

# Mental Disorders in the Classical World

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DISTURBING CONNECTIONS:  
SYMPATHETIC AFFECTIONS, MENTAL DISORDER,  
AND THE ELUSIVE SOUL IN GALEN

Brooke Holmes\*

Galen's *On Prognosis* reads less like a medical treatise than like a collection of detective stories, more Holmesean than Hippocratican.<sup>1</sup> In one memorable case, Galen, self-consciously following in the footsteps of his Hellenistic predecessor Erasistratus, diagnoses the lovesickness of a woman infatuated with the dancer Pylades. The star performer in the diagnosis, besides Galen himself, is the pulse. That is not to say there is an 'erotically motivated pulse', as some people think. Rather, Galen emphasizes, the pulse loses its natural rhythms whenever the mind is disturbed, an instance of the more general principle that 'the body tends to be affected by mental conditions'.<sup>2</sup> The trick, accordingly, is to figure out what is disturbing the mind, which Galen succeeds in doing by observing fluctuations in the woman's pulse when Pylades' name comes up.

The principle that the body is affected by the mind or, more commonly, the soul had become common by the time Galen was writing in the second century CE. It was often taken as the flipside of another principle—namely, that the mind or the soul is affected by the body. From at least the Hellenistic period and possibly earlier, both tenets fit into the overarching framework of what was called sympathy (*sympatheia*). Galen himself firmly held that the body and, especially, its troubles have an impact on psychic and mental functions, going so far as to write a treatise at the end of his life entitled *That the Faculties of the Soul Follow the Mixtures of the Body*.<sup>3</sup> He also made

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<sup>1</sup> As Barton 1994, 140–143 observes.

<sup>2</sup> Galen, *Praen.* 6 (XIV 634–635 K = 104, 12–23 Nutton).

<sup>3</sup> I adopt Jacques Jouanna's suggestion (2009, 192) for the translation of the title of the treatise, but I retain the standard abbreviation (*QAM*) for convenience and consistency.

extensive use of sympathy as a pathological concept in his writings, drawing on earlier usage within the learned medical tradition.<sup>4</sup> But what Galen does not do is privilege, at least explicitly, the relationship between the mind and the body as a site of sympathy. Moreover, he is downright wary of implicating the *psychē* in the sympathetic networks that he maps onto a well-defined anatomical landscape. In this paper, I try to account for Galen's bipolar relationship to sympathy in the realm of mental disturbance by asking the following questions: What conceptual and explanatory work does sympathy do for Galen in this realm? Why is he so reluctant to apply it to the soul?

Taking up these inquiries has the advantage of yielding an unfamiliar angle on Galen's psychology and, more specifically, his psychopathology. These topics have attracted a good deal of attention in recent years.<sup>5</sup> Yet analyses of Galen's views on the soul and its relationship to the body have been mostly confined to the obviously psychological works, such as his massive, mid-career opus the *Doctrines of Plato and Hippocrates* and the aforementioned *That the Faculties of the Soul Follow the Mixtures of the Body*. The concept of sympathy brings us into the territory of other texts, most notably *On the Affected Parts*, where the lines between the brain, the rest of the body, and the soul intersect and fail to intersect in ways that shed new light on Galen's ideas about how the body disrupts mental functions.

The inquiry undertaken here also has repercussions for the larger question of the relationship between the mind or soul and the body in antiquity. One of the aspects of sympathy that makes it so intriguing is that the concept posits an affective connection without spelling out how that connection occurs or what ground joins the partners. The open-ended nature of sympathy emerges as particularly significant when the partners are the body and the soul or the mind, for the reason that it can be difficult to grasp the nature of the space where these entities meet (think of the enigmatic pineal gland in the writings of Descartes). In some cases, the language of sympathy is no more than an acknowledgment that two entities, say the body and the

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On 'mental' faculties—primarily reasoning, memory, and judgment—see, e.g., *Loc. Aff.* 2.10 (VIII 126 K), 3.9 (VIII 174–175 K); *QAM* 2 (IV 770–771 K = 34.16–35.3 Müller). The soul is also responsible for sensation and volitional movement.

<sup>4</sup> The standard study of sympathy in Galen remains Siegel 1968, 360–382, who is primarily interested in reading Galen in light of contemporary medical knowledge, especially neurology. See also the discussion of sympathy and continuities in the body at De Lacy 1979, 361–363.

<sup>5</sup> On Galen's psychology and psychopathology, see García-Ballester 1988; Pigeaud 1988b (with discussion of *On the Affected Parts*); Hankinson 1991a; von Staden 2000, 106–116; Tieleman 2003b; Hankinson 2006; Donini 2008; Jouanna 2009; Gill 2010a.

soul, are affected in tandem, as in the experience of fear. But such language may also set the stage for an exploration of the routes by which affections are trafficked between the body and the soul.

