

Table of Contents

1. Introduction	2
2. General Parallels of Method	7
3. Hippocratic Nosology	18
a. A Case History	26
b. Reality and Narratology	28
4. The Plague in Athens	31
a. Objections and Replies	36
b. Thucydidean Historiography	40
5. <i>Stasis</i> as Disease	46
a. <i>Katastasis</i>	47
b. The Four Stages	52
c. Multiple Crises	55
d. Analysis	60
6. Conclusion	63
7. Bibliography	65

1. Introduction

Of all political metaphors, *the body politic* is the most popular. So claims A. D. Harvey in his article on its history, an article which catalogues its use from the Rig Veda and the Book of Daniel to recent times.¹ Among these uses, Harvey mentions three classical authors: Aesop, Livy and Plutarch.² One of Aesop's most well-known fables tells of a complaint made by the hard-working limbs of a body against its lazy and greedy belly. In protest, the limbs refuse to feed the belly. They soon discover, however, that they have also deprived themselves of nourishment. Livy adapts the same story to the political context of early Rome. As the plebs prepare to riot against the senators, whom they accuse of greediness, a certain senator, Menenius Agrippa, calms their anger by telling it. Finally, Plutarch borrows the same story for his life of Coriolanus.

While the metaphor of the body politic does see some limited use in the Middle Ages, most notably by John of Salisbury in the twelfth century, it resurfaces with vigor in England during the Renaissance. For instance, Shakespeare uses it in his history of Coriolanus, borrowing it directly from Plutarch.³ Sidney, Spenser, and Bacon all use it. But the author who exploits this metaphor most fully, not only for the English, but perhaps for all time, is Thomas Hobbes. It is no exaggeration to say that it dominates his mature political theory. After all, his *Leviathan* begins with these words: "Nature . . . is by the *art* of man . . . imitated, that it can make an artificial animal."⁴ This animal is the eponymous beast, the giant body he usually calls the commonwealth.

¹ Harvey 1999.

² Aesop, "The Belly and the Limbs," in *Aesop's Fables* (New York: Dover Publications, 1994), pp.3-4; Livy, *The Early History of Rome*, tr. Aubrey de Sélincourt (New York: Penguin Books, 1986), 2.32, pp.141-2; Plutarch, *The Lives of Noble Grecians and Romans*, tr. John Dryden (New York: The Modern Library), p.266.

³ *Coriolanus*, Act I, Scene I.

⁴ *Leviathan*, 19; cf. 169.

For other authors, the metaphor is little more than a colorful figure; for Hobbes, by contrast, it structures his political analysis. He devotes one chapter, for example, to the nourishment of the commonwealth, saying natural resources are its food, money its blood.⁵ He devotes another chapter to fifteen of its diseases. Since money is the blood of the body politic, monopolies are not surprisingly a form of pleurisy. “When the treasure of the commonwealth, flowing out of its due course, is gathered together in too much abundance, in one or a few private men, by monopolies,” he writes, “in the same manner as the blood in pleurisy, getting into the membrane of the breast, breedeth there an inflammation, accompanied with a fever, and painful stitches.”⁶

Besides being the best proponent of this metaphor, Hobbes is also the most famous translator of Thucydides. At first blush it seems unlikely that Hobbes borrowed the metaphor from Thucydides, for Thucydides mentions it only once. In Book Six, Nicias opposes the Sicilian expedition and urges the *Prytanis* to call for a second vote upon the measure approving it, saying to him as he does so: “you will be the physician of your misguided city” (6.14.1). Beyond this passage, which admittedly uses the metaphor of the body politic only obliquely, Thucydides does not explicitly use it at all. It is nonetheless the thesis of this study that Thucydides uses this very metaphor to structure some of his most trenchant political analysis, that of *stasis*. If Hobbes might have borrowed this structure from anywhere, our argument will suggest, it might well have been from Thucydides. For as we will see toward the end of this study, Thucydides analyzes political events such as the Corcyrean *stasis*, according to techniques more usually used for the diagnosis of medical diseases. And yet we will also argue that he uses these same techniques to guide his narration of the plague in Athens. In other words,

⁵ *Leviathan*, Chapter 24.

⁶ *Leviathan*, Chapter 29, pp.244-5.

we will conclude, he narrates the breakdown of a body politic in the same way that he narrates the breakdown of individual bodies.⁷

These medical techniques are found dispersed throughout the treatises traditionally ascribed to Hippocrates. For of all the fifth-century writers, the Hippocratics concerned themselves most with the body. It is quite probable that Thucydides read their writings.⁸ Indeed, it is quite likely that their innovative and practical way of thinking influenced him. It will not be the object of this study, however, to establish such an influence – not so much because this influence is difficult to determine, but rather that it has become impossible. Our scholarly age is too skeptical to credit influence even between modern authors, when nearly all claims of influence can be easily subverted by the suspicion that the correspondence of words, arguments, or techniques between any two authors has been drawn from a common milieu rather than each other.

The problem of establishing influence is exacerbated in the case of Thucydides and ‘Hippocrates,’ since the latter remains, as Wilamowitz once called him, ‘a name without a work’. Little is known about his life.⁹ More importantly, no single work can be attributed with confidence to him. Ironically, the only Hippocratic writing that we can attribute to someone – namely, *Nature of Man*, sections eleven and twelve, on the veins – we cannot attribute to Hippocrates, but instead to his student and son-in-law, Polybus.¹⁰ Even here, though, we must add the testimony of Galen, who argued nevertheless that the early chapters of this treatise, which profess the theory of the four humors, were written by Hippocrates himself. After millenia of scholarly work that has provided no answer to ‘the Hippocratic question,’ it is safe to say that it is unanswerable. While disappointing,

⁷ An influence of Hippocratic thinking and even writing upon Thucydides would come as no surprise after the recent publication of R. Thomas’s study of the same influence on Herodotus (Thomas 2000, 28-74).

⁸ In 2.49.3 Thucydides hints at the physicians’ various names for bile (Page 1953, n.66).

⁹ What little is known is presented in the first three chapters of Jouanna 1992, “Hippocrates of Cos” (3-24), “Hippocrates the Thessalian” (25-41), and “Hippocrates and the School of Cos” (42-55).

¹⁰ This is known from the testimony of two ancient sources: Aristotle’s *Historia Animalium* (3.3.512b – 513a7), and the *Anonymus Londinensis* (19.1-18), now commonly believed to be by Meno, the historian of medicine who was also a student of Aristotle.

this negative result is no cause for alarm. Jacques Jouanna's attitude towards it, quoted at length below, charts a sound course between awareness of the question and undue preoccupation with it:

But beyond the differences and contradictions to be found among the various writings that make up the Hippocratic Collection, a certain unity yet manages to emerge, with respect to both medical practice and to the rational approach to disease and treatment they advocate. And without wishing to ignore these differences and contradictions, we may speak from now on of "the Hippocratic physician" in the broad sense of the phrase – indeed, for the sake of convenience, of "Hippocrates" – without thereby prejudging the question of authorship. The name Hippocrates signifies in fact two things. It signifies, first of all, Hippocrates the historical figure. But it also stands for the work that has been bequeathed to us under his name. For as long as this collection of medical manuscripts has been known, this ambiguity in the use of the name has been constant. It really cannot be gotten away from. The essential thing is that we are aware of it.¹¹

We seek to establish a correspondence between the medical notions of the Hippocratics and the historiography of Thucydides. It does not matter to us who wrote these medical works, after all, so long as they can be dated to the period before or during Thucydides' lifetime (whose precise dates are not known either, though they are generally assumed to be between 460 and 400 B.C.). Fortunately, this can be done, using the evidence provided by the lists of Hellenistic collections, by the names of patients mentioned, or by the similarity of one text with another. Jouanna, once again, has presented the results of these investigations comprehensively.¹² While treatises often cannot be dated to precise years, they can usually be dated to half- or quarter-centuries.

¹¹ Jouanna 1992, 71. His complete assessment of the Hippocratic question along with his main arguments for the dating of specific treatises can be found in his fourth chapter, "Writings in Search of an Author" (56-71).

¹² Jouanna 1992, 373-416. Jouanna lists all the treatises of the Hippocratic corpus alphabetically, summarizing as well as dating each one. In this study it has proven more convenient to set them out chronologically, so that those at the top of the list should give us the most confidence, whereas we will use those at the bottom with more caution.

From Jouanna's presentation, then, we can admit the following Hippocratic treatises into our investigation:

<i>Fleshes</i>	5 th century
<i>Diseases II, III</i>	middle of the 5 th century
<i>Prorrhetic I</i>	middle of the 5 th century
<i>Airs, Waters, Places</i>	second half of the 5 th century
<i>Prognostic</i>	second half of the 5 th century
<i>Prorrhetic II</i>	second half of the 5 th century
<i>The Sacred Disease</i>	second half of the 5 th century
<i>The Art</i>	last quarter of the 5 th century
<i>Breaths</i>	last quarter of the 5 th century
<i>Ancient Medicine</i>	end of the 5 th century
<i>Regimen in Acute Diseases</i>	end of the 5 th century
<i>Epidemics I and III</i>	410
<i>Nature of Man</i>	410-400
<i>Diseases IV</i>	end of the 5 th century or beginning of the 4 th
<i>Epidemics II, IV, VI</i>	end of the 5 th century or beginning of the 4 th
<i>Humors</i>	end of the 5 th century or beginning of the 4 th
<i>Generation / Nature of the Child</i>	end of the 5 th century or beginning of the 4 th
<i>Regimen (I-IV)</i>	end of the 5 th century or first half of the 4 th

We will have occasion to cite many of these treatises, but the following ones will feature most prominently: *Nature of Man*, *Epidemics I and III*, *Ancient Medicine*, *Airs Waters Places*, and *The Sacred Disease*; indeed, our discussion of Hippocratic medicine will depend heavily on the first two, which of all the listed treatises have been most precisely dated to a period during which Thucydides was very likely working on his *History*.

In order to establish a correspondence between Hippocratic thought and this *History*, we will begin by arguing that the physicians and Thucydides exhibit seven general parallels of method, three of which are shared with contemporaneous writers, but four of which are uniquely theirs. Once we have presented this correspondence of general method, we will turn next to the specifics of Hippocratic disease theory, or nosology. Since these specifics are widely dispersed throughout many treatises – none complete by itself, some contradictory with others – we will attempt to reconstruct this theory from

the main ones. Once it has been reconstructed, we will return to Thucydides and argue another subordinate thesis of this study: that he applied Hippocratic nosology to a disease of individual bodies, the plague in Athens.

All of this discussion of medical thought, Thucydides, and individual bodies aims to prepare the argument for our principal thesis, an argument reserved for the end of this study. For Thucydides, after all, writes a political history; his focus is the body politic, not the body. And yet, we will conclude, he adapts a theory about bodies to structure his analysis of a body politic. Unlike Hobbes, he seldom mentions the metaphor of the body politic. Like Hobbes, however, Thucydides marshals this metaphor at a deeper level than rhetoric: it gives a medical structure to his history.

2. General Parallels of Method

There are seven general parallels of method between the Hippocratics and Thucydides. Scholars have been working to highlight or dispute these and other, more specific parallels since Charles Norris Cochrane first stressed the correspondence between them in 1929.¹³ It is only fitting, therefore, to begin this section with him.

Cochrane believed that there were not only parallels of style between Thucydides and Hippocrates (as Littré had observed before him) but also parallels of method.¹⁴ We will discuss the question of style a little in the fourth section of this study; however, our main concern in this section, and indeed throughout this investigation, is with method.

¹³ Cochrane 1929.

¹⁴ Cochrane does not raise, let alone discuss, the Hippocratic question. He speaks only of ‘Hippocrates,’ apparently assuming that there was one author of the Hippocratic treatises and that he was indeed Hippocrates of Cos. While discussing Cochrane’s book, therefore, we must often do the same. While this may seem awkward at times, since we are now acutely aware of the problems with Cochrane’s assumption, only in this way can we avoid reading into his argument our own preoccupations. Moreover, if we impute to him Jouanna’s liberality with the use of the name ‘Hippocrates,’ there ceases to be any real awkwardness.

For now, we will restrict ourselves to the general methodological parallels. Of these, the most important to Cochrane – indeed, the one upon which he founds his book – is both writers’ use of the scientific method: “In the fifth century B.C.,” he writes, “at least in the one department of medicine, genuine science had emerged among the Greeks; and the power and originality of Thucydides lies in his having attempted to adapt the principles and methods of that science to the study of society.”¹⁵

Cochrane advanced several other parallels between Hippocrates and Thucydides which were, in effect, arguments for this claim about their mutual use of the scientific method. First of all, according to him, Thucydides, like Hippocrates, “assumed that all human actions and sufferings are subject to natural causes, and by these are meant the causes that are proper to human nature.”¹⁶ The author of *The Sacred Disease* famously begins by asserting that this disease, epilepsy, is not, “any more divine or more sacred than other diseases, but has a natural cause, and its supposed divine origin is due to men’s inexperience, and to their wonder at its peculiar character.”¹⁷ Thucydides nowhere excludes divine causes, and in one mysterious place he even seems to grant them a place (1.23.3), but the gods play no role in his explanations; what is more, he self-consciously eschews the embellishments of poets (1.21), and ridicules the interpretation of oracles after the plague (2.54).

By assuming only natural, as opposed to supernatural, causation, these two writers certainly distinguished themselves from tragedy, for example. But in order to distinguish themselves further from the natural philosophers – most of whom also assumed only natural causes, such as water (Thales), air (Anaximenes), or atoms (Leucippus and

¹⁵ Cochrane 1929, 15.

¹⁶ Cochrane 1929, 17-18.

¹⁷ All citations of Hippocratic writings are from the Loeb Classical Library: Jones, W. H. S., ed. 1923. *Hippocrates* volumes 1-8. References will be given to chapters of the relevant Hippocratic treatises. The most important ones will be found in the following volumes: Volume 1, *Ancient Medicine, Airs Waters Places, Epidemics I and III*; Volume 2, *Prognostic, Regimen in Acute Diseases, The Sacred Disease, The Art*; Volume 4, *Nature of Man, Regimens*; Volume 6, *Diseases III*; Volume 7, *Epidemics 2, 4-7*; Volume 8, *Places in Man, Prorrhethics I and II*.

Democritus) – the specific natural cause to which Hippocrates and Thucydides appealed was human nature. Not surprisingly, then, the treatise that expounds the main tenets of Hippocratic medicine most forcefully and succinctly is entitled *Peri Phusios Anthrôpou*, *On the Nature of Man*.¹⁸ “Like Hippocrates,” writes Cochrane, “Thucydides regards human nature as a relatively uniform and stable entity.”¹⁹ This stable, natural entity was the focus of explanation for both.

