It is not always easy to convert a dissertation into a book, since different objectives are required. A thesis needs to demonstrate the author's competence as a researcher while convincing a supervisor and small jury of examiners of the thoroughness and originality of the work. A book, on the other hand, does not require the reader to know in advance what will be presented in each chapter, nor does a book have to refer in footnotes to every scholar commenting on a specific text; even so, merely providing a footnote reference in the form of a name and date is only minimally informative. Ideally, a book should offer a convincing narrative which is based on solid evidence rather than largely on speculation. This work has all the hallmarks of a dissertation, not a book.

Beginning with the positive contribution this study makes to Babylonian medicine, the author introduces the idea of Carlo Ginsburg-style 'microhistory' and applies it to Babylonian medicine. To this end, the book examines in detail all of the tablets from 7th century Assur which have the name of the exorcist Kiṣir-Assur in the colophon, a collection comprising 73 cuneiform manuscripts, with an additional 13 tablets which may belong to this scholar. These tablets were all found in a single house in the city of Assur belonging to Kiṣir-Assur's multi-generational family of experts bearing the title of mašmaššu, 'exorcist.' Although this house produced some 1242 tablets, with many relevant to magic, medicine, and pharmacy, it has never been completely excavated, which leaves open the possibility of further tablet finds which could substantially alter the picture presented in this volume. The basic premise is that Kiṣir-Assur's personal academic and professional career is differentiated in five different titles which are found in the colophons of his cuneiform tablets, namely his status as 'junior (lit. 'minor') apprentice' (šamallû šehru), 'apprentice' (šamallû), 'junior exorcist' (mašmaššu šehru), 'exorcist' (mašmaššu), and 'exorcist of the Assur Temple'. Had
the book stopped at this point, one would have no arguments with this scheme. The problem arises with the assertion that these Kişir-Assur's titles can be used as guides to determine the parameters of his scribal training and education, scholarly qualifications and knowledge, as well as his interests in medicine and healing rituals, as primarily reflected in the contents of the cuneiform tablets bearing colophons with Kişir-Assur's name. It must be emphasised that there is no external metadata describing Kişir-Assur or other members of his family or profession, which could be used to flesh out the information from the colophons. So in essence the main question boils down to how much these ancient medical manuscripts can inform us about the scholars who produced them.

Proper names appearing in cuneiform tablet colophons usually reflect either the owner of the tablet or the scribe which copied it; there is no ancient Babylonian term for 'author', particularly since identifying authorship was not considered to be a requirement of cuneiform literature; most is anonymous. Even if authorship is known for a particular text (e.g. the Epic of Gilgamesh), this is often a matter of attribution rather than reliable evidence for identifying the author, nor is this situation unique to Mesopotamia; much of the Hippocratic Corpus is anonymous while attributed to Hippocrates. The situation is comparable to modern films: although we often acknowledge the main actors and even director of a famous film such as Casablanca, who wrote the screenplay? This particular bit of information is not always crucial. To relate this information to the works of Kişir-Assur, it is not possible to determine which -- if any -- of the tablets bearing his name in the colophon represents an original composition from his own stylist, rather than a copy of an existing manuscript. Many of his tablet colophons, in fact, mention that the text was copied from a wax tablet or from an original from another city, further reinforcing this point. So the question then remains, how much specialised expertise did a scribe require when making a copy of a tablet, and how much does his copy represent advanced knowledge of a subject?
Arbøll's tacit assumption -- with no attempt to support it -- is that tablets reveal a great deal about their copyists. For instance, he states that Kišir-Assur's copies of medical texts during his junior apprentice phase 'provided him with the knowledge necessary for producing and providing a therapeutic treatment for the disorders in question' (p. 45). By the same token, Kišir-Assur's junior apprenticeship copies of tablets dealing with snakebite and scorpion stings gave him insights into physiology, since he could observe the effects of venom. Copying a recipe designed to cure a horse rendered him qualified in veterinary medicine, and by extension human physiology. As a junior exorcist, Kišir-Assur's copy of a child-calming incantation was enough to establish his credentials in paediatrics. This same pattern is continued throughout, without any attempts establish the validity of this logic, but this is not the only fly in the ointment.