The name of Descartes raises the question of dualism and indeed, the difficulty of understanding how the body and the soul (or the mind) interact presupposes that these are different—and perhaps quite radically different—things to begin with. If we look at our earliest Greek medical texts, we find a proto-sympathetic model of the body as an interior space with communicating parts and migrating affections with little sense of a difference between the *sōma* and the *psychē*, when these terms even appear. The Hippocratic authors largely take it for granted that the functions ascribed by later writers to the *psychē* or the ‘hegemonic principle’ are damaged alongside bodily functions. By the fourth century BCE, however, the concept of the unified organism found in the Hippocratic writings is being strained by the sharpening contrast between the *sōma* and the *psychē*. It is Plato, of course, who seems to have developed the opposition most extensively, while leaving open the quandary of the *koinōnia*, ‘common ground’, between them as Aristotle complains a generation later.<sup>6</sup> Aristotle himself, far from solving the quandary definitively, bequeaths an even more complex version of it to subsequent philosophers. He transmits, too, a nascent concept of sympathy as one strategy for negotiating the relationship of the *sōma* and the *psychē*. That concept became part of the Peripatetic philosophical arsenal, acquiring even greater importance in the Stoics and the Epicureans

The post-Hippocratic landscape of psychophysical models is defined, too, by debates about where the hegemonic faculties are located in the body (the problem Descartes was trying to solve with the pineal gland).<sup>7</sup> Aristotle’s decision to locate these faculties in the heart is enthusiastically supported by his Peripatetic followers and the Stoics, even as systematic human dissection (and possibly vivisection) in Ptolemaic Alexandria gathers evidence in favor of the brain. The debate is still very much alive centuries later

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<sup>6</sup> Aristotle, *De An.* 407b13–26. Dillon 2009 analyzes Plato’s reticence about the nature of the *koinōnia* of soul and body.

<sup>7</sup> The question of location is raised in some fifth-century treatises, such as *On the Sacred Disease*, whose author forcefully defends an encephalocentric model (although the source of hegemonic power is the air, not the brain itself): see *Morb. Sacr.* 14–17 (VI 386–394 Littré = 25,12–31,15 Jouanna), with Lo Presti 2008. But the lines of the later debate are established decisively in the fourth century BCE, with Aristotle’s endorsement of the heart. On the location of cognitive processes in fifth- and fourth-century BCE medical writing and in Aristotle, see van der Eijk 2005a, 206–237.

when Galen enters the fray. Building on the models of articulated networks (arterial, venous, nervous) yielded by Hellenistic anatomical research, he aggressively marshals arguments for the brain as the home of the hegemonic principle by demonstrating its position as the major node in the nervous system.

It is precisely because Galen enmeshes the brain so deeply in the neural and also the vascular networks crisscrossing the body that it is especially vulnerable to affections arising in other parts of the body. Galen, like physicians before him, classified these affections as sympathetic. By privileging the brain as a locus of such affections, Galen, I will argue, generates a new model of mind-body sympathy. More specifically—and significantly for this volume—he tilts that model toward pathology by focusing on how the mental faculties become sympathetically implicated in the disturbances of other parts of the body and especially, as we will see, the gut. One consequence of the shift is that the physician becomes an important player in securing cognitive health.

And yet, as I observed above, for all that Galen embeds the ‘ruling part’ or mind in the body via the brain, he is conspicuously silent on the sympathetic relationship of the *soul* to the body. His tacit rejection of sympathy in this sense cannot be chalked up to a lack of interest in the major philosophical accounts of psychology. Galen, after all, saw himself as straddling medicine and philosophy, the traditions represented for him by his heroes Hippocrates and Plato. Rather, in Galen’s treatment of sympathy we can glimpse divergences and tensions between medicine and philosophy, and especially the difficulties in conceptualizing the human that are raised by dissection. For it is as if the more precise Galen is about the lines joining the brain to the rest of the body, the more elusive the soul, that marker of the truly human self, becomes for him. At the same time, the networks of veins, arteries, and nerves that he uncovers suggest a different tripartite psychology than the one he claims to have inherited from Plato. Galen’s engagement with sympathy may give us a glimpse, then, of both the promise and the limits of the anatomical body as a map of the unified human being in the second century CE.

I begin by briefly discussing some Hippocratic passages where the concept of the body as a unity with communication between parts—the language of sympathy does not appear in classical-era medical texts—is broached. In the next section, I sketch the development of the idea of ‘suffering together’ as part of a larger category of states or processes or events ‘common to body and soul’ in Plato, Aristotle, and the Hellenistic philosophical schools. In the final section, I examine how Galen uses the concept of



sympathy against this medical and philosophical backdrop, concentrating on the susceptibility of the brain to affections originating in the gut. I close by reconsidering Galen's lifelong resistance to locating the soul within the coordinates of the sympathetically webbed body.