Of course the Sophists, such as Antiphon, also discussed human nature in their writings, often exploiting the fashionable contrast between this nature (*physis*) and convention (*nomos*) – a contrast that first appears in writing in a Hippocratic treatise.²⁰ But these discussions seldom *investigate* human nature. Instead, they make assumptions about human nature – such as, for instance, that man naturally avoids pain and seeks pleasure – and apply these assumptions to moral, political, and eventually legal situations.²¹ With the possible exceptions of Heraclitus and Democritus, whose investigations were far less empirical, and Empedocles, who was himself a physician, the Hippocrates and Thucydides alone sought to explain human nature by observation of it followed by systematic analysis of this observation.

In the case of the Hippocrates, of course, human nature was bodily. “The body of man,” he writes in the *Peri Phusios Anthrôpou*, “has in itself blood, phlegm, yellow bile and black bile; these make up the nature of his body, and through these he feels pain and enjoys health.”²² In the case of Thucydides, by contrast, this nature was primarily

¹⁸ Knowing that part of this treatise was written by Polybus, Galen nonetheless considered it the most authentic of the Hippocratic works. “We should note that it is Galen’s view,” writes Lloyd, “that even if *The Nature of Man* were by Polybus, it would still be good evidence for the doctrines of Hippocrates himself. Galen states that Polybus was the pupil as well as the son-in-law, of Hippocrates, that he took over from Hippocrates the task of teaching the young, and most important, that he appeared not to have modified any of the doctrines of Hippocrates in his own writings.” Lloyd 1978, 53.

¹⁹ Cochrane 1929, 19.

²⁰ Jouanna 1992 claims of *Airs, Waters, Places*: “The ethnographic physician’s commentary on the relation between custom (*nomos*) and nature (*physis*) proved to be of great importance for the history of ideas. For it marked the first time that the pair *nomos / physis* appeared in Greek literature.” (224)

²¹ Gagarin and Woodruff 1995, 218-53, especially 244-7, although most of the extant writings of the Sophists confirm this point.

²² *Nature of Man*, 4.

psychological. To the historian, after all, terms like *to anthrôpinon* (1.22), *phusis anthrôpôn* (3.82), and *anthrôpeia phusis* (3.84) refer not simply to bodily susceptibilities and bodily reactions, as they would in Hippocrates, but include also, and primarily, psychological dispositions to decide and to act. Thus, if this regard for human nature is in fact a parallel between these two writers, as Cochrane alleges, it also conceals an important difference between them: one focuses on the body; the other on the mind.

This difference needs to be stated more precisely. After all, Hippocrates will often mention mental symptoms (most cases in the *Epidemics* describe the patient as rational, or suffering delirium, and sometimes both in alternation). But careful attention to these observations of the mind reveal that the Hippocratics make them only as a way of talking about the body. In this way, for example, there is a whole Hippocratic treatise dealing with phenomena of the mind, *Dreams (or Regimen IV)*. However, it does so in a characteristically Hippocratic way: by attributing different types of dreams to specific bodily ailments, especially surfeits and deficits of humors. With dreams that depart wildly from the events of the day, therefore, prayers may or may not be a good idea, but in either case “it is beneficial to take an emetic,” etc.²³ Likewise, although the Hippocratics usually reports that fevered patients rave as part of their case histories in the *Epidemics*, they do not mention the content of these ravings; and although the physician sometimes mentions the mind in his discussion of epilepsy in *On the Sacred Disease*, his focus in these works, like the others, remains bodily.

Once it has been stated more precisely, however, this difference between the Hippocratics and Thucydides should not eclipse their deeper parallel – their mutual concern with human nature. Moreover, despite this difference, the Hippocratics and Thucydides do use human nature to a common purpose: *prognôsis*.²⁴ Here, then, is a second argument for the claim that both the physicians and the historian share a common

²³ *Dreams or Regimen IV*, 88.

²⁴ Cochrane 1929, 26-28.

scientific method. For both appeal to natural causes – specifically, human nature, whether bodily or mental – and both do so in order to make predictions about the course of events, whether these events be a disease or a revolution.

Accordingly, the *Prognostic* begins thus: “I hold that it is an excellent thing for a physician to practise forecasting.” The *Epidemics*, moreover, repeat multiple cases of disease in detail. Taken together, these cases form a catalogue that aimed to equip the physician with the knowledge of human bodily nature that he needed in order to predict the fate of future patients who would exhibit similar symptoms. Other treatises incorporate this information with plans of treatment. The *Diseases*, for instance, synthesize these cases into an impressive classification of afflictions, symptoms, prognoses, and sometimes even remedies.

Thucydides likewise practices an implicit *prognôsis* when he commends his own book as a possession for all time (1.22); for this advertisement implies that one can learn from it to predict the outcomes of future events. Thucydides also praises Pericles (2.65) and Themistocles (1.138) for their own powers of *prognôsis*. In the case of Pericles, however, this power seems to have neglected the irruption of the unpredictable – the plague, his own premature death, and the eventual supremacy of inferior leaders; and yet it is the unpredictable that Thucydides’ history trains us thoroughly to expect, paradoxical as that may be. A Pericles who had read Thucydides, we can imagine, would have been a better statesman, or at least a less ambitious one.

Cochrane observes one more parallel between Hippocrates and Thucydides: their common use of classification. This should be expected; the technique of *prognôsis* presupposes it. One cannot predict without knowing how similar cases have transpired in the past; and one cannot know this, to be sure, without classifying similar cases. We have already seen how the Hippocratic texts exhibit classification in their *Diseases*. Cochrane claims that the speeches in Thucydides’ history represent his attempt “to do for history what Hippocrates was at the same time trying to do for medicine – the attempt, that is, to

establish such classifications or formulations (*ta eidê*) as would raise history from the level of mere chronicle, characteristic of the annalists”.²⁵

Unfortunately, Cochrane provides no examples of the speeches doing this; nor does he elaborate how they might. And yet Thucydides does classify and synthesize, much as the Hippocratic physician does in the *Diseases*. But he accomplishes this by his own interventions, not by the speeches. Consider 3.82-4, his famous synthesis of the events of the Corcyrean *stasis*. While it is a synthesis of that particular event, it appears also to be a general analysis of the phenomenon, *stasis*, and thus a template with which to prognosticate future insurrection. If, then, it is not the speeches that parallel Hippocratic prognosis, but instead Thucydides’ own interventions, with what in Hippocrates, if anything, might the speeches be parallel?

T. J. Luce makes an interesting suggestion: “the narrative-speech format . . . is much like the two chief sources of information that the physician uses: a detailed record of the outward symptoms of a disease and the statements of the patient concerning his past medical history and present feelings.”²⁶ If nothing else, Luce’s suggestion adds one more ingredient to the already spicy debate over Thucydides’ speeches. Its analogy with medicine should not be exaggerated, however, since Homer and even Herodotus alternated in a similar way between narrative and speeches. And yet Thucydides’ repeated use of the technique may be more specifically medical after all.

Just as a doctor cannot learn how a medical problem *feels* without first listening to the patient’s account of it, so too a historian cannot learn how a historical event feels to its participants without first listening to their accounts. Moreover, without recording their own accounts – and speeches provide a compelling way of doing this – he will have trouble conveying these feelings to his readers. But this analogy shows only half the benefit of Thucydides’ technique: it puts people in the role only of historical victims.

²⁵ Cochrane 1929, 26.

²⁶ Luce 1997, 87.

They are also history's actors, and only by listening to their accounts can the historian and then his reader learn *why* they acted as they did – or at least why they *thought* they acted this way. Even further, speeches may conceal as well as reveal, and so the doctor, the historian, and ultimately his reader as well, must learn to read between the lines and discover causes from what a patient or politician is not saying.

In all of these ways, then, speeches are an expedient way to present reasons and causes; but among them, the doctor and the historian, “aim to discover ‘the truest cause’ that lies hidden beneath the surface of what they see and hear”.²⁷ Luce introduces here another parallel between the Hippocratics and Thucydides: they both use a complex notion of causation according to which there can be two causes of the same effect. One of these causes is a triggering cause; the other is a predisposition, the deeper cause which is triggered. Luce calls this predisposition ‘the truest cause’, as we read in the above quotation. Now, this English expression is Luce’s translation of Thucydides’ own *alêthestatê prophasis* (1.23, 6.6). *Prophasis* usually means ‘pretext’ in Greek literature, but Luce and others²⁸ have argued that Thucydides adopts for it the unusual meaning of ‘cause’ from the Hippocratics. In *Airs, Waters, Places*, for instance, Hippocrates writes that pleurisies are common in cities facing cold winds: “it must be so, since their digestive organs are hard, and the slightest cause (*prophasis*) inevitably produces in many patients abscesses; the reason (*aition*) for this being their stiff body and hard digestive organs.”²⁹ In this instance, the *prophasis* is the triggering cause, while the *aition* is the predisposition.³⁰

Thucydides adopts this binary model of causation (trigger and predisposition) but changes the terms slightly. With the beginning of the war, for instance, he distinguishes between its two co-operating causes:

²⁷ Luce 1997, 87.

²⁸ e.g., Pelling, 2000, 85-88; cf. Swain 1994, 318.

²⁹ *Airs, Waters, Places*, 4.

³⁰ Pelling 2000, 85, provides several other examples.

As for why they [the Spartans] broke the truce, I have first set out the grounds (*aitiai*) and the elements of rift between the sides, so that no one need ever enquire about the origins of so great a war among the Greeks. I regard the truest explanation (*alêthestatê prophasis*), which was most unclear in what was said openly, as this: the Athenians, by becoming great and frightening the Spartans, forced them into making war. (1.23; Pelling's translation)

The *aitiai* of the war are thus the marginal conflicts at either end of the Greek world: Potidea and Corcyra; not to mention other minor disputes like that over the independence of Aegina or the Megarian decree (1.140.3). The *alêthestatê prophasis*, by contrast, is the growth of the Athenian empire and Spartan fear of its hegemony. Whatever the terminology chosen, then, both Hippocrates and Thucydides recognize a distinction between two different types of cause: a predisposition and a trigger.

We should be careful not to see this as something unique to Hippocrates and Thucydides. After all, according to Pelling,³¹ the legal rhetoric of the time also used this distinction. It was part of the intellectual climate of fifth-century Greece, it seems, so that different sorts of authors who sought an authoritative voice used it to their advantage. Greek doctors sought this voice as avidly as advocates, since the practice of medicine in fifth-century Greece required itinerant physicians who sought to be hired as the official doctor of a *polis* to persuade public assemblies that they, rather than their rivals – whether they were religious healers, representatives of other schools of rational medicine, or even competing physicians of the same school – offered the surest route to health.³² Regardless of this characteristically Greek, agonistic practice, doctors and lawyers must always use this voice either to convince patients to follow their treatments or to convince juries to decide in their favor, and, according to Pelling, Thucydides has followed them. For they all exhibited “the combative commitment to one explanation and rejection of others, the

³¹ Pelling 2000, 85.

³² Jouanna 1992 devotes a whole chapter, 5, to this practice: “The Physician and the Public” (75-111).

desire to order explanations in some sort of hierarchy, [and] the binary combination of predisposition and triggering cause”.³³

Even if this distinction is not unique to Hippocrates and Thucydides, however, we cannot neglect it in our list of general methodological parallels. For in Hippocratic medicine the predisposition is one of body, and the trigger is most often a change in weather or diet, precipitating a disease. In Thucydidean history the predisposition is one of a body politic, and the trigger is most often a minor transgression or conflict – set against the background of war with its ready alliances – that precipitates a calamitous insurrection. Again we are brought to a parallel between the body and the body politic, between disease and war.

And here we settle on the last general methodological parallel between these two writers. As Luce expresses it, “just as the doctor’s attention is fixed on abnormalities and traumas inflicted by disease upon the healthy body, so Thucydides concentrates on the disastrous effect war had on the body politic of Greece”.³⁴ Hippocrates and Thucydides are both grim writers – they continually remind us of the ugly realities of disease and war. But if Luce is right, this grimness is not incidental to their purposes. By focusing on disease and war they are able to teach us much about human nature, body and mind. By focusing on abnormalities, in short, they are able to teach us much about the normal. The author of the *Ancient Medicine* says as much when he boldly asserts that “clear knowledge about natural science (*peri phusios*) can be acquired from medicine and from no other source”.³⁵ Indeed, by ‘natural science’ here he means, as he immediately clarifies: “to possess this information, what man is, by what causes he is made, and similar points accurately.”³⁶ Rather than the direct speculations about man in normal conditions practised by even some natural philosophers, this Hippocratic physician

³³ Pelling 2000, 85.

³⁴ Luce 1997, 87.

³⁵ *Ancient Medicine*, 20.

³⁶ *Ancient Medicine*, 20.

enjoined the knowledge gained indirectly by observation of man in abnormal conditions: suffering from wounds and illnesses. The parallel between this medical observation of human *phusis* and Thucydides' own declared attention *phusis anthrôpôn*,³⁷ especially as it appears under the duress of war, is too close not to mention.

If, therefore, as Cochrane would have it, Thucydides is a scientist of the human mind, much as Hippocrates is a scientist of the human body, it is no coincidence that they both tell grim stories. These stories show their subjects at extremes, under duress, and thus reveal their limits. One of the grimmest moments in all of Thucydides' history is his account of the plague in Athens. This account offers us, as readers, an opportunity to learn about human nature, since imminent death liberates it (*phusis*) from the restrictions of civilization (*nomos*); but it also offers us an opportunity, as scholars, to elicit the immediate parallels between Hippocratic medicine and Thucydides' own writing.

Before turning to these parallels, however, let us summarize the results of this section. In total, we have noticed as many as seven general, methodological parallels between them. Cochrane claimed that they shared the scientific method. While this claim is debatable, and unquestionably anachronistic, there is little doubt of the four parallels he adduced in support of it: (i) a restriction to natural causes, (ii) particularly those germane to human nature, and (iii) a desire for prognosis of the course of events, whether medical or historical, (iv) based upon synthesized and even classified knowledge of this nature. To Cochrane's four parallels we have added three others observed by Luce, and Pelling: (v) Thucydides' presentation of speeches, as well as facts, resembles the Hippocratic physician's concern with the patient's own account of his symptoms, as well as these symptoms themselves; (vi) both exhibit the binary scheme of causation, according to which an effect may have both a predisposing cause and a triggering cause; and finally, (vii) both focus their attention upon abnormalities and breakdown, war and disease.

