

Review of Jason S. Mokhtarian, *Medicine in the Talmud* (Univ. of California Press, alterna2022)

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The first thing I did after reading this book was to order a copy for my brother, a retired physician with a life-long interest in the Talmud. For someone interested in both Talmud and medicine, this book is a good read as an introduction to the topic, since it poses appropriate general questions about Talmudic medicine without overwhelming the reader with too many technical details. The endnote -- rather than footnote -- format spares the casual reader too much data which may interrupt the narrative, and the lack of any Hebrew or Aramaic citations from the Talmud, in either original script or in transliteration, points to a 'trade' book, intended for a popular readership. This point is not a criticism, since there is a general need for monographs which make academic research accessible to a wider public.

The basic approach of the book as an introduction to the topic is sound, since it provides the history of scholarship on Talmudic medicine and contextualises the topic within the contemporary medical milieu of Late Antiquity. Mokhtarian's assessment of Talmudic medicine as 'marginal' is essentially correct, since rabbis were not physicians intent on contributing to medical knowledge; the Talmud is hardly a medical textbook. One main thrust of Talmudic medicine was to adapt existing systems of medicine -- best known to us from Greek and Latin, Syriac, or Akkadian cuneiform sources -- to Jewish law, in response to halachic questions of what treatments or procedures were permitted on the sabbath as well as specific issues regarding circumcision, menstruation, or even dietary laws. Hence, Talmudic medicine was hardly in competition with theories and practices known to contemporary physicians and scholars, but on the other hand reflects the medicine of its

day current in Greco-Roman Palestine and Babylonia, the two great (but not the only) centres of Jewish life.

Mokhtarian's book also brings medical-magic into the picture through comparisons with Aramaic incantation bowls from Mesopotamia dating to the somewhat later Geonic period, in contrast to medical traditions from the Talmud, which tend to date from the 2nd to 4th centuries CE, judging by statements attributable to known rabbinic authorities (e.g. Mar Samuel, Rav, Abbaye, and others). Mokhtarian makes the point that magic or magical procedures within medical contexts are not the same as magical incantations within their own genre (such as in incantation bowls or magical amulets). Nevertheless, the conundrum is that although incantation bowls can refer to disease as a legitimate magical objective, even employing medical terminology, Jewish magic as we have it from the Talmudic or Geonic period is incomplete; it neglects recording the magical rituals and procedures (e.g. fumigation, massage, incense) which we know accompanied incantations or recitations in all systems of ancient magic. The concise references to magical rituals which occasionally accompany Talmud medical recipes are equally typical of ancient medicine, but this in no way undermines the medical rather than magical orientation of the Bavli prescriptions. In the eyes of practitioners, medicine and magic were separate disciplines and practices with some mutual goals and similar practical applications.

Furthermore, this book draws attention to (without studying in detail) an anonymous medical handbook or vademecum in Tractate Gittin (folios 68b-70a), which extends over several pages of the Talmud and provides recipes and magical remedies for a variety of medical conditions listed from head to foot, the typical ordering of such medical data. The importance of this vademecum within the Bavli cannot be overestimated, for the following reasons. 1) The text is in Babylonian Aramaic with no cross-references in the

Jerusalem Talmud or any other sources from Palestine. 2) It is unusual to have such a lengthy passage in the Talmud without attribution to any rabbinic source, although it follows almost immediately upon another long unattributed and atypical passage about Solomon and the demon Ashmedai. The fact that these two texts occur together may not be coincidental, associating narratives on themes of magic and medicine. However, the medical vademecum is particularly worthy of notice, as Mokhtarian rightly points out, because of similarities with recipes in the third section of the Syriac Book of Medicine, published by E. A. Wallis Budge in 1913, based on a copy of a Syriac medical manuscript made for the British Museum in a monastery near Mosul. There are several things to say about these Syriac recipes, not mentioned by Mokhtarian. 1) Both the Gittin Vademecum and the Syriac medical recipes have numerous Akkadian loanwords, which is surprising, since the usual assumption is that Akkadian was no longer accessible after the first century CE. It seems likely that Akkadian and cuneiform was legible for longer than previously thought. 2). The Syriac and Aramaic of both sources respectively represent Eastern dialects, with virtually no evidence of Greek loanwords among recipe ingredients. 3) The verbal instructions (for applying the materia medica) in both the Gittin Vademecum and Syriac Book of Medicine have virtually identical forms, probably reflecting Syriac influence in the Gittin recipes. The inference to be drawn from this evidence is that the Gittin Vademecum represents a borrowing from local secular science, which is remarkable, since the Talmud is not conceived as a text which cites external texts or traditions from non-Jewish sources.