*The Internally Communicating Body in Early Greek Medicine*

Heraclitus famously said that in the circumference of the circle, the beginning and the end are common (Diels-Kranz 22 B103). The fascination with the circle has a long afterlife in philosophy. It found its way into medicine as well. In the opening lines of the Hippocratic treatise *On Places in a Human Being*, the author writes that:<sup>8</sup>

ἐμοὶ δοκεῖ ἀρχὴ μὲν οὖν οὐδεμία εἶναι τοῦ σώματος, ἀλλὰ πάντα ὁμοίως ἀρχὴ καὶ πάντα τελευτή· κύκλου γὰρ γραφέντος ἀρχὴ οὐχ εὐρέθη.  
(*Loc. 1, VI 276 Littré = 36,1–3 Craik*)

It seems to me that there is no beginning point of the body, but every part is beginning and end alike, as the beginning point of the figure of a circle is not found.

The maxim lies behind two significant axioms of the author's theory of diseases. First, each part of the body, upon falling ill, produces disease in another part (e.g., the cavity in the head, the head in the flesh and the cavity).<sup>9</sup> The second is more opaque:

τὸ δὲ σῶμα αὐτὸ ἐωυτῷ τωτόν ἐστι καὶ ἐκ τῶν αὐτῶν σύγκειται, ὁμοίως δὲ οὐκ ἐχόντων, καὶ τὰ μικρὰ αὐτοῦ καὶ τὰ μεγάλα καὶ τὰ κάτω καὶ τὰ ἄνω· καὶ εἴ τις βούλεται τοῦ σώματος ἀπολαβὼν μέρος κακῶς ποιεῖν τὸ μικρότατον, πᾶν τὸ σῶμα αἰσθήσεται τὴν πείσιν, ὅποιή ἂν τις ἦ, διὰ τὸδε ὅτι τοῦ σώματος τὸ μικρότατον πάντα ἔχει, ὅσα περ καὶ τὸ μέγιστον· τοῦτο δ' ὅποιον ἂν τι πάθῃ, τὸ μικρότατον ἐπαναφέρει πρὸς τὴν ὁμοεθνήν ἕκαστον πρὸς τὴν ἐωυτοῦ, ἣν τε κακόν, ἣν τε ἀγαθόν ἦ· καὶ διὰ ταῦτα καὶ ἀλγεί καὶ ἡδέεται ὑπὸ ἕθνεος τοῦ μικροτάτου τὸ σῶμα, ὅτι ἐν τῷ μικροτάτῳ πάντ' ἐνὶ τὰ μέρεα, καὶ ταῦτα ἐπαναφέρουσιν ἐς τὰ σφέρον αὐτῶν ἕκαστα, καὶ ἐξαγγέλλουσι πάντα. (Loc. 1, VI 278 Littré = 36,26–38,3 Craik)

The body is itself identical to itself and composed of the same things, although not in uniform disposition, both its small parts and its large parts, those below and those above. And if someone should take the smallest part of the body

<sup>8</sup> See also *Nat. Oss.* 11 (IX 182 Littré = 149,14–18 Duminil); *Vict.* 1 19 (VI 492–494 Littré = 138,28–29 Joly and Byl), where the circle is understood literally as a circuit in the body. On the use of the passages to support the (now-discredited) argument that the early medical writers intuited the circulation of the blood, see C.R.S. Harris 1973, 48–49.

<sup>9</sup> *Loc. 1* (VI 276 Littré = 36,9–15 Craik).

and cause it harm, the whole body will feel the damage, of whatever sort it is, for the reason that the smallest part of the body has all the things that the greatest part has. Whatever the smallest part experiences, it passes it on to its related part, each to that which is related to it, whether it is something good or bad. The body, on account of these things, feels pain and pleasure from the smallest constituent, because in the smallest part all the parts are present, and these communicate with the parts that are their own and inform them of everything.

The figure of a part communicating its pain to the whole will become standard for representing a unified and internally connected cosmos in later philosophy, especially in the Stoics.<sup>10</sup> If the work the figure performs here is more limited, it nevertheless powerfully confirms the author's commitment to the idea that the body is an integrated whole, rather than an agglomeration of parts.

Both these 'proto-sympathetic' concepts assume that affections migrate beyond the point of origin. Yet they offer different perspectives on the relationship between the affected part and the larger structure. The first explains an affection that arises in one part and is transported to another by stuffs—usually fluids—along the generic 'vessels' (*phlebes, phlebia, teucha*) that connect different parts and flow into one another.<sup>11</sup> Fluids are trafficked through these vessels according to rules of attraction (moving towards the dry part, being drawn downwards naturally).<sup>12</sup> The two affected parts, then, are materially conjoined: permanently by a vessel or a network of vessels; contingently by the transmission of the *materia peccans*. The idea that the same vessels that allow life-giving fluid and air to circulate also enable the movement of noxious stuffs is a fundamental tenet of humoral

<sup>10</sup> See Sextus Empiricus, *Math.* 9.80 (*SVF* 2.1013): εἴ γε δακτύλου τεμνομένου τὸ ὅλον συνδιαιτίζεται σῶμα. ἡνωμένον τοῖνον ἐστὶ σῶμα καὶ ὁ κόσμος (If the finger is cut, the whole body suffers with it. The cosmos, too, then, is a unified body). On the sympathetic cosmos, see below, n. 46. See also Alexander, *Mantissa* §3 (117,10–22 Bruns), responding to the Stoics.

