} νεωκόρος in LSJ s.v. νεωκορεω, I.1, II.2
\cite{357} Except in Aelian’s De Natura Animalium VII.13, where ζάκοροι are compared unfavourably to dogs for staying awake/keeping watch, which text is not associated with any sanctuary in particular.
\cite{358} Herodas, Mime IV.1-95, esp. 79ff
At least one νεώκόρος at Pergamon had an ongoing relationship/responsibility for one of the supplicants, for Aristides says, of the dreams which he received from Asklepios, "I was accustomed to take counsel with him concerning many of the dreams." (Orations XLVIII.35, Edelstein & Edelstein #497.)

Aristides groups the νεώκοροι at Pergamon alongside "all the θεραπευταί concerned with the god and holding positions," (Orations XLVIII.47, Edelstein & Edelstein #498) and it is to the θεραπευταί we turn next. These are mentioned but once in specific connection to the sanctuaries we listed above, in this one phrase of Aristides'. Α θεραπευτής, according to our dictionaries, is "one who serves the god" or a "worshipper" or an "attendant."359 Here, combined with the phrase τάξεις ἔχοντες, "holding positions" (or "posts"), it is possible to interpret these θεραπευταί as official sanctuary attendants, with different responsibilities than the νεώκοροι. Whether or not the θεραπευταί overlap with the παιδά of the 2nd century BC inscription earlier mentioned, it is impossible to say: perhaps these θεραπευταί even encompass medical personnel associated with the sanctuary, for we know from Aristides that there were medical professionals linked to it. Among the θεραπευταί may have been those who compounded φάρμακα - ointments: χριστά, ἐγχριστά, ἐπίχριστα; plasters: παστά, ἐπίπαστα, καταπλαστά; remedies consumed, βρώσιμα; or drinkable, πότιμα - for thanks to the Hieroi Logoi of Aristides, we know also that the healing dreams which the supplicants received often contained instructions from the god in the matter of medicine and of regimen.

This brings us to προφήτης. προφήτης is not a term mentioned in direct connection with the sanctuaries we listed above. It appears in connection with

359 θεραπευτής in LSJ, s.v. θεραπεία, θεραπευτής I.1, II.2.
the cult of Asklepios in a work of the 4th century CE orator Libanius: "Why should we not reward the priests? Why should the προφήται not take the money? You see how you've recovered your health." (Libanius Declamation XXXIV.26 Edelstein & Edelstein #538)

Who or what is a προφήτης? Are they among those temple attendants who over a century earlier Aristides called θεραπευται? Liddell and Scott informs us that a προφήτης may be one who speaks for a god and interprets his will, or an expounder of oracles, or one possessing oracular power, or just more generally an interpreter. In this context we may see a προφήτης as someone who explained the will of the god to a supplicant: either a supplicant who had not yet undergone, or did not want to undergo, incubation in search of a healing dream; or a supplicant who had undergone incubation or multiple incubations, but did not understand or wanted a second opinion on their dreams. Aristides, a good century earlier than Libanius, made no mention of such interpretative specialists at Pergamon, but Aristides is opaque at best when it comes to more than fragmentary specifics - and he does allow that it was his custom to discuss his dreams with one of the νεώκοροι of the sanctuary.

Libanius is a man of the 4th century, born in a century where Christian religion had begun a lasting ascendancy in the Roman world. Although he did not himself become Christian, we do not know if he had direct personal knowledge of Asklepieian cult: the orations in which it is mentioned suggests that a son went as a supplicant to the god on a father's behalf, and goes on to castigate Asklepios and the cult of the god and to complain of the amount of money the son vowed. We do not know, either, to what extent the practices of the 4th century and of the places where Libanius found himself - Antioch, the

360 προφήτης in LSJ, s.v. προφητάζω, προφήτης, I.1, I.3, III.3 539-1540.
city of his birth; Athens; Constantinople; Nicomedia - may be said to apply to the practices of the cult of Asklepios two centuries earlier in different places.

