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Teeth in the Hippocratic Corpus

One of the subjects in the Hippocratic corpus that receives little attention among scholars is the teeth and their oral pathology and hygiene. The teeth, particularly their nature, development, and the various ailments that concern them form intriguing discussions in various treatises, including *Fleshes* 12-13, *Dentition*, *Epidemics* iv 19, and *Joints* 30-34. In my paper, I consider these treatises (and others) to investigate if some sort of unified understanding of the teeth and oral pathologies emerges from the Hippocratic corpus. Thus, my paper will be valuable not only for adhering to the conference theme about the possible unity displayed among various treatises of the corpus, but also for treating a subject that has largely been ignored. I will also discuss the connection between Hippocratic medical reflection on the teeth and other views prominent in antiquity, particularly the more philosophical views of Plato and Aristotle, along with the views of non-Hippocratic medical writers such as Diocles of Carystus and Praxagoras of Cos.

Interestingly, Aristotle often reflects on the teeth and their nature in many of his own writings, e.g. in *Generation of Animals* ii 6 and v 8, *Parts of Animals* ii 9 and iii 1, and *History of Animals* ii 1-6. There is some suggestive overlap between Aristotle and the Hippocratics on certain issues regarding the teeth. Aristotle, like the author of *Epidemics* iv 19, counts the teeth, arguing furthermore that the number of teeth correlates with the length of life (generally, the more teeth an animal has, the longer its life). Also, Aristotle engages the question of when animals develop their teeth (in a polemical context with Democritus), and attempts to determine the relationship between suckling and the development of the teeth, similar to the author of *Dentition*.

While my paper will focus on the Hippocratic treatises, it will have interest for those involved in classical philosophy as well. Therefore, I believe my paper is a good candidate for inclusion in the *Colloquium Hippocraticum*.

Roberto Lopresti
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Perceiving the coherence of the perceiving body
Is there such a thing as a “Hippocratic” approach to perception?

How appropriately can we discern between “Hippocratic” and “non-Hippocratic” - and then between medical and philosophical - approaches to sense-perception and cognition, seen in the context of the scientific debate flourished in Greece in the fifth century B.C.? It is from this specific question that the argument of this paper stems, aiming to discuss the old-raised issue of the (philological, historical, epistemological) unity of the *Hippocratic Corpus*, and to investigate how plausible are the attempts to trace a system of shared patterns by which a cluster of theories, doctrines and mentalities, collected in the same *Corpus* in spite of their heterogeneity and thus traditionally labelled as “Hippocratic”, may be effectively linked and correlated.

Actually, whoever intends to shed light on representations of cognition and sense-perception as found in the Hippocratic treatises has to face the greatest variety of theories, which range from the *On the Sacred Disease*'s encephalocentrism and the theory of ψυχή as expounded in *On Regimen* to the haemocentrism approach of the treatise *On Breaths*. Being these doctrines openly conflicting, they differ not only in terms of rationale, but also for achieving highly unhomogeneous levels of conceptualization and expository coherence. Besides, the authors of some of these treatises (that is the case of *On the Sacred Disease*, for example) show a strong polemical attitude towards adversaries, so to confirm – at a first sight, at least - how controversial and hazardous may result any unitary approach to the *Corpus*.

Each of the “Hippocratic” treatises just mentioned seems rather to share a common ground made of questions, theoretical interests and epistemological issues with the early philosophical investigations into nature, the nature of man and his cognitive processes (*physiologiai*) by the so-called “Presocratic” thinkers. Sometimes these commonalities may prove rough and maintained at a superficial level of interaction; sometimes they can originate in a profound and original effort made by the “Hippocratic” authors to mix, remodel and rethink “Presocratic” issues and doctrines in order to make them consistent with their own theoretical and medical aims.

Now, if we consider, on the one hand, that some *physiologoï* used to practise as physicians while many “Hippocratic” doctors clearly displayed philosophical attitudes, and, on the other hand, that the use of the term “Presocratic” as generalizing historical and philosophical category is not less strongly questioned than the use of the term “Hippocratic” as doctrinaire label, both these facts make it much harder to establish 1) if we can speak of a Hippocratic specificity in representing sense-perception and human cognition, and if so, in which terms; 2) if we can rather draw a sort of boundary line between a mainly medical/observative and a mainly philosophical/conjectural approach to these issues, overpassing the conventional classification in the two distinct fields of “Hippocratics” and “Presocratics”; 3) if, otherwise, the only things we can do is to denounce how aleatory and fragile may prove, when arbitrarily hypostatized, any chain of commonalities between cluster of treatises, and consequently to admit the

impossibility of grasping any “Hippocratic” or, at least, “medical” specificity about theories on cognition.