³⁷ 3.82; cf. 3.84 and 1.22.

Of these seven general methodological parallels, three were shared by other writers: (i) the restriction to natural causes (shared with many of the pre-Socratic philosophers and some Sophists), (vi) the binary scheme of causation (shared with the courtroom orators), and (v) the alternation between narrative and speeches (shared with Homer and Herodotus). These three parallels we can therefore ascribe to the intellectual climate, the culture of fifth-century Greece. However, we are left with four other parallels that uniquely link Hippocrates and Thucydides: (ii) the examination of human nature, (iv) by classification, or at least analysis, (iii) in order to form prognoses, and (vii) especially the narrowing of this focus upon abnormality and breakdown, war and disease.

From so many general methodological parallels it is tempting to infer some general influence of Hippocratic ideas upon Thucydides. As J. H. Finley cautions in his assessment of Cochrane's argument, though, we must be careful not to infer an influence when a common intellectual tradition, much as these authors shared, would have been sufficient to foster such parallels as these. "It seems rather that, in the latter half of the fifth century," writes Finley, "similar tendencies appeared at the same time in different fields of investigation and that ideas proper to one subject proved fruitful in another."³⁸ It is rather this similar tendency that we are after, a tendency most evident in the Hippocratics, but appearing likewise in Thucydides, as we will argue, only to surface later, and most obviously, in the politics and psychology of Plato. Broadly put, this is a tendency to think of goodness (whether it be health, peace, or virtue) as an unstable balance of elements, badness (illness, war, vice) as an inevitable imbalance that can only be righted by passing through some sort of crisis.

Moving from the general to the specific, now, let us begin to examine the correspondence of one particular Hippocratic idea with Thucydides – the Hippocratic idea of disease. With scholars since Cochrane, the obvious point of contact between these

³⁸ Finley 1942, 70.

two writers has been Thucydides' narration of the plague in Athens. Where else would one expect someone, especially someone who may have been someone acquainted with Hippocratic nosology, to show this correspondence so distinctly as in the description of a disease? Naturally enough, many of these scholars, philologists by training, have sought word parallels between this narration and the Hippocratic writings.³⁹ Because we are interested in methodological parallels, however, we will aim instead to find specific parallels between, on the one hand, the method Thucydides uses to describe this particular disease, and, on the other, the specific method of diagnosis practiced by the Hippocratics – that is to say, their theory of disease. The next section presents this theory.

3. Hippocratic Nosology

The most explicit statement of this theory comes at the beginning of an introductory Hippocratic treatise on the very subject: *Disease I*, “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.”⁴⁰

Unfortunately, he does not elaborate this theory, here or elsewhere. In fact, *Ancient Medicine* famously begins by repudiating theories:

All who, on attempting to speak or to write on medicine, have assumed for themselves a postulate as a basis for their discussion – heat, cold, moisture, dryness, or anything else that they may fancy – who narrow down the causal principle of diseases and of death among men, and make it the same in all cases, postulating one thing or two, all these obviously blunder in many points . . .

³⁹ See, e.g., Parry 1969, n.66.

⁴⁰ *Disease I*, 2. According to Jouanna, this treatise is from 380 B.C. While this places it after Thucydides' death, we beg leave to include it cautiously, if only because it summarizes the elements of Hippocratic

To be precise, however, this polemic repudiates theories that oversimplify the complexity of medicine, not theories as such. The *Nature of Man* makes the same argument. It begins by refuting theories that make human nature out to be a unity – whether of blood, or phlegm, any other humor, or any *one* thing whatsoever. Not only is the evidence for such theories slim, the physician observes, they cannot account for changes such as growth and pain. For how could a unity change? Without parts and elements to interact and realign, it must remain the same.⁴¹

In place of a unitary human nature, then, most Hippocratic treatises advance a pluralistic theory of bodily elements; in *Nature of Man* this takes the form of the four humors that Galen would later adopt for posterity.⁴² According to this theory in its simplest form, the patient “enjoys the most perfect health when these elements [the humors] are duly proportioned to one another in respect of compounding, power, and bulk, and when they are perfectly mingled”;⁴³ pain and disease occur, conversely, when these humors are not duly proportioned. Humors become imbalanced for a number of reasons, we learn, the most common of which is erratic or extreme weather.

In this way, all four humors “are always comprised in the body of man, but as the year goes round they become now greater and now less, each in turn and according to its nature.”⁴⁴ Each humor is associated with a season, and so each season brings characteristic imbalances, excesses of its associate humor, defects of its opposite. This connection with the seasons explains why the *Epidemics* catalogue changes in weather as

nosology that are scattered throughout the 5th century treatises. Rather than advancing some new doctrine, then, it seems instead to summarize doctrines current during Thucydides’ period.

⁴¹ This is reminiscent of Parmenides’ notorious arguments concerning unity in his “Way of Truth”. The *Nature of Man* actually mentions Melissus by name, albeit with disdain. Along with Zeno, Melissus was the most famous student of Parmenides. The opening paragraph scorns those who adopt a unitary theory of medicine, saying: “But in my opinion such men by their lack of understanding overthrow themselves in the words of their very discussions, and establish the theory of Melissus.”

⁴² Other Hippocratic treatises advance other elements as basic, arguing for the Corpus’s multiple authorship. Following Galen, however, we will take the account of *Nature of Man* as primary. See Lloyd 1978, 53. For a fuller reckoning of Hippocratic nosology, see Jouanna 1992, 141-180.

⁴³ *Nature of Man*, 4.

⁴⁴ *Nature of Man*, 7.

thoroughly as they catalogue the medical symptoms caused by these changes. The Hippocratic physician calls this sort of weather report a *katastasis*, or ‘constitution’. A *katastasis* begins with a weather report for a given season, but afterwards catalogues the medical problems of the same season – naturally, since the former so often causes the latter.

However, weather is not the only cause of a humoral imbalance. We have already seen the passage from *Disease I* which blames different diseases on different causes, interior as well as exterior. Besides weather, then, disease can also result from exertions and wounds. Additionally, the *Nature of Man* distinguishes between epidemics and unique cases.⁴⁵ Whereas the epidemics stem from weather, the unique cases result from improper regimens. Many of the case histories from the *Epidemics* begin accordingly with stories of over-eating and over-drinking,⁴⁶ childbirth and miscarriage,⁴⁷ or ill-timed and excessive exercise⁴⁸ – not to mention what must have been a venomous bite: “Crito, in Thasos, while walking about, was seized with a violent pain in the great toe”; he died the next day.⁴⁹ Since improper regimens cause the subsequent problems, these unique cases can be cured by simply rectifying the regimens, so long as the humoral imbalance caused by them is not too great.⁵⁰

“Whenever many men are attacked by one disease at the same time,” though, “the cause should be assigned to that which is most common, and which we all use most.”⁵¹ This, as it turns out, is the air we breathe. Different weather and different seasons bring us different air, even air “charged with some unhealthy exhalation,”⁵² and in this way it can cause disease, upsetting our humoral balance. *Airs, Waters, Places* thus analyzes the

⁴⁵ *Nature of Man*, 9.

⁴⁶ e.g., *Epidemics I*, Case XII.

⁴⁷ e.g., *Epidemics I*, Case V.

⁴⁸ e.g., *Epidemics I*, Case II.

⁴⁹ e.g., *Epidemics I*, Case IX.

⁵⁰ *Nature of Man*, 9.

⁵¹ *Nature of Man*, 9.

⁵² *Nature of Man*, 9.

quality of air and water in Asia versus Europe, seeking in this analysis some reasons for the different epidemics their respective inhabitants usually suffer. “Whoever wishes to pursue properly the science of medicine,” begins this treatise, “must proceed thus”: he must observe climate, water, soil and position, correlating all these conditions with typical diseases. Knowing such correlations, “he will have full knowledge of each particular case, will succeed best in securing health, and will achieve the greatest triumphs in the practice of his art.”⁵³

In the same spirit, the *katastaseis* of the *Epidemics* make thorough almanacs, implicitly correlating climate with disease. Amidst this correlation, moreover, the constitutions sometimes mention the diseases prevalent before a given season. They describe how the common medical problems of the season in question afflicted those who were already ill as compared with those who were healthy when the season began. The first constitution of *Epidemics I*, for instance, describes the effects of the season on people of varying health. This is a subtlety that has little bearing on our present exegesis of Hippocrates; however, it will become important when we turn to Thucydides’ introduction of the plague.

In the meantime, we can fill out the simple theory of disease advanced in the *Nature of Man* by turning to the case histories of the *Epidemics*. While they do not explicitly state such a theory, they nonetheless assume one. W.H.S. Jones has ordered it into four stages.⁵⁴

In the first stage, a disease begins by a “disturbance in the composition of the constituents of the body”. These constituents are the humors, and we have already seen what causes may bring about this disturbance: weather, regimen, injury, childbirth, venomous bites, and so on.

⁵³ *Airs, Waters, Places*, 2.

⁵⁴ Jones 1923, I, xvi. All references to Jones are to his “General Introduction” to the Loeb volumes of Hippocrates, I, ix-lxix.

In the second stage of Hippocratic disease theory, after the constituents of the body have been disturbed, for whatever reason, “Nature tries to bring these irregularities to a normal state, apparently by the action of innate heat, which ‘concocts’ the ‘crude’ humors of the body.”

Behind many of these English words there is an important technical term in Hippocratic Greek. For example, ‘nature’ here translates *phusis*, which, as we have seen, the Hippocratics uses especially for ‘human nature,’ or more specifically ‘the nature of the human body’. Other terms are more technical. ‘Coction’ translates Hippocrates’ peculiar use of *pepsis*, meaning literally ‘cooking’ (from the common verb *pepsô*, ‘to cook’).⁵⁵ The ‘innate heat’ of this cooking seems to have denoted the fever that was a symptom of most Hippocratic cases.⁵⁶ By this means, the human body seeks a renewed balance of its disturbed humors. During this mysterious process, the ‘crude’ (*akrêtoi*) humors blend to achieve *krasis* – literally, ‘blending’ (from another common verb, *kerannumi*, to blend).

Fortunately, we have a description of this process in the *Ancient Medicine*: “No relief from these symptoms [frenzy, gnawings of the bowels and chest] is secured until the acidity is purged away, or calmed down and mixed with the other humors.”⁵⁷ The Hippocratic physician labels the moment before this calming down, when there is still a contest between imbalance and blending, the ‘crisis’ (*krisis*), and Jones distinguishes this as the third stage of Hippocratic disease.

Elsewhere, Hippocrates provides a good definition of the crisis: “To be judged [*krinesthai*] in diseases is when they increase, diminish, change into another disease, or

⁵⁵ Jouanna 1992, 260-261 presents the intellectual history of this important Greek notion, which would find a home later in the ontological theories of Aristotle, who was himself a reader of Hippocrates (Jouanna 1992, 231).

⁵⁶ Hippocrates discusses fevers and their different cycles in detail in *Nature of Man*, 15. Apparently, malaria was a common affliction in the Aegean basin of antiquity, and victims of malaria experience intermittent fevers. Cf. Jones 1923, I, lvii. Jouanna 1992, 143 lists the diseases found in the Hippocratic Corpus that still “figure in the most recent dictionaries of medicine.”

⁵⁷ *Ancient Medicine*, 19.

end.”⁵⁸ The Greek term seems to be borrowed from legal contexts; as E. T. Withington observed, the crisis is “the determination of the disease as it were by a judicial verdict.”⁵⁹ One of the most peculiar features of the crisis is that it was supposed to occur on fixed days. “When the exacerbations are on even days,” writes the Hippocratic physician, “the crises are on even days.” And these days are the fourth, the sixth, the eighth, the tenth; then, the fourteenth, the twentieth, twenty-fourth, thirtieth, fortieth, sixtieth, eightieth, and finally the hundred and twentieth.⁶⁰

Some see this arithmetic sequence as reminiscent of Pythagoras.⁶¹ The Hippocratics were indeed aware of pre-Socratic philosophy, as the reference to Melissus noted earlier attests.⁶² No easily discernible formula matches this strange sequence. This strangeness may reassure some who see in the Hippocratics an empiricist reaction against the Greek rationalism personified by philosophers like Pythagoras. Nevertheless, Jouanna decodes this and other such sequences as combinations of tetrads and hebdomodads.⁶³ In either case, malaria does exhibit cycles of alternating symptoms according to fixed, if not arithmetically regular, patterns.⁶⁴ Beyond mere regularity, though, the Hippocratic betrays a Pythagorean spirit by carefully distinguishing the even from the odd, since “the diseases exacerbated on odd days have their crises on odd days.” Not surprisingly, then, there is an equally opaque list of odd crisis days: “the first period is the third, then the fifth, seventh,

⁵⁸ *Affections*, 8. Jouanna dates this treatise to 380 B.C. As with our use of its contemporary treatise, *Disease I*, we beg leave to quote it even though it post-dates Thucydides; for like the quotation from *Disease I*, this one introduces nothing new, but instead merely summarizes succinctly a view that can be found in less pithy forms elsewhere in the Corpus.

⁵⁹ Withington 1920, 65. Quoted in Jones 1923, lii. Withington’s exposure of this metaphor confirms Finley’s claim (Finley 1942, 70), mentioned earlier, that “similar tendencies appeared at the same time in different fields of investigation and that ideas proper to one subject proved fruitful in another.” Lest the detection of medical metaphors in historiography in philosophy make it seem like medical thought was primary in Greek intellectual life, here we see the influence of legal metaphors on medical writing. Neither is this to say that law was primary. As Finley implies, cultures are like webs, with the intellectual disciplines being nodes that are connected with one another, mutually supporting.

⁶⁰ *Epidemics I*, 26.

⁶¹ Cf. Jones 1923, I, liv, who dismisses the influence for different reasons: “a man so free of superstition as the author of *Epidemics I* was unlikely to be influenced by mysticism”.

⁶² *Nature of Man*, 1.

⁶³ For the complete discussion, see Jouanna 1992, 338-341.

⁶⁴ Jones 1923, I, lv.

ninth, eleventh, seventeenth, twenty-first, twenty-seventh, thirty-first”.⁶⁵ When it comes time to return to Thucydides, we will have reason to recall this Hippocratic emphasis on the arithmetic of crises and their distinction into two types: odd and even.