Unlike modern anthropological studies, which deal with a discrete period, and which can usefully speak of an "anthropological present," our evidence for ancient healing cult is rather a collection of fragments scattered across time, from which we must assemble an image or images. The image may make sense, but we have to bear in mind that it is a constructed thing, and that we may never have all the pieces to the jigsaw puzzle - or be able to put them together in the right order. We will assume that the προφήτης existed alongside or among such θεραπευταί as would generally have been associated with a sanctuary.

In addition to the evidence discussed above, there are a handful of reliefs which depict Asklepios and a supplicant, accompanied by others. These are not plentiful -- and other representations of Asklepios with supplicants are even thinner on the ground: Asklepios is seldom represented in vase painting, for example -- but they exist. A fourth century BC relief from Athens (Athens NM 1841, Lexicon iconographicum mythologiae classicae Asklepios 54) depicts Asklepios attending a supplicant, who is accompanied by two robed figures, who may or may not be sanctuary personnel. A relief from the end of the fifth century BC found at the Piraeus (Piraeus Museum 405, Lexicon iconographicum mythologiae classicae Asklepios 105) depicts Asklepios in the act of attending a female supplicant, while Hygieia, two women, a man, and a child look on: they might be family members, or associated with the cult. Another relief, this one fragmentary and from the Athenian Asklepieion (Athens NM 3325, Lexicon iconographicum mythologiae classicae Asklepios 108), depicts Asklepios extending his right hand over a reclining ill person, while a female figure kneels in the foreground. It is unlikely that this female figure is
associated with the cult, rather than the sick person, although we cannot say for
certain. But where sick persons are represented on reliefs in the presence of
Asklepios, they are frequently accompanied by other figures, and some of these
may be cult personnel.

What does this mean for the existence (or not) of a mediating role between
supplicant and divinity? We have the ιερεύς, whose duties seem to involve
official oversight and the making of sacrifices, especially at the larger festivals;
the νεωκόρος, who seems to have had duties involving the day-to-day
operations of the sanctuaries and the saying of prayers over (some) of the
sacrifices; individual θεαπτευτής, whose roles are difficult to reconstruct but
who may have included medical attendants and those who compounded
medicaments; and προφήτης, who may have interpreted the will of the god for
supplicants, either in the form of dream interpretation or in some other
manner. We cannot identify a particular figure whose role involved them
directly in a process of mediation or intermediation between human supplicants
and divine forces. The priest has a role at the sacrifice of offerings, but this role
is one common to the majority of cults. The evidence does not extend far enough
that we may suggest his role extends any further in cults that have religious
healing practices. It is possible that some figure among the sanctuary personnel
may have entered into a mediating role like those which we glimpse in the
anthropology of modern religious healing practices, but there is another
possibility to consider also. It is possible that the god, in Greek antiquity, was
conceived of as present in the sanctuary, as dwelling in it, in such a way as to
obviate any need for a human mediator. Although Asklepios is not tied by
mortal remains in the manner of the saints, it is possible that, much as the
potentia of the medieval saint’s bones connected human supplicant with divine
power through the medium of the saint present both in heaven and in the mortal remains, the act of entering the temenos - with the right purifications, with the right acts - brought the supplicant into the presence of divine power without the need for the mediation of any other mortal individual. The landscape of the ancient sanctuary may have played host to the god's real presence in a manner that is not paralleled in the religious healing practices studied anthropologically which we have drawn upon for comparison, and the mythic associations with the god claimed by most of the larger sanctuaries may have added an extra dimension to the idea of that presence. The sanctuary belongs to the god, yes; but the god also belongs to - is claimed by - the sanctuary in a manner that reinforces with its symbolic, mythic and conceptual weight that the supplicant exists within a landscape and moves through a space that is witness and testimony to the god's presence and power.

A landscape capable of impressing that power upon the supplicant's body.
Conclusion

At the beginning of this project, I set out to investigate five significant questions, of which the foremost was:

*What did the ancient Greek person experience when they sought religious healing at cult sanctuaries of Asklepios?*

The other four questions I asked - How can we know about their experiences? What role did religious healing play in ancient Greek social and cultural understandings of illness, wellness, and the body? How can we understand the ancient Greek version of religious healing in the cult of Asklepios in comparison to other kinds of religious healing? Are there any universal aspects to these sets of experiences that we can identify? - inevitably follow from this primary inquiry.