Retrospective diagnosis of ancient disease is a dicey business, as most historians of medicine would agree. An exception is the 2005 work of philologist J. A. Scurlock and physician B. R. Andersen, *Diagnoses in Assyrian and Babylonian Medicine*, which attempts to identify symptoms and diseases in cuneiform medicine with modern classifications of disease, despite the fact that no ancient physician or diagnostician had stethoscopes, microscopes, or even thermometers, with virtually no knowledge of internal human anatomy based on dissection. Arbøll refers to Scurlock and Andersen repeatedly as supporting evidence for his own use of retrospective diagnosis. For example, Arbøll enumerates in detail the effects of snakebite and scorpion sting as abnormal coagulation, hypotension, ischemia, hemiparesis, nystagmus, priapism, hypothermia, mydriasis, as well as more basic symptoms, although no ancient physician would be able to detect many of these; nevertheless, Arbøll then makes the connection between the Akkadian term for venom (*imtu*) and its other meaning of 'saliva'. Since ancient Babylonian lexicography also linked *imtu* 'venom' with *martu* 'bile', Arbøll's next step is to assume that other fluids were, like venom,
'believed to possess some of the same awe-inspiring qualities that affected various bodily
processes' (p. 79). Finally, since saliva and phlegm were often themes associated with
witchcraft, the inference is that observable physical effects of venom influenced concepts of
witchcraft (p. 80). Needless to say, the loose logic behind this argumentation, when taken
apart, leads to a cul de sac, since incantations and rituals against venom and witchcraft, which
long predated Kišir-Assur, never associated these concepts, nor is there significant evidence
for poison antidotes in Mesopotamia, comparable to Classical theriac.

Not all of Arbøll's many assumptions are to be discounted. There seems little doubt
that Kišir-Assur was an impressive scholar and exorcist, with serious interests in medicine.
One colophon describes him as an ummânu (p. 286), which was the highest rank within
Babylonian academies, comparable to 'professor'. Nevertheless, this does not mean that one
accepts Arbøll's general observation (p. 4) that 'Mesopotamians did not distinguish between
what we today label as "magic" and "medicine".' One can indeed distinguish between
disciplines and how these are received and applied. The Assur archives preserved three
different catalogues or lists, providing systematic details regarding the disciplines of
medicine, magic, and prognosis / diagnosis; although all three catalogues represent distinctive
categories of healing arts, they are nevertheless clearly independent branches of learning
presented in highly organised formats, based upon separate methodologies and theories, and
all of this some two centuries before Hippocrates; see the 2018 studies edited by U. Steinert,
Assyrian and Babylonian Scholarly Text Catalogues. Arbøll knows this material and refers
to it but does not draw the right inferences. Not only was Kišir-Assur a scholar and teacher,
but he often copied tablets 'for practical purposes', ana šabat epēši, which does not
necessarily imply that he made 'house calls', as Arbøll concludes (pp. 129ff.); these tablets
could have been copied for pedagogic purposes, since there is no evidence that Kišir-Assur
actively practiced medicine or prescribed drugs. His interest in medical matters may have
been exclusively academic, with the difference being that copying a medical recipe is not the same as composing one. Once a book is written, any literate person can read it or even copy from it, but not necessarily write it. The cuneiform archive of Kišir-Assur raises our awareness, therefore, of the wide range of interests of highly literate Assur scholars, but this information does not allow us to distort the general picture of scientific disciplines or blur distinctions between them.

Despite disagreements with the logical premises underpinning this study, the author has shown his competence in being able to navigate the choppy waters of Babylonian medicine with skill and dexterity.

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