Also important for our purposes will be the fact that crises seem to come in two other types: perfect and imperfect. In a perfect (*telea*) crisis, on the one hand, perfect coction occurs, and the humoral balance is wholly restored. Coctions of this sort, we learn, “signify nearness of crisis and sure recovery of health”.⁶⁶ With imperfect coctions, on the other hand, some excess of the offensive humor will remain. If the crisis is successful, the body will expel this excess. Imperfect coctions thus produce “crude and unconcocted evacuations, which change into bad abscessions, denote absence of [perfect] crisis, pain, prolonged illness, death, or a return of the same symptoms.”⁶⁷ These unconcocted humors leave the body in one or both of two ways: by “the ordinary means of evacuation – mouth, bowels, urine, [and] pores,”⁶⁸ or by extraordinary means.

The Greek technical term for these extraordinary means is *apostasis*, which is often translated ‘abscession,’ another technical term, this time of medical English, meaning ‘discharge’. Jones isolates abscession as the fourth and final stage of Hippocratic disease theory. In this stage, the excess of the offensive humor is eliminated, “sometimes as an eruption or inflammation, sometimes as a gangrene or tumor, sometimes as a swelling of the joints.”⁶⁹ When abscession did not occur naturally, the physician could provoke it. If the offensive humor were blood, for example, he could do so by bloodletting.⁷⁰ This practice survived as long as did Hippocratic doctrines about the humors, which is to say: into the nineteenth century.

⁶⁵ *Epidemics I*, 26.

⁶⁶ *Epidemics I*, 11.

⁶⁷ *Epidemics I*, 11.

⁶⁸ Jones 1923, I, liii.

⁶⁹ Jones 1923, I, liii.

⁷⁰ *Nature of Man*, 11: “Bleeding then should be practiced according to these principles.”

But even when the abscession occurred naturally, this did not necessarily mean the end of the disease, though sometimes it would have. In other cases, Jones notes, it signaled the change of one disease to another – which Hippocrates calls a *hypostrophe*, or ‘relapse’.⁷¹ With the relapse, one imbalance of humors replaced another, perhaps by the body’s overcompensation in its original abscession. If so, there would likely be new symptoms, in effect a new disease,⁷² followed by another crisis, resulting in either death or another abscession. This second abscession in turn would bring the patient the same alternatives as before: a renewed balance of humors, and thus health, or a third set of symptoms. And so on.

In this way, one patient might have suffered a series of crises as his body sought to restore a former balance. Moreover, with a delayed crisis – as in tuberculosis (*phthisis*), for instance – the disease could last for years. However, all diseases, then as now, followed one of two paths: that one leading upward, so to speak, toward health, and the other leading downward, toward death. The only difference between Hippocratic medicine and our own is the way in which these paths are characterized. For us it is a complex matter of microbes and biochemistry, immunology and the numerous other medical specialties. For Hippocrates it was simply a matter of balanced versus imbalanced humors. But this simple opposition conceals its own complexity. While there was only one state of balance, the different combinations of imbalance, and thereby the variety of diseases, were endless.⁷³

⁷¹ Cf. *Epidemics I*, 8; *Epidemics III*, 12; both cited in Jones, I, liii.

⁷² *Affections*, 8.

⁷³ Amusingly, here Hippocrates anticipates Tolstoy: “All happy families resemble one another, each unhappy family is unhappy in its own way.” (the first line of *Anna Karenina*) But the aside is not altogether frivolous: the family is a miniature body politic, and Hippocratic medicine was still influential in Russia in Tolstoy’s lifetime. If Hippocratic ideas could shape Greek historiography – even the narration of insurrection, as we will argue in the fifth section of this study – why not also Russian literature?

3a. A Case History

In order to review the stages of Hippocratic disease theory and confirm that Jones has accurately schematized them, let us quote at length one of the many case histories presented in the *Epidemics*. Any one will do; here is the first case of *Epidemics III*:

Pythion, who lived by the temple of Earth, was seized with trembling which began in the hands. First day: acute fever; wandering. Second day: general exacerbation. Third day: same symptoms. Fourth day: stools scanty, uncompounded (*akrêta*) and bilious. Fifth day: general exacerbation; fitful sleep; constipation. Sixth day: varied, reddish sputa. Seventh day: mouth drawn awry. Eighth day: general exacerbation; tremblings persisted; urine from the beginning to the eighth day thin, colorless, with a cloudy substance floating in it. Tenth day: sweat; sputa somewhat concocted (*hypo-pepona*); crisis (*ekrithê*); urine somewhat thin about the time of crisis. After the crisis, forty days subsequent to it, suppuration (*empuêma*) in the seat, and an abscession (*apostasis*) through strangury.

In this case as in all, the first stage of the disease – the imbalance of humors – is invisible, although its symptoms are visible. An important skill of the Hippocratic method, therefore, was to infer the unseen trouble from symptoms that could be seen: “medicine, being prevented, in cases of empyema, and of diseased liver, kidneys, and the cavities generally, from seeing with the sight with which all men see everything most perfectly, has nevertheless discovered other means to help it.”⁷⁴ In the case at hand, then, we see first these symptoms: trembling and wandering (*lêros*, meaning silly talk), a typically Hippocratic juxtaposition of mental with bodily symptoms.

The acute fever of this first day may indeed be the coction of the second stage, although, if so, it is far from perfect. For in the meantime there are ineffectual discharges of an uncompounded – that is to say, unblended – bile in scanty stools. The fact that the bile is unblended suggests, according to Hippocratic doctrine, that a genuine coction has

⁷⁴ *The Art*, 13.

not yet occurred; the fever of the day before was insufficient. Consequently, the symptoms worsen: insomnia, constipation, facial contortion.

The varied, reddish sputa of the sixth day should not be classified along with these worsening symptoms. To our minds, of course, coughing up blood is a bad sign, a very bad sign; to the Hippocratic who wrote up this case it seems to have been a promising sign of coction, albeit incomplete.⁷⁵ For even though the symptoms worsen still more, the tenth day brings sweat – one of the ordinary means of abscession – as well as ‘somewhat concocted’ sputa, presumably reddish with blood as before.

The second stage is therefore complete. The third stage, the crisis, comes immediately afterward, on the very same day. This crisis does not bring an instant restoration of health, but after a delay of forty days – for reasons the writer of this case does not explain – the abscessions come, expelling from the body the offensive humors, whose identities are also not revealed. With these abscessions, then, the fourth stage is complete: recovery follows. While the physician does not say, we can assume that his patient’s humoral balance has been restored, since this is tantamount to a patient’s recovery. The patient is healed. Notice how his disease has followed approximately the sequence of fixed days. The first exacerbation was on the second day; the next on the fifth; and the last on the eighth. Two of the three exacerbations, therefore, fell on even days. True to orthodox Hippocratic prognosis, then, the crisis also fell on an even day, the tenth.

⁷⁵ Needless to say, this is only one of the many weaknesses of this nosology; but we must avoid anachronism.

3b. Reality and Narratology

Even though the case of Pythion does not fall perfectly into the four discrete stages of Jones's schema, these stages do approximate its progress rather well. Indeed, a survey of the *Epidemics* confirms that nearly all the cases recorded there follow roughly these stages. It is safe to say, then, that Jones's schema is itself the Hippocratic theory of disease, or close enough to it for our purposes. Now, if these cases were accurately recorded, and not the fabrication of Hippocratic partisans, we should not expect them always to match the Hippocratic theory. After all, this theory is false. There is no humoral balance, coction, crisis, or abscession – at least not exactly as the Hippocratics have described them. And yet the theory matches these cases to a remarkable degree, a correspondence that requires explanation.

One explanation is obvious: Jones limned the theory from these very cases – it is no great surprise that they correspond with it. But this circularity should not be given too much credit. For if indeed the cases are accurately recorded, while there would be some correspondence, enough for Jones to warrant his abstraction of the theory, there should not be so much correspondence as in fact we find, since the Hippocratic theory is, after all, false. Why do these cases match the Hippocratic model so well? More explanation than circularity is needed. Two explanations are available, both of which have merit.

First of all, while the Hippocratic nosology is false, which is to say obsolete, it is in some ways quite close to the truth. Consider coction alone. As Hippocrates described it, of course, it does not occur. But fevers are in fact a sort of cooking – only it is microbes that are cooked rather than humors. Perhaps similar proximity might be found between medical reality and some of the other features of the Hippocratic theory. Perhaps, for instance, changes in weather or regimen upset not the humors but the immune system, making patients vulnerable to viral infection. Modern medical expertise

would be required to prosecute this inquiry.⁷⁶ At any rate, such an inquiry goes beyond the boundaries of this study.

Secondly, we must remember the way in which the cases are reported – the theory with which their observations are laden. Despite their dispassionate presentation, they are not purely objective records of illness any more than a photograph is a purely objective portrait of a sitter. It is now widely recognized, after all, that a photograph is taken by a particular photographer – that is to say, a photographer with an eye for particular types of composition, certain types of lighting, and so on. In a similar way, even if the Hippocratics recorded only the data they observed, their eyes were trained to observe the four humors, a certain list of symptoms, these four stages of disease, and especially certain crisis days. Jouanna notices the great detail with which the case studies correspond to Hippocratic theory;⁷⁷ he also observes the case studies' ellipses:

The signs are noted, but their significance is generally not given. It presumes on the part of the reader a knowledge of the intrinsic value of each of these signs, corresponding to the instruction imparted by the treatise *Prognostic*, which functions for the modern student as a sort of decoding manual for the case studies contained in the *Epidemics*.⁷⁸

Lee T. Percy goes even further with this point – known to philosophers as the *theory-dependence*, or sometimes the *theory-ladenness of observation*, but to philologists more commonly as *narratology* – and singles out the *chronology* of Hippocratic case histories, which he calls stories, as less than perfectly objective:

The author of the story has chosen to narrate his tale in chronological order from the first to the last day . . . This natural order seems inevitable and true, but we

⁷⁶ Also required, however, would be an acquaintance with Thomas Kuhn's *Structure of Scientific Revolutions* (1962, Chicago), which supplies an approach to epistemological problems of this sort that is sophisticated enough to avoid both the Scylla of historical relativism and the Charybdis of anachronism.

⁷⁷ Jouanna 1992, 306.

⁷⁸ Jouanna 1992, 306.

ought not to suppose that the story is somehow true simply because it follows the order in which events happen. Narrative attains truth by telling events truthfully, not by telling them in one order or another. By choosing chronological order, the Hippocratic author makes a claim to be telling a certain kind of truth, and he directs the reader's attention to the chronology of disease and to the critical days in which his interest lay.⁷⁹

Most of our present-day photographers make sure to include the subject's face in their portraits; rarely do they photograph only his torso and hands, as much as these might reveal about a person's life.⁸⁰ In a corresponding way, the Hippocratics made sure to observe the humors, the crisis days, and these four stages that Jones elicits. But they do not mention the pulse, since the significance of the pulse would not be recognized as an important medical datum until Praxagoras of Cos, in 300 B.C.⁸¹ In the same way, for another example, although the Hippocratics record delirium, they never record what was said in this state. Whereas the content of delirious speech would be crucial to a modern psychiatrist, it seems to be irrelevant to the Hippocratic. What is deemed relevant and what irrelevant, then, depends upon theoretical assumptions. A purely objective – that is to say, theory-independent – case-history is impossible.

The same point holds true of Thucydides. If he were influenced by Hippocratic medical writing – as the general methodological parallels we have already discussed suggest – we should not be surprised to find him looking for the stages of Hippocratic disease theory when he himself describes a case of disease, the plague in Athens. Conversely, if we find him looking for these stages in the plague, we could infer that he were influenced by Hippocratic theory, were we not also aware of the less tendentious explanation: that he and the Hippocratics exhibit similar thought-patterns. In agreement with our earlier parallels, this similarity is indeed what we find, although the matter has

⁷⁹ Percy 1992, 600.

⁸⁰ Although sometimes they do. See, for instance, Henri Cartier-Bresson's *Mexico*, reproduced in Janson, H.W. and Anthony F. Janson, 1992. *A Basic History of Art*, 4th edition (Englewood Cliffs, New Jersey), 486. Cartier-Bresson intended to destabilize precisely this conventional assumption of portraiture.

⁸¹ Lloyd 1978, 31.

been hotly debated in scholarship. Before assessing this scholarship, however, let us follow Thucydides' own description of the disease. With an eye to the Hippocratic theory of disease, we find many moments when Thucydides' description matches Hippocrates' four stages.

4. The Plague in Athens

The first symptoms of the plague, at least the first reported in Thucydides' narration, are "violent heats in the head, and redness and inflammation of the eyes," with "the inward parts, such as the throat or tongue, becoming bloody and emitting an unnatural and fetid breath" (2.49.2). The first stage of a standard Hippocratic disease, remember, is the disturbance of humors. This disturbance cannot itself be observed, as we have already noted; but the symptoms of it can. Naturally, for each disease, these symptoms will vary, according to the precise nature of the humoral disturbance. These first symptoms Thucydides describes are thus a first record of the observable signs of an unseen imbalance. The humor of blood, for instance, seems to have overwhelmed the mouth, perhaps explaining its fetid odor. It could be that another humor – one of the biles, in all likelihood – is overwhelming the unseen lungs. Thucydides has not said; neither, as we have seen, would a typically laconic Hippocratic.

And yet among these symptoms, very first among them in fact, are these "violent heats in the head". While these heats may be symptoms of an excess of a hot humor like blood, they may also be the victims' first attempt at coction, the second stage of a Hippocratic disease. If so, the plague alternates, even from the beginning, between different stages – first an imbalance of humors, then an attempt to rectify it. But there is nothing remarkable in this, at least from the perspective of Hippocratic medicine. After all, we have seen how even Hippocrates himself describes his patients alternating

between symptoms, crises, abscessions, renewed symptoms, successive crises, and so on. The stages remain distinct in Jones's theory for the sake of conceptual clarity; in reality, by contrast, they will often come at the same time, or even reverse their standard order. In this way, Thucydides' catalogue of symptoms continues: "sneezing and hoarseness," followed by several symptoms that descend from head to stomach.

Once they arrived in the stomach and settled, Thucydides adds, "discharges of bile of every kind named by physicians ensued, accompanied by a great distress." (2.49.3) Incidentally, this offhand mention of the physicians and their schemes for naming the varieties of bile directly suggests that Thucydides had read the medical writings.⁸² Less directly, if the "violent heats in the head" were a first attempt at coction, these discharges may be a first attempt at abscession. With this first abscession, moreover, we have the first mention of mental symptoms: great distress. This symptom should remind us of Hippocrates' frequent attention to ravings and delirium. Like Hippocrates, Thucydides does not report the content of these ravings. His silence is surprising, though, since his attention to psychological detail elsewhere is keen. In any case, with a first abscession, we can plot a standard Hippocratic course for the plague: symptoms (inflammation of eyes and throat, with fetid breath, sneezing and hoarseness), coction (a head-fever), abscession (discharges of bile). There is not, as yet, an official, definitive crisis, if only because there are so many more symptoms and coctions to come. In fact, the next set of symptoms comes immediately: "ineffectual retching following, producing violent spasms" (2.49.4).