<sup>11</sup> *Loc.* 3 (VI 282 Littré = 40,30–31 Craik). For the author's understanding of the vascular system, see Duminil 1983, 79–82. See also *Artic.* 45 (III 556 Littré = 107,10–108,5 Kühlewein) on 'vascular' connectivity. On the movement of moisture through the principle by which the body communicates with itself (τὸ σῶμα κοινωνέον αὐτὸ ἑωυτῷ), see *Loc.* 9 (VI 292 Littré = 48,13–14 Craik). It is worth noting, too, that the verb *koineō* is often used with the sense of 'connecting' parts of the body in the surgical treatises: see *Artic.* 13 (IV 118 Littré = 134,8 Kühlewein), 45 (IV 190 Littré = 172,3 Kühlewein), 86 (IV 324 Littré = 243,8 Kühlewein); *Fract.* 9 (III 450 Littré = 62,4 Kühlewein), 10 (III 450 Littré = 62,15 Kühlewein), 11 (III 452 Littré 3.452 = 63,15 Kühlewein).

<sup>12</sup> On the (usually pathological) movement of fluids through the body in various Hippocratic texts, see Gundert 1992, 458–462.

pathology and probably explains the importance of the vessels themselves in Hippocratic concepts of the body.<sup>13</sup>

The second principle puts the migration of an affection in terms of a principle of 'relatedness' (*homoethniē*) that joins the 'smallest parts' of the body to one another. The context is not disease, but rather pleasure and pain, that is, affections thought to be experienced by the body as a whole, rather than in one or more of its parts. The parts in question, moreover, are not the larger structures of the body, such as the head or the cavity, but presumably something like its basic building blocks.<sup>14</sup> These smallest parts participate in a community (*ethnos*) where each 'announces' pain and pleasure to the others.

The idea that the parts of the body form an *ethnos*—a word used of a group of people living together, often, in the medical writers, under the same climactic and environmental conditions—is not found elsewhere in the classical-era Hippocratic writings.<sup>15</sup> The term *homoethniē* does appear once in the gynecological treatises, where a uterine affection results in the swelling of the breasts according to their 'relatedness'.<sup>16</sup> The bond between the womb and the breasts, however, takes us back to the relationship between parts at the macro-level of the body instead of an integrated stratum

<sup>13</sup> Duminil 1983, 128–131 argues that as the medico-philosophical understanding of the vascular system improved in the later fifth and fourth centuries, writers were more constrained in imagining the circulation of stuffs within the body. Duminil's account of the development of vascular knowledge in the Corpus seems a bit too neat, but her insight that anatomy can shape an understanding of sympathetic affections is borne out in Galen: see, e.g., *Loc. Aff.* 1.6 (VIII 57, VIII 60–63 K), 3.14 (VIII 208 K), 4.7 (VIII 257 K); *PHP* 8.1.3–4 (V 649–650 K = 480,16–24 De Lacy).

<sup>14</sup> Vegetti 1965, 292, in keeping with his view that the treatise was written by a member of Anaxagoras's circle, sees here the influence of Anaxagorean ideas of mixture (esp. Diels-Kranz 59 B6).

<sup>15</sup> For *ethnos* as a group of people in the Hippocratic Corpus, see *Aer.* 12 (II 52 Littré = 219,12 Jouanna), 13 (II 56 Littré = 222,11 Jouanna), 17 (II 66 Littré = 230,6 Jouanna); *Vict.* II 37 (VI 528 Littré = 158,5 Joly and Byl). At *Flat.* 6 (VI 98 Littré = 110,4 Jouanna), it refers to 'species' of living beings. For the *homo-* prefix, see *Nat. Hom.* 3 (VI 38 Littré = 170,10 Jouanna): *homophulos*; *Vict.* I 6 (VI 480 Littré = 130,8 Joly and Byl): *homotropos*.