Mokhtarian has had to make choices in how he makes a case for the transmission of medical knowledge in the Talmud. He rightly points to a couple of key figures with serious interest in medicine, such as Mar Samuel from the 2nd century CE and Abbaye from the 3rd-

4th centuries CE. The latter scholar contributed some 24 recipes to the Bavli, with almost all introduced by the same phrase in Aramaic, *'mrh ly 'm*. Mokhtarian has opted for the traditional standard translation of this phrase, supported by gender-based studies of Talmud, that 'my mother told me'. The difficulty, as pointed out already in the Talmud itself, is that Abbaye's mother died in childbirth, and this translation begs the important question whether women were privy to technical medical knowledge which also included numerous Akkadian loanwords. An alternative suggestion was not adopted in Mokhtarian's book, that the same phrase can be translated, 'an expert told it to me', with the word *'m* (usually translated as 'mother') representing an apocopated form of the word *'mn*, referring in this case to the Akkadian *ummânu*, the highest academic title within the Babylonian scribal academies. Colophons of technical topics on cuneiform tablets often include the key phrase, *ina pî ummâni*, 'from dictation', literally 'from the mouth of the master'. It is much more likely that Abbaye was citing medical prescriptions with Akkadian terminology which he had learned from an expert on the subject, rather than from a woman who is somehow to be identified with his deceased mother.

Other points of detail can be challenged, such as Mokhtarian's facile identifications of diseases (e.g. scurvy); retrospective diagnoses of ancient diseases are enormously difficult to substantiate, based upon simplistic descriptions unaccompanied by illustrations or adequate testimony of pathologies known today from biomedical tests. The same difficulty applies to materia medica (e.g. sal ammoniac), which are translations from dictionaries based upon tradition rather than on any laboratory analyses of materia medica. Mokhtarian further adopts the old canard that rabbis somehow indulged in brain surgery (or any other kind of surgery), which is highly unlikely. Trepanation or drilling into the skull is known from archaeological finds rather than from textual descriptions and remains a

mystery. Even the famous Edwin Smith Surgical papyrus from Egypt only described superficial forms of 'surgery' normally affecting the skin, and there is little evidence for anything as complicated as abdominal surgery; surgery is hardly mentioned in Babylonian medicine.

There is an important element missing from this book: philology. First, the task of translating medical passages in the Babylonian Talmud is challenging, for a variety of reasons. The tendency is for modern standard translations into English to rely almost exclusively on the medieval commentator Rashi, whose understanding of the meaning of the text is often uncritically adopted. Although Rashi's insightful and instructive comments are always worth noting, he nevertheless lived a millennium before the decipherment of cuneiform and has no way of comprehending the presence of Akkadian loanwords in Bavli medicine. For anyone interested in general questions of Jewish law (*halachah*), the accuracy of translations of medical passages is usually not crucial to the overall argumentation on points of law, but from the perspective of history of medicine, precise translation is essential, requiring a critical view of the printed text of the Talmud in comparison with manuscript variants. Mokhtarian has referred in the notes to consulting manuscripts, but the precise readings themselves are rarely specified, although to be fair, he has not mechanically reproduced the standard translations of the Bavli text (e.g. Soncino, Sefaria, Steinsaltz). However, in many cases of code switching, Bavli passages alternate between Hebrew and Aramaic, reflecting the editing of the Talmud centuries later (probably 6th or 7th century CE). The problem is that the casual reader, unless specifically told, has little idea whether an English translation of a Bavli passage represents Hebrew or Aramaic. This means that while Mokhtarian's presentation of the Bavli sources in translation are certainly an improvement on the translations given by Julius Preuss in his famous 1911 book

on Rabbinic medicine, it also repeats Preuss' classic error: medical passages in Hebrew usually reflect texts originating from Greco-Roman Palestine, which had a very different medical culture than Parthian-Sassanian Babylonia, which preserved local medical traditions going back to Akkadian. Although Mokhtarian is aware of this distinction, his translations of medical passages obscure it.

Much of the way this book describes Talmudic medicine reflects the latest research on the topic from other scholars, without necessarily reproducing the evidence leading to the conclusions accepted by Mokhtarian. All of the unsubstantiated details in the book can be accepted as part of an overview of Talmudic medicine and suitable for a general treatment of the topic, which otherwise would require intensive analyses on almost every single point of detail, in terms of symptoms, diseases, drugs, treatments, technical terminology, and general understanding of medical realities of the period. The point is that Talmudic medicine requires a thorough knowledge of ancient medicine as well as the ability to decipher Talmudic passages, which are often corrupted in transmission and no longer fully understood even to the later editors of the Talmud. However, in a popular book of this kind, there is an understandable pressure to portray ancient medicine as a technical discipline which somehow relates to our modern views of medicine, in other words, painting the canvas with broad brushstrokes of the impressionist without the minute detail of the pre-Raphaelites.