To frame a historical question in terms of *experience* is to open a can of phenomenological and epistemological worms, and to force oneself to consider not only the nature of sense-perception and the nature of what we know about the construction of *knowledge*, but also the question of being itself.

Humans apprehend the world through our skin, a sensory organ that covers the entire surface of our bodies: through touch and pressure and sensation. Humans apprehend the world through taste, and smell, and hearing, and sight. But how humans *understand* what we sense is conditioned by our contexts, individually, socially, and culturally. *Experience* is sense-perception in that conditioned context of being.
"[C]onsciousness projects itself into a physical world and has a body, as it projects itself into a cultural world and has habits: because it cannot be consciousness without playing upon significances given either in the absolute past of nature or in its own personal past."


"The kind of Being which belongs to Dasein is rather such that, in understanding its own Being, it has a tendency to do so in terms of that entity towards which is comports itself proximally and in a way which is essentially constant - in terms of the 'world'."


Being, essentially, is always Being-in-the-world. The self - or, to use Heidegger's concept, Dasein, the being-there - never exists separately from the world. To come to terms with experience one must come to terms not only with Being but with the world in which it understands itself.

In the preceding chapters I hope to have demonstrated to some extent the kinds of knowledge one needs to take into account to make a preliminary sketch of the experience of religious healing in the cult of Asklepios in antiquity. One needs to (re)construct as much as possible, in as many dimensions and layers as possible, the *world* in which that religious healing took place, before one can begin to approach the question of experience in relation to it.
Accessing religious healing filled a need for the suppliants: it allowed them to conceive of powerful beneficial forces (in the form of the god) acting on their ailments. Alongside explanations for illness and cure as circulated by physicians in medical texts, orations, and general practice, and as circulated by magico-religious "superstitious" practitioners, religious healing provided suppliants with a causative framework into which they may fit changes in their illness state. Although the absolute efficacy of religious healing in the cult of Asklepios in antiquity cannot be assessed, there exists a strong likelihood that it did provide some relief from suffering, even if this relief may only be ascribed to the placebo effect. Communal participation in the rituals of the sanctuary reinforced ways of thinking about sickness and health, just as the landscape and built structures of the sanctuary encouraged certain ways of moving and being within and around the temenos area. The temenos was a place of encounter between supplicant and the god; between the sick and suffering human body and the potential for relief from suffering: cure. The encounter between supplicant and religious healing did not necessarily replace the encounter between patient and iatros, but paralleled it; and just as the encounter between iatros and patient did not always lead to satisfactory outcomes, neither did the encounter between supplicant and religious healing. The image of the god may be one of a supremely effective physician, but just as with mortal physicians, it may take some time before relief from suffering takes place - if indeed it does. The suffering body - whether it be wracked by coughing or fevers, subject to cramps or dysentery, aching, limping, blind, dropsical, injured, weak, or some combination of these or more - comes to the sanctuary of Asklepios with its somatic attention directed towards the potential of relief. The supplicant pays attention with and in their body.
Religious healing in the cult of Asklepios shares similarities with other forms of religious healing, but it also possesses its own specific differences that make it worthy of study in its own right. This project presents a preliminary sketch, and thus limits itself to focusing on three sanctuaries which may be seen as exemplars of Asklepieian cult on both large and small scales. Further study is necessary in terms of sanctuary construction and use of landscape and topography in and around Asklepieia may reveal further similarities and patterns from which one could derive conclusions relating to movement within the space of the sanctuary and set the experiences of sanctuary users on a potentially more general footing. Treating the Greek material with similar approaches to those in Laurence and Newsome's *Rome, Ostia, Pompeii: Movement and Space* (2011) may prove a fertile avenue of research: sight has long been privileged in our approach to the past, but if attention is paid to soundscapes as well as sightscapes, to haptics, and to smell and taste, we may come to a deeper and broader understanding of how people in antiquity used and experienced space.