<sup>16</sup> *Mul.* II 174 (VIII 354 Littré). See also *Epid.* II 1.6 (V 76 Littré) on the 'association' (*koinōniē*) between the chest, breasts, genitals, and voice. On proto-sympathetic affections, see also *Artic.* 41 (IV 180 Littré = 165,14 Kühlewein), 49 (IV 216 Littré = 184,13 Kühlewein), with *koinōneō*; *Glan.* 2 (VIII 536 Littré = 66,8–9 Craik), with *symponeō*; *Prorrh.* II 38 (IX 68 Littré = 284 Potter), with *epikoinōneō*. At *Epid.* VI 3.24 (V 304 Littré = 76,4–5 Manetti-Roselli) and *Hum.* 20 (V 500 Littré), we find references to *hai koinōniai* with the sense of sympathetic affections. For co-affection in Diocles of Carystus, writing in the mid fourth century BCE, see fr. 72 (van der Eijk), where the heart changes its condition (συνδιατιθεμένης και τῆς καρδίας) during an inflammation of the diaphragm—that is, phrenitis; see also fr. 80 (van der Eijk).

at the micro-level. For a self-conscious concept of the integrated whole, we are better off looking to the treatise *On Regimen*, whose first chapters are a veritable paean to the unified and well-structured organism.<sup>17</sup>

The opening discussion is unusual, first, for its degree of interest in the cosmological dimension of medicine and includes a developed account of the mirroring of macrocosm and microcosm, each a blend of fire and water and structurally homologous to the other.<sup>18</sup> What also makes *On Regimen* distinctive is its developed account of human nature in terms of *sōma* and *psychē*.<sup>19</sup> It is worth stressing, however, that the author's approach is not dualistic: the body and the soul enjoy a strongly symbiotic relationship, underscoring a principle of unity that is stressed at the macrocosmic level as well.<sup>20</sup> In particular, the *psychē*, despite being endowed with its own identity, is thought to execute its functions (e.g., sensory, cognitive faculties) most effectively when the blend of fire and water in the body is optimal, free of impurities, and otherwise undisturbed, a state that can be adjusted through proper diet and exercise.<sup>21</sup>

Here, then, we have a psychophysical model that represents soul and body in terms of a unity affected as a whole without sacrificing the sense that soul and body are different domains. The language of sympathy, however, here as elsewhere in the classical-era Hippocratic texts, is not used. Nor is the author much concerned with how the body and the soul share affections: it is enough that both are composed of fire and water. In this respect, the treatise is a good example of the unproblematic holism of most of the Hippocratic texts, despite its apparent dualism.

<sup>17</sup> See esp. *Vict.* I 6 (VI 478–480 Littré = 128,24–130,17 Joly and Byl), 10 (VI 484 Littré = 134,5–6 Joly and Byl). See also *Vict.* I 8 (VI 482 Littré = 132,8–10 Joly and Byl) on *symphōniē*.

<sup>18</sup> On microcosm and macrocosm in the treatise, see esp. Jouanna 1998; in the Hippocratic Corpus more generally, see Magdelaine 1997; Le Blay 2005.

<sup>19</sup> The Hippocratic writers do not speak of the *psychē* very often, and they oppose it to the *sōma* only rarely: see Holmes 2010b, 183, with n. 142.

<sup>20</sup> Cambiano 1980 and Jouanna 1998 rightly reject earlier speculation about the author's Orphic-Pythagorean affiliations to establish the thoroughgoing materialism of his theory of the *psychē*.

<sup>21</sup> For the soul's dependence on the condition of the body, see, e.g., *Vict.* I 35 (VI 518 Littré = 154,20–21 Joly and Byl): ἦν γὰρ ὑγιερῶς ἔχῃ τὸ σῶμα καὶ μὴ ὑπ' ἄλλου τινὸς συνταράσσεται, τῆς ψυχῆς φρόνιμος [ἡ] σύγκρησις (For if the body is in a healthy condition and is not disturbed by anything, the blend of the soul is intelligent). Yet the condition of the soul does not rely solely on the body, as the author makes clear at *Vict.* I 36 (VI 522–524 Littré = 156,19–32 Joly and Byl), stressing those problems (such as the nature of the 'circuit') that regimen cannot correct. The body depends on the soul, too, to monitor its care, primarily through dreams that communicate incipient diseases, as we see in Book IV.

The idea that the parts of a human being may be neatly split into the body, on the one hand, and the mind (*nous, noos*) or the *psychē*, on the other, was gaining ground in the later fifth century BCE. So, too, was the idea that functions framed as mental or psychic might be impaired by disturbances in the body. By the end of the fifth century, Xenophon's Socrates can ask a student dodging physical fitness training, 'Who doesn't know that many err in the act of thinking because the body is not in good health?'<sup>22</sup> It is not a coincidence that Socrates shows up in this context. For the burgeoning field of philosophical ethics is enthusiastically tackling soul-body relations in this period, including the question of how the soul shares *its* affections with the body.<sup>23</sup> I turn now to the growth of sympathy as a strategy for negotiating the relationship of the *psychē* and the *sōma* in classical and Hellenistic philosophy before considering the philosophical and medical legacies of sympathy in Galen.