In its turn this second set of symptoms precedes an attempt at coction. Although the body of the victim was not hot to the touch, it was reddish and livid, breaking out into small pustules and ulcers (2.49.5). It seems that these abscessions, livid no doubt with excess blood, derived from an internal cooking. For speaking of the body, Thucydides

⁸² Parry 1969, 170.

writes that “internally it burned”. Thus, just as the first set of symptoms brought a first coction and abscession, so too this second set has brought a second coction and abscession. Again, Thucydides does not mention a crisis – not yet anyway. However, the two cycles of the plague so far match our earlier description of multiple crises according to the Hippocratic model. As we should expect, therefore, a third set of symptoms arrives, different from the first two: insomnia and its attendant anxiety, recalling once again the Hippocratic concern with mental phenomena, for the purpose of somatic diagnosis.

At this point Thucydides does signal a crisis, though he does not use the Greek word or any of its cognates. Were Thucydides to have parroted Hippocratean vocabulary, he certainly would have helped scholars to establish the Hippocratic influence upon him; but it was hardly his style. Cochrane claimed to have found parallels between the styles of these two writers – although, as we have seen, he did not base his comparison exclusively or even primarily on points of style.⁸³ Adam Parry later disputed these stylistic parallels,⁸⁴ only to have Simon Swain in turn dispute his disputation.⁸⁵ The results of this debate are of less importance to the present inquiry than the parallels of method, general and specific, that we have already found between these two writers. While not altogether dismissing philological evidence, therefore, we should not be distracted from our task by its absence. Thucydides was a writer of singular literary merit and molded Greek to his own ends; it is no surprise that he avoided terms hackneyed by the medical authors. Indeed, as we will see in a following section of this study, it seems that he has filtered the Hippocratic concepts through a tragic idiom.

At any rate, the comparison between the prose styles of Thucydides and Hippocrates, while appealing, can be exaggerated.⁸⁶ To see this comparison as

⁸³ Cochrane 1929, 16.

⁸⁴ Parry 1969, 156-176; besides taking aim at Cochrane, Parry has in his sights Weidauer, de Romilly, and Page.

⁸⁵ Swain 1994, 308-310.

⁸⁶ Cf. Jones (I, 141), who in his introduction to the *Epidemics I* and *III*: “Pretensions to literary form it has none, yet no Greek writer, with the possible exception of Thucydides, has used language with better

exaggeration, we need only compare the case history quoted earlier (*Epidemics III*, 1) with Thucydides' plague narration. Both achieve a precision required by their subjects, to be sure, but Thucydides often achieves high drama; Hippocrates' precision has all the art of a cookbook. While other Hippocratic cases can be moving,⁸⁷ we should nevertheless expect Thucydides to avoid Hippocratic terms. Despite the absence of *krisis* and its cognates in Thucydides' narration of the plague, it may nonetheless involve three crises.

For we have seen two of these crises already: they were the moments of coction that produced the first two abscessions. This third crisis occurred, writes Thucydides, on the seventh and ninth days. The Greek original reads as follows: *diephtheiron to hoi pleistoi enataioi kai hebdomaioi hypo tou entos kaumatos* (2.49.6). Literally, "most were killed by the presence of the fever on the ninth and seventh days". Unfortunately, Richard Crawley translates this passage as follows: "they succumbed, as in most cases, on the seventh or eighth day." There is no textual variant for *enataioi* and so a translation of it as 'eighth' remains puzzling.

Other translations of this passage offer still other sets of days. Luce, for instance, goes further and translates the same figures as the sixth and the eighth days, perhaps using an inclusive counting system that the Greek words do not bear. But at least Luce is consistent, saving himself from Crawley's worse error. For, as we have seen, Hippocratic disease theory allows for crises on either odd or even days, but not on both. Moreover, those on odd days follow exacerbations from odd days, whereas those on even days follow even-day exacerbations. Thucydides does not record the days of the plague's exacerbation, but the days he does mention – the days of this crisis – are days that Hippocrates himself lists: "Of those with a crisis on the odd days, the first period is the third, then the fifth, *seventh (hebdomê)*, *ninth (enatê)*, eleventh, seventeenth," etc.⁸⁸

effect"; cited in Parry 1969, 171. Swain (1994, 309) also compares the prose of Hippocrates to that of Thucydides.

⁸⁷ See *Epidemics III*, 4.

⁸⁸ *Epidemics I*, 26; emphasis added.

Most died on these days, then, the seventh and ninth, but those who survived them were not immediately restored to health. On the contrary, Thucydides writes, “the disease descended further into the bowels, inducing a violent ulceration there accompanied by severe diarrhea” (2.49.6). Thus follows – after the major crisis, which is really a third crisis after two minor ones – another abscession: the violent ulceration and severe diarrhea. True to the Hippocratic theory, this third crisis now precipitates a fourth set of symptoms: the diarrhea brought a weakness that was usually fatal. If some survived this weakness, concludes Thucydides, the plague settled in their extremities. Some escaped, he adds, with just the loss of these. As a result, fingers and toes might be considered a sort of abscession. Other victims recovered with a total amnesia.

This marks the end of his somatic diagnosis of the plague. While his narration continues, it is to psychological and sociological consequences that he turns – in other words, to moral and political concerns – concerns that are alien to Hippocrates, as we have already observed. To this point, however, the plague in Athens follows an orthodox Hippocratic trajectory: a set of symptoms (I), at the same time as a coction (I) with an implied minor crisis (I), and an abscession (I); another set of symptoms (II), another coction (II) with another implied minor crisis (II), and another abscession (II); a third set of symptoms (III), a continuation of the fever that was the second coction (III), and a third abscession (III); finally, a fourth set of symptoms (IV), which brought death to some, but to others permanent injury, whether physical or psychological. All told, there are three phases, each with its own set of symptoms, a coction, crisis, and abscession. Finally, there is a fourth period during which the patient recovers or dies.

4a. Objections and Replies

Unless this analysis has unduly manipulated Thucydides' narration, we find him to be rather faithful to the Hippocratic theory of disease. Certainly there are some departures – the first two crises are not mentioned as such. However, this trajectory is as faithful to the Hippocratic theory as were the Hippocratics themselves, since, as we had occasion to notice earlier, not even the Hippocratics record cases that perfectly match their own theory. Unlike geometry, needless to say, medicine is a messy science whose theories hold only 'for the most part' (*hôs epi to polu*), a loose notion that Aristotle would later convert into a technical term of metaphysics. Even still, Jouanna writes that, "Thucydides is in accord with the medical literature in two respects: he describes the symptoms of the illness precisely, with the aid of a technical vocabulary analogous to that of the doctors;" and, like the Hippocratics, his pathology is thoroughly rational.⁸⁹ Whether or not their vocabularies are analogous, we have found here, more importantly, that their approaches are similar, that they use the something like the same nosology.

This apparent faithfulness to Hippocrates, one may object at this point, could be nothing more than a faithfulness to the actual trajectory of the plague. After all, if Thucydides describes the plague accurately, and the Hippocratics have an accurate theory of disease, we should expect a correspondence between the two – their mutual correspondence with reality ensures it. And yet, the limited accuracy with which we have already credited the Hippocratic theory is not enough to explain so remarkable a correspondence. How else to explain this correspondence?

We noticed earlier how Hippocratic observation focused upon features of disease that seem especially salient to an observer with, so to speak, Hippocratic eyes: the humors, the critical days, the four stages. All of these are present in Thucydides'

⁸⁹ Jouanna 1992, 208.

narration, or so we have argued. Conversely, symptoms of disease that later, even Hellenistic, physicians would observe, symptoms of which Hippocratic medicine makes no use, such as the pulse, are conspicuously absent from Thucydides' narration. Therefore, their mutual concern with objective observation accounts for some, but not all, of their correspondences. To explain the rest, we need to infer either, with Cochrane, an influence or, with Finley, a common intellectual climate..

In either case, there remain two differences between Thucydides' narration of the plague and the Hippocratic writings, differences that a hypothesis of influence, or even one of common intellectual climate, cannot ignore. First of all, Thucydides eschews speculation about the causes of the plague: "All speculation as to its origin and its causes, if causes can be found adequate to produce so great a disturbance, I leave to other writers, whether lay or professional" (2.48.3). This seems to be more than a profession of humility, since he says a little further on that "the nature of the distemper was such as to baffle all description"; mysteriously, it attacked animals and humans alike (2.50). Rather than pry into this mystery, however, Thucydides prefers instead to "set down its nature, and explain the symptoms by which perhaps it may be recognized by the student, if it should ever break out again." (2.48.3) And yet this difference does no harm to our argument. Thucydides used Hippocratic medicine to describe the plague, but he was not thereby a Hippocratic physician. The cause of the plague, on the one hand, bears little importance for the history of his war; its course and effects, on the other, are paramount.

By contrast, Hippocratic *katastaseis* diligently record the weather for a year, associating this weather and its changes with the diseases that afflicted people that same year. This method implicitly assumes that one cause of disturbances in bodily humors will be the weather. At least in the *Epidemics*, then, Hippocratics speculate about causes of disease. Elsewhere their speculation is more explicit.⁹⁰ While it is unlikely that the

⁹⁰ See, for instance, *Nature of Man*, 12; or *Diseases I*, 15; or *The Sacred Disease*, *passim*.

geographical progress Thucydides reports for this particular disease – from Ethiopia to Egypt, Libya, and the rest of the Persian empire; from these places, suddenly to the Piraeus and ultimately Athens itself (2.48.1) – was a matter of mere weather, it is possible. With a Hippocratic etiology of disease, climatic movement between places as disparate and different as Ethiopia and Athens, becomes difficult to explain. But the notion of ‘unhealthy exhalation’ discussed earlier provides one possible reply to the objection. At any rate, Thucydides says nothing on this score. “What separates Thucydides from the physicians of the Hippocratic Collection,” writes Jouanna, “is his refusal to assign a cause.”⁹¹

A second difference between Thucydides’ narration of the plague and the Hippocratic writings is that he notices the *infectious* nature of diseases like the plague. To explain epidemics, the Hippocratics always adverted to climatic change, bad air, bad water, or a collectively bad regimen. There is no room in Hippocratic orthodoxy, after all, for the transmission of one person’s disease to another. To be diseased, remember, a person must have an imbalance of humors. But it is difficult to see how one person’s imbalance would cause a similar imbalance in his neighbor. Hippocratic nosology therefore nearly precludes contagion.⁹² By contrast, writes Jouanna, “Thucydides was able explicitly to note the fact of contagion and to observe, rightly, that physicians, by virtue of their contact with the sick, were the most vulnerable to infection.”⁹³ Jouanna attributes this prescience to Thucydides’ freedom from “preconceptions that prevented specialists from admitting the possibility that an epidemic might be transmitted by contact.” While Thucydides was not free from preconceptions, even Hippocratic

⁹¹ Jouanna 1992, 208.

⁹² Lloyd, in the Introduction to his Penguin volume of Hippocratic treatises, appears to miss this peculiarity of Hippocratic orthodoxy: “The selflessness and dedication shown by many Greek doctors can be seen not only in such works as the *Epidemics*, but also in, for example, Thucydides’ account of the plague at Athens (II, 47ff.) – where he notes the high incidence of mortality from the disease among the doctors who attempted to treat it.” (Lloyd, 1978, 17) It may not have been so much their selflessness as their ignorance of contagion as a medical phenomenon that increased doctors’ mortality rate!

⁹³ Cf. Thucydides, 2.51.4. Jouanna 1992, 209.

preconceptions, as we hope to have shown, he does seem to have surpassed the Hippocratics in his powers of observation.

The third difference between Thucydides' narration of the plague and the Hippocratic writings is one that we have already had the opportunity to notice. Hippocrates mentions mental, but never moral or political, phenomena, and then only in order to illuminate somatic troubles. Thucydides moves past the somatic symptoms of the plague to analyze its psychological, moral, and political consequences for their own sake. Historiography, as we have already seen, requires this expanded analysis. With Thucydides, therefore, the somatic symptoms are really a prelude to this moral and political diagnosis. He mentions distress (2.49.3) and even despair (2.51.4), which Hippocrates himself might have observed. But he goes further and mentions consequences altogether absent from Hippocratic writing: altruistic attendance on family and friends (2.51.5), an imagined invincibility upon recovery (2.51.6), and the breakdown of civilized behavior (2.52.4 – 2.53.4).

With particular regard to this breakdown, Thucydides marks its most interesting manifestation with a prophetic sentence: "Perseverance in what men called honor was popular with none, it was so uncertain whether they would be spared to attain the object; but it was settled that present enjoyment and all that contributed to it, was both honorable and useful." (2.53.3) The plague had been calamitous for individual bodies and the result we see here is a perversion of language: true honor loses its appeal, and in its stead the heedless pursuit of pleasure is deemed honorable. Later we will dwell on Thucydides' most famous passage on the perversion of language – 3.82.4, analyzing the Corcyrean *stasis*; there we will find the same effect, caused this time by a calamity, not for individual bodies, but instead for a body politic. But here we anticipate the fifth section of this study. Before coming to the subject of the body politic and its specific disease, *stasis*, let us survey as quickly as possible some of the scholarship on Thucydides' narration of the plague.

4b. Thucydidean Historiography

Many have written on Thucydides' plague narration, most arguing that it describes one disease (e.g., mumps or typhus) rather than another. This is not our concern. However, three scholars – Cochrane, Parry, and Percy – focus on the text's Hippocratic echoes. Each comes to a different conclusion, and their debate offers a fine example of scholarly dialectic. To borrow a Hegelian idiom, then, the first presents a thesis, the second an antithesis, and the third a synthesis. This synthesis, Percy's narrative model of diagnosis, is a rich and innovative reading of the plague. It will serve us well in our own fifth section on the Corcyrean *stasis* narration.

