

The Role of Spirituality in Hippocratic Medicine

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To anyone studying the role of spirituality in Western medicine, the first few lines of the Hippocratic Oath should be of interest: “I swear by Apollo the Physician and Asclepius and Hygieia and Panacea and all the gods, and goddesses, making them my witnesses, that I will fulfill according to my ability and judgment this oath and this covenant.”¹ The Oath continues to be uniquely respected among practitioners of Western medicine, and the emphasis that the Oath seems to place on spirituality from its onset stimulates inquiry into the nature of spirituality in Hippocratic medicine.

The original Oath, as we have it preserved today in Greek, was almost undoubtedly not written by Hippocrates, but the work is traditionally included in the *Corpus Hippocratum*, a collection of medical writings attributed to Hippocrates of Cos (469–399 BCE), written between the fifth and fourth century, BCE.² Celsus, writing nearly four hundred years later, said that Hippocrates was the first to separate medicine from philosophy.³

The *Corpus Hippocratum* illustrates the unique transformation of the Western medical/healing tradition from a system that relied upon external and often divine influences as both the cause and remedy of disease, to a system where causes of diseases were less often divine and more often controllable by the sufferer. For example, dietetics was a central premise of Hippocratic medicine, where the substances we eat may cause, prevent, or treat disease. This concept excluded direct influence of any of the various gods, and placed the onus of health back on the patient and physician.

This “cause-and-effect” observational system may very well have found its origin in Greek thought in Homer’s *The Iliad*, a body of work with which all successors in Western medicine and philosophy would have been intimately familiar. In *The Iliad*, for example, significant time and interest are dedicated to detailing the various injuries and wounds sustained by the epoch’s characters.⁴ These stories must have certainly stirred the Greek mind to understand in a cause-and-effect paradigm that, for example, death eventually followed coma, which followed fever, which followed a purulent wound, which started with a battle injury caused by another mortal Greek. At the same time, the luxury of attributing the battle injury to the will of the gods who controlled these Homeric battles was preserved, at least initially, in the Greek thought process.⁵ There gradually emerged in Greek thought a dichotomy in which some actions, mostly those well understood by the philosophers and scientists of the time, were considered wholly physical phenomena ripe for human study and exploration, whereas other phenomena were considered wholly divine. Socrates held that both classes of phenomena existed and espoused essentially two methods of investigation—one scientific and one divine. Interestingly, Socrates considered physics and astronomy as belonging to the divine class, impenetrable to human study,⁶ and Plato thought the fields could be studied, to an extent, although the sun and stars should be held as divine and the investigator ran the risk of blasphemy with such investigations.⁷

Nevertheless, at the same point in Greek history, Hippocrates clearly denied Socrates’ dichotomy. Hippocratic medicine was quicker to embrace a physical model of biomedicine, although it did not abandon the divine. Again, different parts of the *Corpus Hippocratum* are contradictory on this point, likely the result of mixed authorship.

Because Galen saw such contradiction in Hippocrates’ statement that all diseases were divine, he argued that he meant that they were all related to the state of the atmosphere.⁸ This particular hypothesis seems unlikely, but it does demonstrate that even the ancients thought that Hippocrates had abandoned ideas that were increasingly believed to be superstitious in favor of biomedical concepts.

Rather, it appears that the Hippocratic author was espousing a concept put forward more famously by Anaxagoras, that of divine agency. In this idea, the gods were connected to physical phenomena from their instigation, but were not necessarily involved in the day-to-day execution of physical

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phenomena; these physical phenomena, then, must be governed by a set of physical, ordained rules, which could be studied and understood. Anaxagoras applied this to the study of astronomy and meteorology and was accordingly tried at Athens and saved his life only by incurring a voluntary exile.⁶ His trial and exile show that there was a strong societal pressure to preserve affirmative statements regarding the gods as we find in the first line of the Oath. Hippocrates's version of this divine agency was that the various divine forces controlled acts of generation, and when something was generated, it contained a divine essence; all disease, then, regardless of the cause, is a disruption of this divine essence. Supplication to the appropriate deity was useless to correct the diseased state because the god or goddess was now withdrawn from the activity.