### *Sympathetic Bodies and Souls*

The idea of 'suffering together' is a capacious one: as I have already said, it leaves open the nature of the ground shared by the affected parts and the nexus between them. In the philosophical tradition, sympathy can be situated within an even larger, more nebulous class of states, functions, processes, and experiences represented as 'common to body and soul'.<sup>24</sup> The concept of 'common to body and soul' may have appeared for the first time in Plato's *Philebus*, where Socrates describes *aisthēsis* (henceforth translated as 'sensation') as a movement—or, more specifically, a 'shock'—that is not simply 'common' to body and soul but also 'particular to each' (σεισμὸν ... ἴδιόν τε καὶ κοινὸν ἑκατέρω, *Phlb.* 33d5–6).<sup>25</sup> The movement begins in the body

<sup>22</sup> ἐν τῷ διανοεῖσθαι, τίς οὐκ οἶδεν, ὅτι καὶ ἐν τούτῳ πολλοὶ μέγιστα σφάλλονται δια τὸ μὴ ὑγιαίνειν τὸ σῶμα; (Xenophon, *Mem.* 3.12.6); see also Herodotus 3.33; [Hippocrates] *Ep.* 23 (IX 394 Littré = 102,9 Smith); Plato, *Phlb.* 66d3–7.

<sup>23</sup> The *psychē* is already seen as causing problems for the *sōma* in the later fifth century, most clearly at Democritus (Diels-Kranz 68) B159, where the *sōma* takes the *psychē* to court for the abuse inflicted on it through the soul's 'love of pleasure'. See Holmes 2010b, 202–206.

<sup>24</sup> For recent essays on the ancient concept of 'common to body and soul', see R. King 2006.

<sup>25</sup> The language of 'shock' is not insignificant. Socrates presents the ideal state in the *Philebus* as one of no disturbance at all (e.g., 33a8–b1). Given that this is impossible for human beings, the next best option is minimal disturbance, still understood as vaguely pathological. On the 'medicalization' of pains and pleasures in the *Philebus*, see D. Frede 1992, 440, 453–454, 456.

(and can end there if it is 'extinguished' before reaching the soul).<sup>26</sup> But it is properly sensation only when we find 'the soul and the body coming together in one common affection and being moved in common' (τὸ δ' ἐν ἐνὶ πάθει τὴν ψυχὴν καὶ τὸ σῶμα κοινῇ γιγνόμενον κοινῇ καὶ κινεῖσθαι, 34a3–4). The experience of sensation is an event, then, that preserves the boundary between the body and the soul while allowing for communication between them. It creates shared suffering but each affection is nevertheless realized differently in each domain.

The experience of sensation remains a central locus for the meeting of *sōma* and *psychē* in Aristotle's writings. In fact, Aristotle considers a number of states common to body and soul precisely because they participate in sensation: being awake, pleasure and pain, and desire all fall into this category.<sup>27</sup> Yet Aristotle also departs in some respects from Plato's understanding of the psychophysical nature of sensation. Whereas in the *Philebus*, Plato represents sensation as a 'shock' powerful enough to ripple into the *psychē* from the body, in the *De Anima* Aristotle develops an account of sensation as a process that, while accomplished through the body, should be understood as the actualization of a psychic faculty.<sup>28</sup> By assigning the passive role to the bodily organs of sensing and granting the soul greater agency, he ramps up the degree of difference between the body and the soul within the shared experience of sensing. The Aristotle of the *De Anima* thus represents sensation less as a disturbance, necessary but troubling, and more as an activity that is natural to ensouled animals.<sup>29</sup>

And yet, Aristotle does speak of affections of the soul. One of the conundrums that he raises in the opening pages of the *De Anima* is whether the affections of the soul are always shared with that which holds it—namely, the body (403a3–5). Having briefly entertained the possibility that the soul acts independently of the body in cognition, he concludes that:

<sup>26</sup> On unfelt movements in the body, see Plato, *Phlb.* 33d2–34a5, 43b7–c6; *Ti.* 64a2–65b3. Other experiences, too, do not qualify as common to body and soul. At *Phlb.* 36b8–9, for example, the soul and the body have divergent experiences of pleasure and pain. See also 36b12–c1, on a 'double pain' arising independently in the *psychē* and the *sōma*; 41b11–d2. On the *psychē*-*sōma* relationship at 33c–d, see Evans 2004; Holmes 2010a, 361–362.

<sup>27</sup> See esp. Aristotle, *Sens.* 436b1–3. For the expression 'common to body and soul', see also *De An.* 433b19–21; *Part. An.* 643a35; *Somn. Vig.* 454a7–8. For the *koinōnia* of body and soul, see *De An.* 407b18 and *Long.* 2, 465a31.