We begin, as earlier, with Cochrane. "In his account of the plague," Cochrane boldly claimed, "Thucydides follows precisely the Hippocratic procedure."⁹⁴ Cochrane's analysis of this correspondence was far from thorough, however. According to him, there are four points of contact. First, Thucydides provides "what in Hippocratic terminology is a *katastasis*". Second, there follows "a general description of symptoms". Third, and most important, there is "reference to the fact that the 'crisis' occurred as a rule on the seventh or ninth day". Fourth, there is a description of "what may be called the complications attending recovery".

In our own analysis we have mentioned these points among others. The other points of contact and fuller details might have corroborated Cochrane's bold claim in our minds, had we not also noticed the absence of key Hippocratic technical terms, not to mention the presence of three differences between the authors. We have found that Thucydides' narration of the plague does not precisely correspond with Hippocratic nosology; nevertheless, we do share Cochrane's confidence that a correspondence exists.

⁹⁴ Cochrane 1929, 27; all the quotations in this paragraph are from the same page of Cochrane.

For this reason we must meet Parry's criticism of him and all the other scholars who have sought to establish such a correspondence.

Parry's only criticism of Cochrane concerns his first claim: the *katastasis*. Now, according to Cochrane, Thucydides' *katastasis* is the following introductory sentence to the plague narration: "That year then is agreed to have been otherwise unprecedentedly free from sickness; and such few cases as occurred, all turned into this." (2.49.1) It is indeed mysterious that Cochrane calls this "a general description of the conditions, climatic and otherwise, prevailing during the summer in which the plague broke out."⁹⁵ For, as Parry observes, "The sentence in fact contains not a single reference to the weather, or to any conditions other than the good health that people generally enjoyed when the Plague struck them."⁹⁶ But even without a reference to the weather it is nonetheless a sort of *katastasis*. As we noted in our discussion of this feature of Hippocratic writing, after all, the typical *katastaseis* includes not only weather but also a subtlety that Parry has overlooked. Amidst the almanacs, these *katastaseis* sometimes mention the diseases prevalent before a given season. Specifically, they describe how the medical problems of the season afflicted those who were already ill, as compared with those who were healthy when the season began. Earlier, as an example, we cited the first constitution of *Epidemics I*, which describes the effects of the season on people of varying health.

Parry's criticism of Cochrane therefore misses this important subtlety of Hippocratic diagnosis. Similarly, Swain has parried many of Parry's philological thrusts against the other scholars – especially Page – who have sought word-parallels between Thucydides' narration of the plague and Hippocratic writing. This is not to say that Parry's paper has failed altogether. While much of his polemic does miss the mark, some of his philological clarifications are salutary. More importantly, he brings to light a

⁹⁵ Cochrane 1929, 27.

⁹⁶ Parry 1969, 158.

dimension of the plague narration that others had failed to notice – namely, its tragic dimension. His purpose in refuting the correspondence between Thucydides and Hippocrates seems to have been a fear that such a correspondence put Thucydides in the ‘science’ camp of the positivist dichotomy between ‘science’ and ‘art’ – not to mention the same camp of the related dichotomy between ‘science’ and ‘religion’. In short, Parry sought to rescue Thucydides the Artist from scholars who saw only Thucydides the Hippocratic, that is to say, Thucydides the Scientist.

To be sure, the alignment of Thucydides not only *with* science, but also *against* art, religion, and even philosophy, was indeed Cochrane’s purpose in *Thucydides and the Science of History*. These positivist dichotomies occur on many of its pages⁹⁷ and Parry is right to be suspicious of them. “The difficulty,” he writes, “is that those who insist on Thucydides the Scientist are likely to do so, as Cornford long ago observed, on the basis of a dichotomy of *science* and *art*.”⁹⁸ We next learn that Crawley, “the fine Victorian translator,” was another victim of this dichotomy. Very few Victorians were not.⁹⁹ Parry is moreover right to try and rescue Thucydides from the scientistic reading.

Thus, after trying in vain to fight off Hippocrates, Parry marshalls Aeschylus and Sophocles, highlighting the moments and phrases from the plague narration that remind us of their tragedies. The plague is a *daimonion*, he argues, “the most sudden, most irrational, most incalculable, and most demonic aspect of war in Thucydides’ view of history.”¹⁰⁰ Accordingly, Parry concludes, Thucydides reaches for ‘compassionate poetry’ in order to describe it, not Hippocratic formulae. But in the case of Thucydides

⁹⁷ Consider just two passages from the introduction and conclusion. “Throughout it has been assumed that scientific knowledge is relative, and that the ‘absolute’ truths of philosophy have nothing to do with science.” (12) “They should admit that no such standards can be discovered within the limits of science, but are really inspired by religion and philosophy.” (177) The whole book is redolent of the positivism fashionable when Cochrane wrote it. Jones was his contemporary; accordingly, he writes of Hippocrates in the same way: “The spirit is truly scientific, in the modern and strictest sense of the word. There is no superstition, and, except perhaps in the doctrine of critical days, no philosophy.” (I, xv)

⁹⁸ Parry 1969, p.165.

⁹⁹ See, for example, the compelling introduction of Philip J. Samson’s *6 Modern Myths about Christianity & Modern Civilization* (Downer’s Grove, Illinois, 2000), 7-26.

¹⁰⁰ Parry 1969, 176.

the dichotomy between the two – tragedy and medicine – is false, as false as the positivist dichotomies that Parry has pretended to reject. For rather than reject these dichotomies, he has implicitly assumed them. Instead of Thucydides the Scientist, Parry presents Thucydides the Artist, Thucydides the Tragedian. But there is no reason why Thucydides cannot echo at once, in the same narration, both the Hippocratic *and* the tragedians. Indeed, that he should do so is just one more sign of his literary genius.

Pearcy makes this synthetic reading of Thucydides feasible by distinguishing between the varieties of modern medical diagnosis, on the one hand, and, on the other, the so-called ‘narrative’ diagnosis practiced by Hippocrates, Thucydides, Galen, Aristides and other ancient medical writers. Percy’s principal premise, which we have already had occasion to endorse, is that no story, not even a medical one posing as an objective diagnosis, presents the unvarnished truth. In Percy’s words, “Every narrative – that is, every literary work in which we feel the presence of a story and a storyteller – presents reality mediated, and therefore transformed, by the conventions of language and art.”¹⁰¹

As stated, Percy’s premise seems weaker than our own, for two reasons. First of all, while ours concerned all observations and records, Percy seems to limit himself just to stories; however, since he reads even laconic Hippocratic case histories as stories, our difference is one of names only. If we too are prepared to call Hippocrates a storyteller, we are in complete agreement with Percy. Additionally, while our premise highlighted the theoretical mediation of reality by observation, Percy mentions only linguistic and artistic mediation; but again, since he notices the same Hippocratic features we noticed – namely the humors and the crisis days – our difference here is also one of names alone. Again, if we are prepared to admit that reality is mediated in observation and recording not only by theory but also by conventions of language and art, we are likewise in complete agreement with Percy.

¹⁰¹ Percy 1992, 599.

In sum, Percy assumes this general truth: *Narrative presents reality mediated*.¹⁰² “There is no reason,” adds Percy, “to regard Thucydides’ account of the plague, Galen’s description of a Roman lady’s lovesickness, or indeed any ancient medical narrative as an exception to this general truth.”¹⁰³ Once we grant that Thucydides’ account of the plague presents reality mediated, however, we must ask further: *how* exactly does it mediate? *What* are its assumptions – theoretical, linguistic, and artistic? These two questions are just a beginning. And yet we have already come some distance toward answering them.

For we have seen how Thucydides’ historiography parallels Hippocratic medicine.¹⁰⁴ In the second section of this study we isolated seven general methodological parallels between the methods of these two writers. In this fourth section we have seen Thucydides’ narration of the plague, specifically, following the four stages of Hippocratic disease theory. Thucydides may not have borrowed medical conventions of language and art, if the Hippocratics had any art to speak of, but he nevertheless presents the reality of the plague mediated by something very like Hippocratic theory and method. This, at least, has been the conclusion of this section. As for conventions of language and art, Parry argues deftly that Thucydides borrows instead from Greek tragedy. In our synthetic estimation, then, Thucydides has, so to speak, filtered Hippocrates through Aeschylus and Sophocles. In short, he is both Scientist and Artist.¹⁰⁵

Percy’s reading of Thucydides allows for this. According to him, Thucydides and the medical writers adopt what he calls the ‘narrative model of diagnosis’. This

¹⁰² This general truth, which earlier we called Percy’s ‘narratological’ point, is one of the four or five most important theses that together comprise the philosophical constellation now known as postmodernism.

¹⁰³ Percy 1992, 599.

¹⁰⁴ Cochrane 1929, 15-16.

¹⁰⁵ Jouanna situates Thucydides between the Hippocratics and the tragedians, specifically Sophocles, with his representation of a plague in the *Oedipus Rex*. According to Jouanna, “The rational and natural causality of the Hippocratic physician stands opposed to the religious and moral causality of the tragic playwright, while the historian, though implicitly he challenges religious causality, shows himself to be openly skeptical of the rational explanations advanced by the physician. Sophocles may therefore be seen as representing the traditional cultural heritage; Hippocrates as embodying the rising tide of rationalism; and Thucydides as marking the beginning of a tradition of skeptical positivism that limits itself to describing facts and refuses to draw conclusions about causes.” Jouanna 1992, 209.

model – as distinguished from the dominant models of modern medicine, none of which acknowledge the narratological premise – “allows us to understand medical narrative rhetorically, by pointing out the presence or absence of figures of speech and thought, and structurally, by calling attention to ways in which the author has shaped his account.”¹⁰⁶

Pearcy does not himself perform the double analysis he enjoins, but by accepting Parry’s philological arguments we have our own already prepared: rhetorically, Thucydides adopts the figures of tragedy; structurally, he shapes his account according to the Hippocratic theory of disease. The few departures of his plague narration from this medical theory can thus be explained not only as original departures (such as the observation of contagion), but also by his efforts to filter Hippocratic ideas, as we have already mentioned, through the tragic idiom. Besides possessing the advantages we have already seen – namely, of accommodating the best elements of both Cochrane’s and Parry’s arguments while at the same time avoiding their shared error, the false dichotomy between science and art in Thucydides’ prose – this synthetic reading of the plague narration goes a long way towards explaining its simultaneous precision and power.

If we accept this synthetic reading of the plague narration, however, we must wonder whether it is not also acceptable as a reading of Thucydides’ other narrations, especially those many others about abnormality and breakdown. For the plague presents Thucydides’ starkest example of bodily breakdown; but for breakdown in a body politic, of which Thucydides provides several examples, the Corcyrean *stasis* stands out as the grimmest. Since Thucydides told the tragedy of the plague according to the Hippocratic theory of disease, then, might not this same theory shape the way in which he tells the tragedy of Corcyra? The next section of this study answers that it does.

¹⁰⁶ Percy 1992, 600.

5. *Stasis* as Disease

Of the scholars already mentioned, only Swain and Cochrane draw attention to the parallels between Thucydides' narrations of the plague and *stasis*, not to mention the parallels between both of these and Hippocrates.

For his part, Swain self-consciously avoids “the ‘medical’ Thucydides of Cochrane & co,” as Simon Hornblower put it;¹⁰⁷ and yet he cannot fail to notice certain medical parallels in the *stasis* passages. Among these parallels is a shared vocabulary. Swain claims that in “the description of both the plague in Book Two and the *stasis* in Book Three medical discourse is used as a part of an exploration of social ills focusing on what happens to *anthrôpeia phusis*.”¹⁰⁸ *Anthrôpeia phusis* does not occur directly in the plague narration, but we have already quoted from a Hippocratic treatise of a similar name, the *Peri Phusios Anthrôpou*. As we saw in the second of our general methodological parallels, moreover, both Hippocrates and Thucydides concern themselves almost exclusively with human nature, the effects it suffers and the effects it causes.

As a more particular example of their shared medical discourse, however, Swain notices that Thucydides speaks of “the many difficulties which ‘fell upon’ states during *stasis*. The verb here is *epiptein* which again recalls medical talk. . . It is also used of the onset and symptoms of the plague which attacked Athens (2.48.3, 49.6; 3.87.1).”¹⁰⁹ This shared vocabulary provides some evidence for our correspondence thesis; nevertheless, as before, our quarry remain the parallels of *structure*. In the fourth section we hunted those between the plague and Hippocratic nosology; in this fifth section we are after parallels between that same theory and the Corcyrean *stasis*.

¹⁰⁷ Hornblower 1987. 133 n.102; cited in Swain 1994, 307.

¹⁰⁸ Swain 1994, 311-2.

¹⁰⁹ Swain, 1994, 306. He also notices the verbs *emiptein* and *prospiptein*, 306-307.

5a. *Katastasis*

Cochrane provides the first of these parallels: the *katastasis*. In Hippocrates, remember, the *katastaseis* described the weather that prevailed during particular seasons, as well as the particular diseases that existed at the beginning of these seasons. What could be the *katastaseis* of Thucydides' political history?

One would think Cochrane could help us answer this question since he claims that Thucydides begins his analysis of the Corcyrean *stasis* with a *katastasis*. Unfortunately, he does not say precisely what this is.¹¹⁰ There are hints following his claim,¹¹¹ but they are never spelled out. In order to do so ourselves, then, we must be prepared to use our imagination a little. After all, we are not looking for weather reports. If we are to find an equivalent of *katastasis* for political disease, therefore, we must find something that functions in politics – or, more precisely, something that Thucydides *believes* to function in politics – the way that weather was supposed to function in medicine. Thus, we must find something that is in the background of the disease but which also helps cause it. Remembering the importance of double causation for both Hippocrates and Thucydides, in other words, we must find something that acts as a triggering cause which activates a predisposition to disease.

When the disease is *stasis*, specifically the Corcyrean *stasis*, by Thucydides' own account this triggering cause is the state of war in the Greek world, but especially the two networks of alliances between weaker cities, on the one hand, and, on the other, the two great rival powers, Athens and Sparta. "In war," writes Thucydides, "with an alliance always at the command of either faction for the hurt of their adversaries and their own corresponding advantage, opportunities for bringing in the foreigner were never wanting to revolutionary parties." (3.82) In the case of Corcyra, as we will see below, factional

¹¹⁰ Cochrane 1929, 133-134.

¹¹¹ Cochrane 1929, 136-137.

strife became so serious that one or both parties were ready to place factional victory over national independence. The help of either Athens or Sparta was readily available to these parties: Athens for the commons, Sparta for the oligarchs. This help inevitably exacerbated the strife and triggered it to become a brutal revolution – in short, a disease of the body politic.