The trial and public outcry that followed Anaxagoras's proclamations show clearly that the average Greek at that time found his or her abandonment of the divine untenable. Yet, there had been a considerable change since Homeric times, when the average Greek believed that a whole pantheon of gods and immortals walked among the common mortals. By the time of Socrates, this concept was waning. The Greek pantheon developed through a series of wars and expansions. The roots of Greek society were, in a way, monotheistic, in which Zeus was a singular, all-powerful, and personal god. Through wars and conquest, a variety of cultural and theological influences can be found in the Greek written tradition. The Greek myths still show Zeus in a supreme position, but with a pantheon of gods, goddesses, demigods, and titular gods who were preserved in Greek lore initially, it would seem, for political reasons. Different city-states, villages, tribes, and so forth may emphasize or de-emphasize members of this pantheon depending on their original cultural identity. Greek religion had become one of syncretism, that is, an amalgamation of different religions.

This syncretism led to an environment in which the initiate in the Hippocratic guild was required to swear an oath to a list of gods in this pantheon—although the whole of the *Corpus Hippocraticum* concludes that disease and health are governed by a series of constant physical laws and principles. For many who swore this oath, it seems reasonable that they viewed this invocation either as necessary lip service or a cultural relic, whereas others may have identified with one or more of those deities named, depending on their cultural heritage.

This first line of the Oath is syncretic, including gods and goddesses representing a wide array of cultural origins. It served to ingratiate the member of the Hippocratic medical guild to dozens of local gods and goddesses representing numerous religious heritages. Spirituality in the Oath focused on recognizing the importance of some divinity to the patient, and perhaps to the physician, and respecting this relationship, rather than necessarily claiming any direct role the gods may have in causing or curing the ailment, or even the importance of any particular god or goddess.

Three fundamental questions serve to highlight this understanding. First, did the average Greek in the second or third century BCE believe that his or her health was regulated by any of the various relevant deities? Second, did the average Hippocratic physician agree with this? Third, what was the relationship between these two possibly divergent opinions in the professional setting?

The first question is easily answered. The average Greek did indeed believe that his or her health and well-being were governed by the will of the deities. To which god or goddesses he or she attributed this power relied largely on geography and his or her station in life. The second question is not as clear. On the whole, the Hippocratic writings discount the role of the gods and goddesses in favor of a biomedical point of view in which diseases are open to study, intervention, and prevention. This point of view did not entirely discount the pantheon's importance; it only reduced the gods and goddess to the role of divine agency. In addition, the sometimes contradictory statements of the *Corpus Hippocraticum* likely represent a wide range of opinions among Hippocratic physicians, in which some had entirely abandoned the gods—even the concept of divine agency—whereas others still espoused most of the common superstitions.

Before the time of Hippocrates, medicine was looked upon incredulously. Medicine was not a science or an art, but it tended to look for supernatural or divine reasons for illness. The Hippocratic school of physicians sought to apply scientific principles of investigation to the diagnosis and treatment of ailments and to replace the previous superstitions. As the Hippocratic school of medicine matured, it replaced the previous healing-temple system with biomedicine. The Oath and the portrayal of spirituality in the writings of the *Corpus Hippocraticum* reflect this period of transition, where cause-and-effect science was embraced without abandoning the importance the various gods and goddesses enjoyed among patients and practitioners.

The Hippocratic writings present a historical departure in the understanding of medicine, which we now understand as biomedicine. Hippocrates sought to understand the causation of disease in naturalistic terms, but at the same time, he was the product of a culture and lived in a culture that understood disease as controlled by external—even divine—forces. Many of his contemporaries (and ours) understood disease as a result of offending one or more of the gods, or living improperly. As such, his concerns for understanding ways of explaining and treating diseases, while paying respect to the gods and respecting patients' beliefs, remain contemporary and relevant even today. The Hippocratic tradition, as we understand it today, is heir to both a scientific/naturalistic approach and a spiritual heritage. In the context of cancer care, physicians should fall back on this historical tradition to recognize the importance of ultimate and transcendent questions in their patients' lives—especially at times of existential crisis when medicine can't answer the “why” questions.

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