Research into relating the experience of religious healing to the practice of *ta iatrika* in antiquity, and the image of healing divinities across the ancient world in comparison with each other, with magico-religious healing practitioners, and with physicians, may well prove a fruitful arena: an investigation into how the social world of antiquity conditioned the experience of bodily suffering and how the presentation of *solutions* to suffering may have conditioned the experience of seeking relief from suffering has not yet been completed in any real depth, and may provide valuable models for thinking more deeply and more intimately about the lived experience of those who inhabited the world of antiquity. It is almost impossible to divorce the study of health and sickness in the past from
the categories imposed by modern biomedicine, but in order to understand how the ancient Greeks saw the body and its sufferings we must fit our understandings to their categories: we must inhabit, as far as possible, their skins and their views.

Health and sickness - the suffering self, in all its varied permutations - is an enduring human concern. The evidence, and our theoretical models, impose their own necessary limitations on what we may know about life, health, sickness, suffering, and death in the ancient Greek world, but while the past may be a foreign place, where "they do things differently," it is not so foreign as to be unrecognisably human. When we reduce the human dimension of history to plans and outlines and a sterile recapitulation of facts or surmises - when we elide the sweaty, painful, messy, squishy, essential complicated meatiness of the sense-experience that makes up the human perceptual world - we do both it and ourselves a disservice. "The dead were and are not," as G.M. Trevelyan once said. "Yet they were once as real as we."361 Investigating the experiential dimension of ancient practices, particularly when those practices are bound up with universal human concerns, gives us the tools to bring us closer to the reality of those dead generations, and to see how they are - and are not - just like us.

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Plates

Plate 1. Topographical Plan of Epidauros Sanctuary, including Sanctuary of Apollo Maleatas
Plate 2. Topographical map of Epidauros region.

Plate 3. Central temenos area at Epidauros, Classical period.
Plate 4. A sketch of initial entry to and movement around the sanctuary of Asklepios at Epidauros. 1. Enkoimeterion. 2. Tholos. 3. Temple of Asklepios. 4. Altar of Asklepios. 5. Building E.

Plate 10. Asklepieion at Athens, as above. The arrows indicate potential ways of movement around the sanctuary.
Plate 11. Plan of Asklepieion at Corinth, Classical period.

Plate 12. Plan of Asklepieion at Corinth, including the cisterns attached to the lower court area.
Plate 13. Plan of the Asklepieion at Corinth. The arrows indicate routes and possible ways of moving about the sanctuary.

Plate 15. Athens National Archaeological Museum #1407. Discovered at the Piraeus near the site of the Mounichia Asklepieion. Marble relief. Asklepios (right, next to coiled snake) faces a family of himation-clad worshippers, while a slave leads a sacrificial ram.

Plate 16. Archaeological Museum of Piraeus #405. From the Mounichia Asklepieion at the Piraeus. Pentelic marble relief. Depiction of invalid being healed. Hygieia stands far right, clad in a chiton, facing left. Beside her, Asklepios places his hands on the shoulder of the relief's central figure, a woman lying on a bed. The woman faces the viewer. Left, a group of four -- two adult women, an adult man, and a child -- stand in an attitude of worship.
Plate 17. Athens National Archaeological Museum #272. Votive statuette of Hygieia, white marble. From Building K., Sanctuary of Asklepios at Epidauros. Inscribed "Lysimachos to my Saviour Goddess and to Telesphoros."
Plate 18. Athens National Archaeological Museum #1809. White marble. Statuette of Asklepios as a youth, holding a scroll in his left hand, and in his right, a staff twined about with the sacred snake. From the Sanctuary of Apollo Maleatas, Epidauros.
Plate 19. Archaeological Museum of Ancient Corinth #V 132. From the sanctuary of Apollo and Asklepios at Ancient Corinth, late 5th-4thC BC. Pink clay with matt orange slip. Votive dedication of a pair of ears; part of the plaque restored.

Plate 20. Archaeological Museum of Ancient Corinth #V 128. From the sanctuary of Apollo and Asklepios at Ancient Corinth. Late 5th-4thC BC. Pink clay with orange slip. Traces of white slip and orange-red paint. Votive breasts. Part of plaque and part of breasts restored.
Ratio of gendered names in Athenian Asklepieion inventory lists

- Men's names: 136
- Women's names: 101
- Uncertain names: 8

Plate 21.