<sup>28</sup> Aristotle does, in some texts, speak of movements in the soul caused, for example, by pleasure: see *Ph.* 244b11–12, with Menn 2002, 87–88 (arguing for a developmentalist reading of the *De Anima*). See also Menn 2002, 100, 113, 117 on the contrast of the *De Anima* with the *Philebus*.

<sup>29</sup> For the emphasis on the soul as an agent, see Menn 2002; Morel 2006.

ἔοικε δὲ καὶ τὰ τῆς ψυχῆς πάθη πάντα εἶναι μετὰ σώματος, θυμὸς, πραότης, φόβος, ἔλεος, θάρσος, ἔτι χαρὰ καὶ τὸ φιλεῖν τε καὶ μισεῖν· ἅμα γὰρ τούτοις πάσχει τι τὸ σῶμα.  
(Aristotle, *De An.* 403a16–19)

It is likely that all the affections of the soul are with the body: anger, gentleness, fear, pity, courage, and joy, as well as loving and hating. For together with these things the body suffers something.

Shortly thereafter, Aristotle provisionally concludes that it is likely that all the affections of the soul occur *with* the body (μετὰ σώματος, 403a17).

How should we interpret these statements? Aristotle will go on in the *De Anima* to call into question the idea of psychic affections by arguing that emotions are not, in fact, movements occurring in the soul, contrary to the conventional way of speaking.<sup>30</sup> It is difficult to know, moreover, how he understands the terms and modalities of the ‘association’ or ‘partnership’ (*koinōnia*) between the body and the soul as it is presented here. Still, without venturing too far into these vexed questions, we can make a few observations about the passage under consideration.

First, to the extent that there is a primary affection at all, it originates with or somehow belongs to the soul, not the body. Moreover, Aristotle speaks in terms of simultaneity and coordination rather than causal interaction without spelling out the relationship between the affections of the soul and the ‘something’ suffered by the body.<sup>31</sup> Finally, the *De Anima* passage seems to confirm that, in Aristotle’s hands, the concept of ‘common to body and soul’ loses the faintly pathological overtones that it has in the *Philebus*, gravitating instead toward normal events or states (e.g., sensation and states accompanied by sensation like waking and emotion).<sup>32</sup> At the same time, the *De Anima* passage is not the whole story. Elsewhere in his corpus and especially in the biological and physiological writings, Aristotle grants certain states of the body the power to facilitate or disrupt processes such as memory and thought.<sup>33</sup> While he at times speaks in terms of simultaneous events or states, in other cases he uses language indicating that the body *causes* disturbances in the soul.<sup>34</sup>

<sup>30</sup> See esp. *De An.* 408b1–15, with Witt 1992, 179–182; Menn 2002, 99–101.

<sup>31</sup> Rapp 2006 emphasizes the absence of causal interaction on the Aristotelian model compared to Hellenistic accounts of psychophysical sympathetic affections.

<sup>32</sup> The *koinōnia* of the *sōma* and the *psychē* also has pathological connotations at Plato, *Phd.* 65a1, c8, 67a3–4; *Resp.* 611b10–c1.

<sup>33</sup> For a discussion of this material, see esp. van der Eijk 2000a, 66–68, 70–77; and, by the same author, 2005 [1997].

<sup>34</sup> On the language of simultaneity, see, e.g., *Ph.* 248a2–6. On causal language, see van der Eijk 2005a, 223–237, esp. 235: ‘Passages ... in which weight is said to ‘make’ (ποιεῖν) the soul

In short, Aristotle presents a complex, opaque, and not always consistent picture of the overlap between the affections of the body and the ‘affections’ of the soul. The fraught nature of the soul’s relationship to what the body undergoes and the ambiguous status of psychic affectability *tout court* may help us understand an intriguing situation. By invoking the concept of ‘common to body and soul’ at crucial moments in his account of the animal as a psychophysical unity, Aristotle seems to play a critical role in endowing that concept with philosophical traction. And yet, he does not habitually use the more specific language of sympathy in his corpus to describe body-soul relations, even in the more biological works. To be fair, both the noun *sympatheia* and the verb *sympaskhein* are relatively infrequent in this period. But it may also be that, for Aristotle, the language of suffering together does not sufficiently differentiate between what happens to a body and a psychic state or function. In other words, on those occasions when Aristotle is puzzling over just how the body and the soul are implicated in one another, difference is as important as coordination—above all in the realm of acting and being acted upon.