Cochrane sometimes seems to think that the *katastasis* describes not this background of war and alliance but a background of moral breakdown. “The war,” he writes, “suggested to men that the true method of solving not merely their inter-state but also their domestic problems was that of antagonism.”¹¹² As a result, people resorted to violence everywhere, “so that *stasis* spread like a contagion throughout the Hellenic world.”¹¹³ There is ample evidence in Thucydides for moral breakdown, and indeed he mentions its connection with war in this very context: “war takes away the easy supply of daily wants and so proves a rough master that brings most men’s characters to a level with their fortunes.” (3.82) Thus, war and moral breakdown work together, the one intensifying the other in a truly vicious cycle. The whole cycle therefore constitutes a background that triggers *stasis*. However, this political disease will not arise, any more than will a bodily disease, unless there is also a predisposition to be triggered. If the cycle of war and moral breakdown was a triggering cause of *stasis*, then, we must still determine its predisposing cause.

In order to do so, let us recall the Hippocratic theory of disease and its account of predisposition as a matter of humors. Bodily disease, according to it, is an imbalance of humors, and each body harbors a predisposition toward certain imbalances. Thus, even before a body becomes ill with an excess or defect of a humor, it carries a predisposition toward that special excess or defect. For instance, one body may have a predisposition to excess in phlegm, while for another the danger is its defect. Or again, one body may have

¹¹² Cochrane 1929, 133.

¹¹³ Cochrane 1929, 133; cf. 136.

a predisposition to excess in blood, while for another the danger is its defect. And so on for the other two humors, yellow and black bile. Bodily predispositions are thus dangers of imbalance.

These bodily predispositions are often triggered, as we have seen, by certain changes in weather, and especially certain changes in season. After all, according to Hippocratic medicine, each season favors a particular humor. These various connections between season and humor are nowhere more evident than in this characteristically straightforward Hippocratic deduction:

So too in man sometimes phlegm is powerful, sometimes blood, sometimes bile, first yellow, and then what is called black bile. The clearest proof is that if you will give the same man to drink the same drug four times in the year, he will vomit, you will find, the most phlegmatic matter in the winter, the moistest in the spring, the most bilious in the summer, and the blackest in autumn.¹¹⁴

In this way, winter favors phlegm, spring blood, summer yellow bile, and autumn black bile. According to these connections and the theory they underwrite, when the seasons turn, if a person is predisposed to excesses of the humor favored by the arriving season, this humor will likely be triggered into excess. To a phlegmatic person, then, winter brings the danger of an excess in phlegm; to a sanguine person, by contrast, spring is the dangerous season; and so on. With the danger of an excess in one humor, of course, all the humors are in danger of imbalance by their relative defects; and with this danger of imbalance, a person's whole body is thereby in danger of disease.

Does this elaboration of the Hippocratic theory of disease shed any more light on the predisposing causes of *stasis*? Consider the following suggestion. During the Peloponnesian War, the two main components of Greek cities, at least as Thucydides depicts them, were the commons and the oligarchs – that is to say, the Many and the Few. There were other components to be sure: he sometimes mentions slaves, metics, and

¹¹⁴ *Nature of Man*, 7.

mercenaries. For the most part, however, he portrays the Greek city as a mixture of these two classes, the Many and the Few. The most telling passage on this point is his own approving description of the constitution of the Five Thousand at 8.97.2: “the blending (*xungkrasis*) of the few and the many was in proportion.”¹¹⁵ While slaves, metics, and mercenaries may sometimes play roles in the balance of a Greek city, the Many and the Few are most often the elements that matter – the humors whose proportionate blending ensures peace, but whose disproportion or separation, so to speak, predisposes the city to *stasis*.

Here then is a candidate for the predisposing cause of this political disease: class conflict. Just as one humor may become excessive in the body, so too one class may preponderate in the city. For instance, just as there are phlegmatic people, people with a predisposition toward an excess of phlegm, so too are there democratic cities, cities with a predisposition toward a preponderance of the Many. Moreover, just as there are sanguine people, people with a predisposition toward an excess of blood, so too are there oligarchic cities, where the Few prevail. A failure to blend these classes in their proper proportion of power creates civil unrest and a predisposition to civil strife. In other words, failure to blend the Many and the Few creates a predisposition to *stasis*.

The triggering cause of *stasis* we have already identified: war with its ready alliances, not to mention the vicious cycle of war and moral corruption. By this identification, however, we can extend our parallel with Hippocratic disease theory. If changes in season provoke excesses of particular humors in people with particular bodily predispositions, then so too might changes in alliance provoke a preponderance of a particular class in cities with particular political predispositions. For instance, just as the winter often brings about an excess of phlegm in phlegmatics, so too did an alliance with

¹¹⁵ Cited in Swain 1994, 308. Swain calls this passage “perhaps the most important personal verdict of the historian on Athenian social and political relations.” On 307 Swain also cites 6.18.6, where Alcibiades suggests that “the ordinary, the middle, and the very refined will be particularly strong if blended together.”

the Athenians bring advantage to the Many, since Athens so often championed the democratic cause. By contrast, the Spartans often championed the oligarchic cause, so that alliances with them brought advantage to the Few, just as spring brings about an excess of blood in the sanguine. In sum, with changes in season, the proportions of humors oscillate, threatening to trigger the predisposition to imbalance that is tantamount to disease. With changes in alliance against the background of war, similarly, the relative powers of the classes oscillate, threatening to trigger the predisposition to the imbalance that is tantamount to *stasis*.

The *katastaseis* of Thucydides' political history could therefore be descriptions not of the weather and antecedent illnesses but of the background of war and alliances. Cochrane is right, then, to claim that Thucydides begins his analysis of the Corcyrean *stasis* with a *katastasis*. But it is not so surprising after all that Cochrane does not say which passage presents it; for, in a way, the whole history up to this point is a description of the war with its shifting alliances. More precisely, though, 1.24-55 explains the series of events that trigger the *stasis* of Corcyra in particular; here, then, is Thucydides' *katastasis*.

This story begins with the conflict over Epidamnus, as a result of which the Corcyreans clash with Corinth. Although victorious in the first major battle with their mother city, the Corcyreans merely provoke her to extensive naval preparations. In fear, then, they seek the protection and alliance of Athens. While Athens is not yet officially at war with Sparta, Corinth, and the other Peloponnesian cities, the friction between Athens and the Peloponnesians, as well as the great war this friction augurs, made this alliance attractive to both. It is therefore this background of friction and antagonism, if not of outright war, that helped trigger the *stasis* of Corcyra. For the Corcyreans' alliance with Athens leads to the naval battle of Sybota, and it is during this battle that the victorious Corinthians capture over one thousand of their sailors.

Eight hundred of these were slaves, whom the Corinthians immediately sold, but two hundred and fifty were Corcyrean citizens, many of them oligarchs. These the Corinthians kept as prisoners in Corinth, hoping to use them eventually to win back the allegiance of their wayward colony. Indeed, the Corinthians do release them later, less on the security furnished by their *proxenoi* than on the condition, writes Thucydides, of their “engagement to bring over Corcyra to Corinth” (3.70). This influx of oligarchs to the Corcyrean body politic proves to be the final trigger of *stasis*. But this is just what Hippocratic nosology should lead us to expect. After all, this excess of the Few replaces what must have been, during their absence, an excess of the Many. Such an immediate oscillation of political power in a body politic, whose health requires a blending of the classes, not their separation and oscillation, must have been as unhealthy to it as would be a binge for a human body after long fast and abstinence. In a way, then, this influx of oligarchs resembles an unhealthy regimen. More precisely, it resembles an unhealthy regimen in the time when seasons – that is to say, political alliances – are changing.

5b. The Four Stages

From this *katastasis*, which includes the earlier account of Epidamnus and Sybota, as well as this immediate account of the influx, Thucydides begins to tell the story of Corcyra’s breakdown. While the story is not marked fastidiously by days, in the style of the *Epidemics*, neither was the story of the plague; and yet each mentioned numbered days. Here, as there, Thucydides’ rhetorical technique exploits other idioms, particularly the tragic idiom, as Parry argued; nevertheless, his narration preserves its Hippocratic structure. For after the *katastasis* we find the symptoms, or *eidê*, that reveal an imbalance of the elements (which are now classes instead of humors). Thucydides writes, “The

sufferings which *stasis* entailed upon the cities were many and terrible . . . and varying in their symptoms (*tois eidesi*), according to the variety of the particular cases.” (3.82.2)

While he does not use the same word for symptom, *eidōs*, in his plague narration, we do find a sentence very similar to the one just quoted: “Such then, if we pass over the varieties of the particular cases, which were many and peculiar, were the general features (*epi pan tēn idean*) of the distemper.” (2.51.1) In each case, it seems, Thucydides is describing one disease – *stasis* for cities, the plague for individuals – but also its many manifestations under different forms (*eidē*), with different symptoms (*sēmeia*), for different cases. Such a procedure is worthy of Hippocrates. The *Epidemics*, for instance, present many cases of the same disease, which varies each time according to the peculiarities of the patient. The Hippocratic texts may not use Thucydides’ *eidōs* so often as their own *sēmeion*, but their meaning is the same, as in the following sentence: “The only good sign (*sēmeion*), the most striking that occurred, which saved very many of those who were in the greatest danger, was when there was a change to strangury, into which abscessions took place.”¹¹⁶ Signs and symptoms can be good or bad, of course, but they are all clues to the observer who seeks to infer from them the course of a disease, whether medical or political.¹¹⁷

The first symptoms of the Corcyrean disease occur shortly after the influx of prisoners, the oligarchs partial to Corinth; in fact, Thucydides says that the *stasis* “began with the return of the prisoners” (3.70.1). To complicate matters, shortly after their return, two vessels arrive, one Athenian and one Corinthian; the climate therefore becomes favorable for unrest. In an assembly, the Corcyreans agree to remain allies of the Athenians for defense only, preserving their friendship nonetheless with the Corinthians and the other Peloponnesians. This attempt to find the right mixture, the balance of political elements, fails. No doubt angered by this continued alliance with Athens, the

¹¹⁶ *Epidemics I*, 10; examples abound throughout the Hippocratic corpus.

¹¹⁷ See Swain 1994, 316-7.

former prisoners act. They prosecute Peithias on charges of enslaving Corcyra to Athens. Significantly, Peithias is a leader of the Many, and a volunteer *proxenos* of the Athenians; the prisoners, remember, belong to the Few. We may call their accusations the first symptom of the *stasis*, but it is nothing serious – the trial proceeds peacefully and the prosecution fails. In the manner of Hippocratic nosology, then, we might call this peaceful resolution of unrest a perfect coction. That is to say, we might so call it if the political humors were to experience afterward a genuine *krasis*. In other words, we might so call it if the classes became truly blended.

Instead of *krasis* occurring, however, the coction proves imperfect. The political temperature rises, but the classes remain at odds. After all, the next event Thucydides reports is a counter-suit: Peithias now prosecutes his former accusers on a pretext – cutting stakes in a sacred precinct. His prosecution succeeds and the sentence is an exorbitant fine. We suspect misprision, as would have the prosecuted Few. Rather than effecting *krasis*, then, of which the political equivalent would be a reconciliation of the classes based on justice, this decision fortifies the Many and alienates the Few even further. Immediately they retreat to the temples as suppliants. When Peithias obtains the enforcement of the law, however, exhibiting the preponderance of the Many, the Few become desperate, take up daggers, burst into the assembly, and kill him along with sixty other leaders of the Many.

With these first assassinations, therefore, we have the first crisis of the Corcyrean *stasis*. For crises in diseases, remember, are the point at which they “increase, diminish, change into another disease, or end.”¹¹⁸ By dispatching the leaders of the Many – what is in effect their abscession – the Few have changed the balance of the classes. They have not restored them to balance, however, nor have they restored the city thereby to health. On the contrary, these assassinations merely provoke reprisals. Whereas before the Many

¹¹⁸ *Affections*, 8.

were preponderate, now it is the Few. This oscillation of power, this new imbalance of classes, marks the beginning of a new disease, with new symptoms, leading to a new coction, crisis, and abscession. And so on, recalling the multiple crises of the case histories in the *Epidemics*, until the city achieves complete recovery, which is peace, or, by contrast, political death, such as famine, perpetual obscurity, or even total destruction.

5c. Multiple Crises

In order to follow Corcyra on the downward path, and in order to see the Hippocratic structure repeated three more times, we need only follow Thucydides' account of its *stasis*. For after the Few assassinate the leaders of the Many, a Corinthian trireme arrives and the emboldened Few attack all of the Many, defeating them in battle (3.72). Fearing now for their own lives, the Many retreat to the acropolis, while the Few remain below in the agora. The classes thus become completely separated, just as a diseased patient of Hippocratic medicine might have phlegm collect in his lungs, while his blood races outward to collect in his inflamed limbs.¹¹⁹

This severe imbalance is further exacerbated by the enlistment of other, minor humors of the body politic: slaves, for example. Both major classes seek their help, upon promises of emancipation; the slaves choose to side with the Many. To compensate for this loss, the Few enlist eight hundred mercenaries. Strictly speaking, the mercenaries are not humors of Corcyra, since they are foreigners. And yet it is as if one humor of a diseased patient increases by the addition of another element through ingestion. Diseases can worsen, as we have seen, through bad regimens, like over-eating.

¹¹⁹ See, for instance, *Nature of Man*, 11 ff. The treatise enjoins bloodletting far from the place where the blood collects – “The habit should be cultivated of cutting as far as possible from the places where the pains are wont to occur and the blood to collect.” In the following sections of this treatise, Hippocrates recommends techniques for displacing painful collections of the other humors.

The next step along the downward path, the arson in the agora, suggests two analogies. Once the Many begin to gain the upper hand, the Few fear a rout. In order to protect their position in the agora, they set fire to the houses on the perimeter of their position. By doing so they save themselves, but only at the expense of the city, which risks total destruction should a wind feed the flames. No wind arises, but presumably much of the inner city is destroyed (3.74). In this way, the arson appears as an exacerbated symptom – an extreme inflammation, say, or a destruction of internal tissue.

It is also tempting, however, to read the arson more literally, as a fever. After all, it burns. And yet fevers – coction according to Hippocratic nosology – are supposed to achieve *krasis*, the salubrious mixing of humors that restores their balance. Instead of mixing the classes together, though, the flames here serve to keep them apart. *Krasis* is the desired result of all coction, to be sure, but only perfect coction achieves it. Imperfect coction, as we saw, produces “crude and uncocted evacuations, which change into bad abscessions.”¹²⁰ Accordingly, the mercenaries enlisted by the Few return to the mainland. This would therefore seem to be a crude evacuation; in other words, a bad abscession; the result of an imperfect coction.