In this paper I shall pass a number of remarks on the relations between (the so-called) “Hippocratic” and (the so-called) “Presocratic” theories and representations of sense-perception and cognition.

I shall aim to investigate which degree of originality this representation of the body may have had in medical terms (as well as the observative circumstances in answer to which it presumably took shape) and eventually, in the light of such investigation, to address some provisional remarks and suggestions on the effectiveness of the term “Hippocratic”.

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Bodily features in the Corpus Hippocraticum:
remarks about the method of classification of individuals into groups

My purpose is to comment on the method of classification exhibited by the Hippocratic physicians when they attempted to form “groups” of patients, trying to situate their remarks in the larger frame of physiognomical and other individual descriptions. This will lead us to bring together several treatises of the *Hippocratic Corpus* which otherwise may even present serious discrepancies between each other and to look into a common methodological approach which has been held as a specifically Hippocratic one in later antiquity.

In fact, we know that Galen considered Hippocrates to have been the inventor of the “physiognomical theory”.¹ Moreover, he considered Hippocrates to have been important enough on this topic to only give his reader, in the *Quod animi mores*, a general account of Aristotle’s *Physiognomonics* before commenting on several passages of Hippocrates’ *Airs, Waters and Places* which are to him of higher interest:

“Those are the statements that Aristoteles has written down in the first book of his *Historiae animalium*; he also has written a not small number of such statements in another book of physiognomical theory, which I could have drawn several quotations from, if I were not afraid to be considered verbose, nor to waste my time, while it is possible to call upon the man who first among all the physicians and the philosophers discovered this theory, to give his account, I mean the divine Hippocrates.” – (Marquardt et al., 1891, 4 797 15)

Although we can find several passages of physiognomical interest in the Hippocratic corpus, the Greek words *physiognōmoníē* and *physiognōmonikós* occur only in the *Epidemics 2*. In the first part of my paper, I will thus start by examining the authenticity and replacing in context these two words, which are in fact the title of the last two sections of *Epidemics 2*.

I will then try to examine, with the help of Galen’s commentaries, several passages of the *Epidemics* 1-3 and 2-4-6 where “groups” of individuals are formed according to bodily features. For instance, *Epid.* 6, 8, 26, which deals with the difficulty, even for the good physician who knows the method (*tàs hodoús*), to draw conclusions from the bodily features. Or *Epid.* 2, 1, 8, where the author establishes various categories into which he puts individuals according to their bodily features. Of particular interest will be the disagreements of the ancient

1 Of course, other ancient authors gave different opinions; for instance, Porphyrius, one century later, considered Pythagoras to have been the inventor of this theory. See Nauck (1886, 13.2); see also Vogt (1999, p. 108-119) for a comprehensive survey with bibliography.

commentators about what was actually “hippocratic” in the method of classification followed by the physician, and how it had to be interpreted. Finally, starting from the nucleus of the *Epidemics* treatises, I will try to bring out some commonalities of other passages of the Corpus where groups are constituted according to bodily features. This will give us the opportunity to bring together treatises which are known to present shared theories and practices, such as the *Epidemics* and *Airs, Water and Places*, as well as treatises which are based on radically opposed theories. For instance, the author of *The Ancient Medicine* never takes into consideration the influence of the environment on the course of the diseases, contrary to the authors of the *Epidemics*, *Air, Waters and Places*, *On Sacred Disease* or *On Nature of Man*; nevertheless, one can find in VM 23 (Jouanna, 1990, 152.18-153.6) a passage presenting physiognomical statements which are very close to those of the *Epidemics* treatises. Consequently, such a medical tradition, though very representative of the nucleus of the *Epidemics*, also goes beyond this group of treatises. It is to be situated in the larger frame of the couple *physis*-health/*nousos*-disease, as it is clearly explained by Galen about the so-called physiognomical statements of *Epidemics* 2: all these authors actually tried to find a trustworthy method of constituting groups of individuals according to bodily features by making subtle distinctions between features that can be found in good health from other ones that come from the disease.

References

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