As the disease worsens, the Athenian general Nicostratus arrives next as a sort of political physician (3.75). He brings with him twelve ships, carrying five hundred hoplites, and proposes a settlement to the factions on Corcyra: a trial of the ten ringleaders of the Few, who had already left the island, and a renewed alliance with Athens. Both parties agree and peace seems at hand. In this way, by means of a just trial acceptable to all, Nicostratus appears to have effected a perfect coction of the city, a restored balance of its humors, reconciliation of its classes – in short, political health.

However, when he prepares to leave, the Many ask him to leave behind five of his ships for security, and to take in exchange five of their own, manned, as it turns out, by a

¹²⁰ *Epidemics I*, 11, quoted earlier.

portion of the remaining Few. Nicostratus agrees. But these Few fear that they will be tried at Athens for attempting rebellion. As a result, once again they take refuge in a temple as suppliants. Thus, another separation of classes occurs. Indeed, when the rest of the Few recognize the animosity prevailing against them, they too seek refuge as suppliants. A second time, therefore, the city is divided in two. Moreover, Nicostratus and the Many fear a renewed insurrection of the Few. To prevent such an inflammation, they arrest all of the Few and install them as prisoners on a tiny island opposite the temple of Hera. As a physician, then, Nicostratus has failed to effect a cure; the result of his efforts is this partial exile, a partial abscession.

We have now seen two phases of the Corcyrean *stasis*, each following the trajectory prescribed by the Hippocratic theory of disease: imbalance and symptoms, coction and crisis, followed by an abscession and a new set of symptoms. In the first phase, the resulting abscession – which is to say the assassination of Peithias and the sixty leaders of the Many – provoked the new symptoms of a complete geographical separation of classes. In the second phase that resulted from these new symptoms, the partial abscession effected by Nicostratus, combined with a change in the *katastasis*, provokes in turn a third set of symptoms. To begin with, these new symptoms seem more favorable, like the temporary remission of a case of consumption (*phthisis*).¹²¹

Four or five days later, as Thucydides writes, a Peloponnesian fleet arrives. The looming naval battle presents new background conditions, a new climate so to speak, offering opportunities for a hasty blending of classes (3.76). Threatened with defeat in this battle, the Many first transfer the imprisoned Few back to the island temple, where they can be kept from joining the Corinthians. Furthermore, as defeat looms, they desperately invite some of these Few to embark with them in defense of the island (3.80).

¹²¹ *Epidemics III*, 13-15.

Now that they prepare to fight alongside one another in mutual defense, it would appear that the Many and the Few have reconciled after all.

However, this reconciliation proves as illusory as the desperate invitation proved unnecessary. The arrival of a second Athenian fleet puts the Peloponnesians to flight (3.80). The classes – blended only superficially, by a coction far from perfect – separate again. Assured now of their safety from foreign invasion and of their supremacy in this domestic struggle, the Many immediately proceed to attack the Few. This would appear to be the final crisis. First they assassinate those at hand, those who agreed to embark; next they persuade fifty of the suppliants to stand trial, where they are summarily convicted and executed. Those who remain in the temple, seeing the inevitability of their fate, kill themselves. As Thucydides writes, “Death thus raged in every shape”(3.81.5). If this conflict were the final crisis, then, these assassinations and executions would become the final abscession.

Surprisingly, however, they are not final. This third abscession does indeed eliminate all remnant of the Few on Corcyra, but five hundred oligarchic exiles remain on the mainland (3.85). Here, therefore, is a fourth separation and imbalance of classes. Once the Athenian fleet leaves Corcyra, and the background conditions change again, these exiles establish themselves as masters of the mainland, soon raiding the island itself and causing a severe famine. Here, therefore, is a fourth set of symptoms, the worst thus far. Eventually the exiled Few gain enough confidence to return to Corcyra itself. Burning their boats behind them, they make a base atop Mount Istone from which they plunder and harm those in the city. The abscessed Few, it would seem, re-enter the body politic like a boil that will not burst, dissolving once again into the body, returning its noxious humor to cause more imbalance and damage.

At this point Thucydides interrupts his narration of events on Corcyra. In fact, he resumes it only in the next book (4.2.3; 4.46-8) and thereby shows us how long this plunder and harm continued – eight years in total. This longsuffering recalls the case

histories of the *Epidemics* in which the illness lasts one hundred and twenty days, with multiple sets of symptoms, coctions, crises, and abscessions.¹²² For when the narration resumes, the Few on Mount Istone are still raiding the Many in the city. To end this, finally, an Athenian detachment, directed by Eurymedon, arrives to relieve the Many (4.46). Together they launch an attack upon the garrison on the mountain and succeed in defeating and capturing the raiders.

Like Nicostratus before him, therefore, Eurymedon attempts to bring health – that is to say peace – to Corcyra, by imprisoning the remaining Few on an adjacent island and promising them a trial before the Athenians. But this attempt at coction fails – in more or less the same way that Nicostratus failed earlier. Unsated by their victory, the Many seek not reconciliation with the Few but their total destruction. This they achieve by tricking them into breaking their promise with the Athenians that they will not try to escape from the island, on pain of their subjection to the whims of their countrymen. With this promise broken, then, Eurymedon releases them to the Many, precipitating a fourth and final crisis. The Many now kill the Few with the same abandon they exhibited in the third abscession. This slaughter therefore marks a fourth and final abscession. As Thucydides writes, “In this way the Corcyreans from the mountain were destroyed by the People” (4.48.5). It thus brings a decisive end to the Corcyrean *stasis*, if only because, as he ominously concludes his narration of it, “of one party there was practically nothing left.”

Corcyra itself survives. Twelve years later they join the Athenian expedition to capture Sicily. Their numbers and strength are not mentioned. In fact, we hear of them only because their *paean* resembles that of their Sicilian foes, so that in the confusion of nocturnal naval battle it puts fear into their allies, the Athenians. This trivial reference, combined with the absence of any Corcyrean involvement in the Peloponnesian War up

¹²² For example, *Epidemics III*, 9.

to this point, appears very peculiar when we recall that in 433 Corcyra boasted the second largest navy in Greece (1.33.2).

We can assume that their brutal *stasis*, this drawn-out disease of the body politic which destroyed an entire class, the Few, weakened Corcyra without entirely killing her. In this way, one of the greatest of Greek powers became just one more weak subject of the Athenian empire. In Thucydides' rhetorical hands, of course, the story has all the drama of a tragedy; nevertheless, as we have seen, it simultaneously exhibits all the structure of a Hippocratic disease. As with the plague, then, Thucydides has shown himself again both Tragedian and Hippocratic, both Artist and Scientist.

5d. Analysis

As Scientist, however, Thucydides' task is not finished with a simple narration. As Hippocratic, he must complement his narration with a general analysis. After all, Hippocrates complements his own case histories in the *Epidemics* with his thorough *katastaseis*. Here is an example:

Many were attacked by erysipelas all over the body when the exciting cause was a trivial accident or a small wound; especially when the patients were about sixty years old and the wound was in the head, however little the neglect might have been. Many even while undergoing treatment suffered from severe inflammations, and the erysipelas would quickly spread widely in all directions. Most of the patients experienced abscessions ending in suppurations. Flesh, sinews and bones fell away in large quantities. . . The course of the disease was the same to whatever part of the body it spread. Many lost the arm and the entire forearm. If the malady settled in the sides there was rotting either before or behind. [etc.]¹²³

¹²³ *Epidemics III*, 4.

Besides reminding us of the general tone Thucydides adopts in his narration of the plague, this should remind us of Thucydides' famous comments on the Corcyrean *stasis* (3.82-4). For there he lists the most common as well as the most unusual symptoms of this political disease, but only in a general way. Indeed, he shows how easily the most unusual symptoms became so common. For the moral corruption of *stasis* spreads quickly throughout the city, as quickly as erysipelas spreads throughout the body.

The most remarkable means of this infection is the perversion of language. As Thucydides famously writes, "they exchanged the customary value of words for deeds." (3.82.4) Swain has observed that these perversions of language are political symptoms of delirium, much as the Hippocratics record delirium among the somatic symptoms of their individual patients.¹²⁴ Whether or not this is political delirium, it should remind us of a similar perversion during the plague. For there, remember, Thucydides observed that "perseverance in what men called honor was popular with none, it was so uncertain whether they would be spared to attain the object; but it was settled that present enjoyment and all that contributed to it, was both honorable and useful." (2.53.3) The plague, we said earlier, had been calamitous for individual bodies and the result was a transvaluation of language; here in Corcyra we find the same effect, caused this time by a calamity, not for individual bodies, but instead for a body politic.

The catalogue of horrors in Corcyra continues. However, unlike his plague narration, which eschewed any speculation about its causes, Thucydides moves now beyond mere symptoms to probe the deepest reasons for this political disease. "The cause of all these evils," he writes, "was the lust for power arising from greed and ambition; and from these passions proceeded the violence of parties once engaged in contention." (3.82.8) Or again, "revenge would not have been set above religion, and gain above justice, had it not been for the fatal power of envy." (3.84.2) We have already seen the

¹²⁴ Swain 1994, 306.

double causation behind the Corcyrean *stasis*: the climate of war and ready alliances triggered a predisposition toward class conflict. Thucydides now describes in more detail the nature of this predisposition. He thus moves deeper, from politics down to psychology. At the deepest level, this predisposing cause turns out to be a constellation of greed, ambition, and envy.

This is not to say that Thucydides departed from his medical precedents. After all, Hippocrates also goes deeper into predisposing causes. From meteorology and external symptoms he sometimes moves down to anatomical speculation. In *The Sacred Disease*, for instance, his analysis probes the internal workings of the brain. “From the brain, and from the brain only,” he writes, “arise our pleasures, joys, laughter and jests, as well as our sorrows, pains, grief and tears.”¹²⁵ Once he has identified the brain as the locus of thinking, moreover, he next speculates that “madness comes from its moistness.” Excesses of phlegm and bile cause epilepsy, he argues, but more specifically it is their moistening of the brain that forms the deepest cause of epilepsy: “When the brain is abnormally moist, of necessity it moves, and when it moves, neither sight nor hearing are still, but we see or hear now one thing and now another, and the tongue speaks in accordance with the things seen and heard on any occasion.”¹²⁶ Both Hippocrates and Thucydides, then, probe deeper into the predispositions that cause the diseases they analyze: for the first, epilepsy; for the second, *stasis*.

This is the final parallel between Thucydides’ account of Corcyrean *stasis* and Hippocratic disease theory, a parallel of analysis to complement the parallel stages of narration we have already noticed. For just as with his plague narration, we have seen how Thucydides tells the story of the Corcyrean *stasis* according to the structure of Hippocratic disease theory. This narration begins, as we saw, with a *katastasis*; next, it proceeds to highlight four phases, much as we saw with the plague. There is no need here

¹²⁵ *The Sacred Disease*, 17.

¹²⁶ *The Sacred Disease*, 17.

to review each of these phases, since each followed the pattern prescribed by Hippocratic nosology: a set of symptoms, followed by an attempt at coction, a crisis, and an abscession.

The abscessions of the first three phases, from assassinations to exiles, did not restore health to the city – the classes remained unreconciled, separate and hostile. The fourth abscession, however, brought peace, if only by destroying one class altogether. While the correspondence was not always perfect, these minor shortcomings form no objection to our thesis, so long as we remember Percy’s synthetic reading. For as before with the plague, so too now with Corcyra: Thucydides tells a story whose rhetoric differs in some ways from its structure. Whether or not its rhetoric is tragic, as indeed it often seems to be, the structure of this story is nonetheless Hippocratic. In sum, Thucydides shows a body politic suffering disease in the same way that disease afflicts the body.

6. Conclusion

This study began by arguing that Thucydides shares seven general methods with Hippocrates: three of which were found in other fifth-century writers; four, however, remained unique to these two. After outlining a typical Hippocratic nosology, we also argued that Thucydides adopts the structure of this theory to shape not only his narration of the plague in Athens, but also his narration of the Corcyrean *stasis*. There seems to be ample ground, therefore, to assert that significant parts of his History correspond with the medical thought of his time. In Thucydides, we may add, there seems to be a strong analogy between the body and the body politic, inasmuch as the mode of investigation for diseases of the one can be applied to ‘diseases’ of the other.

But this analogy already existed long before in early medical thought. Alcmaeon, a physician of the sixth century, “is reported to have held that health lies in the *isonomia*

or equal rights of certain powers (*dynameis*) in the body,”¹²⁷ as we have already had occasion to mention. Lloyd maintains that the political connotations of Alcmaeon’s nosology persist into the Hippocratic writings.¹²⁸ Moreover, according to Jouanna, “the [political] metaphor crops up in Hippocratic writings, all the more readily as the vocabulary of force and war is regularly used to describe physiological and pathological processes.”¹²⁹

There is room, therefore, to conclude that medical thought of the fifth-century borrowed as much from political history as historiography would borrow from medicine.¹³⁰ Or again, more skeptically, it may be that their common thought-patterns emerged from a deeper source than either medicine or politics. Here we can only speculate about the substratum of their common culture. We cannot neglect the Greeks’ religious estimation for balance, to begin with, evidenced by the inscription over the temple at Delphi. In conclusion, however, can imagine a paradoxical marriage of this estimation with, on the one hand, their enduring appreciation of inevitable decline, witnessed by their tragedies, and, on the other, the nascent optimism of the fifth-century, testified most eloquently by Sophocles’ *Ode to Man*,¹³¹ but also by the practical gains of the Greek enlightenment, the most remarkable of which were the Hippocratic works themselves. If we wish, with Harvey, to trace back our own metaphor of the *body politic* to its source, we must go at least this far.

¹²⁷ Lloyd 1978, 30.

¹²⁸ Lloyd 1978, 29.

¹²⁹ Jouanna 1992, 331. Jouanna cites as evidence *Breaths* 8 and *Ancient Medicine* 16.

¹³⁰ The Marxist-feminist anthropologist Emily Martin, in her book *The Woman in the Body* (2nd edition, 1992, Boston), has argued persuasively that modern gynecological and obstetrical textbooks have been similarly influenced by the economics of their time to describe women’s bodies according to prevailing economic models. In this way, for instance, textbooks of the industrial era described menstruation and menopause according to the structure of a factory, whereas textbooks of the information era have preferred to describe it according to the structure of a computer program (Ch. 3, “Medical Metaphors of Women’s Bodies: Menstruation and Menopause,” 27-53).

¹³¹ *Antigone*, 332ff.

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