It is interesting in this context to observe that when, in the *Prior Analytics*, we do find Aristotle using the verb ‘to suffer together’ of the co-affection of the soul and the body, the specific nature of their association is not under analysis.<sup>35</sup> The emphasis, rather, is on the association itself as a basis for making judgments about character from appearance. Such judgments are possible, Aristotle says, ‘if you grant that body and soul change together in all natural affections’ (εἰ τις δίδωσιν ἅμα μεταβάλλειν τὸ σῶμα καὶ τὴν ψυχὴν ὅσα φυσικά ἐστι παθήματα, *An. Pr.* 70b7–8), such as anger and desire. He concludes by restating the assumption that body and soul suffer

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slow, or disease or sleep is said to ‘confuse’ and ‘change’ the intellect, indicate an *active* role of bodily factors in the operations of the intellect. Thus apart from saying that bodily changes ‘correspond with’ or ‘accompany’ psychic activities, which does not commit itself to a specific type of causal relationship, we may go further and say that bodily states and processes *act* on psychic powers or activities just as well as psychic powers may be said to ‘inform’ bodily structures’ (emphasis in original). Yet we must be careful not to overstate the case for a causal relationship. Aristotle himself often prefers the non-committal language of simultaneity and coordination.

<sup>35</sup> Aristotle is not all that specific about how the association of body and soul works even in the *De Anima* and the *De Sensu*. But in these contexts the nature of the association is at least under reflective consideration. For other instances of sympathy in contexts where the experience of being affected is important, see *Part. An.* 653b5–8, where the heat in the heart is ‘most sympathetic’ (συμπαθέστατον) with changes elsewhere in the body, 690b4–7; *Pol.* 1340a13; *Somn. Vig.* 455a33–b1. At *De An.* 428b21–23, when we form a judgment that something is frightening, we are immediately affected by it (συμπάσχομεν).



together (70b16–17). What matters, it seems, is the coordination, not the nature of the relationship.

Aristotle, then, was relatively reticent in his use of the language of sympathy. By contrast, such language appears to have become a popular aspect of his difficult account of soul-body relations in later Peripatetic thought.<sup>36</sup> One place where it is especially pronounced turns out to be physiognomy, the backdrop to Aristotle's reference to sympathy in the *Prior Analytics*. The founding maxim of the pseudo-Aristotelian *Physiognomy* (ca. fourth century BCE) is that 'mental dispositions follow bodies and are not unaffected in themselves by the movements of the body' (αἱ δianoiai ἔπονται τοῖς σώμασι, καὶ οὐκ εἰσὶν αὐταὶ καθ' ἑαυτὰς ἀπαθείς οὐσαι τῶν τοῦ σώματος κινήσεων, 805a1–2). The opposite is equally true—namely, that the body suffers the affections of the soul (τοῖς τῆς ψυχῆς παθήμασι τὸ σῶμα συμπάσχει, 805a5–6; see also 808b12), a claim that the author supports by referring to the emotions. As in Aristotle's own physiognomic remarks in the *Prior Analytics*, what matters here is the fact of co-affection, rather than the differences between what happens in the body and what happens in the soul. The pseudo-Aristotelian *Problemata* also takes soul-body sympathy as a vague working assumption in a chapter that treats sympathy not just between the body and the soul but in a range of contexts.<sup>37</sup>

The concept of things common to body and soul thus functions as an important bridge between two of Aristotle's central commitments: some form of soul-body dualism and the idea that bodies and souls are inseparable halves of a psychophysical (hylomorphic) composite. That concept is not synonymous with the narrower concept of sympathy. Nevertheless, sympathy seems to have become a common way of expressing the association between the body and the soul in writers influenced by Aristotle.

The situation changes significantly when we reach the Hellenistic period. In both Epicureanism and Stoicism, the idea of sympathy not only becomes more visible but acquires a markedly technical sense, grounded in the very premise resisted by Aristotle: the soul *can* be affected by the body and can affect it in turn because it, too, is a body.<sup>38</sup> Despite the fact that we lack

<sup>36</sup> On the principle of 'common to body and soul' in Peripatetic thought, see Sharples 2006. Van der Eijk (2005a, 236) stresses continuities between the *Physiognomy* and the *Problemata* and the works ascribed by modern scholars to Aristotle.

<sup>37</sup> See esp. [Aristotle] *Prob.* 3.31, 875b32–33: ὅταν ἡ ψυχὴ πάθῃ τι, συμπάσχει καὶ ἡ γλῶττα, ὅσον τῶν φοβουμένων (when the soul suffers something, the tongue suffers in sympathy, as in those who are afraid).

<sup>38</sup> For the Stoics' rejection of Platonic and Aristotelian beliefs about the causal efficacy of incorporeals, see Cicero, *Ac.* 1.39 (*SVF* 1.30).

an extensive corpus of evidence for Hellenistic philosophy, the material that has come down to us suggests that sympathy played a cardinal role in establishing the psychophysical holism endorsed, albeit in different ways, by both the Epicureans and the Stoics.<sup>39</sup>

Given the thoroughgoing materialism of Epicureanism, according to which everything that is not void is body, it comes as no surprise that Epicurus understood the *psychē* to be corporeal, capable of affecting other atomic compounds and subject to being affected by them. Yet the soul also has particular qualities that help account for its specific capacities to act and be acted upon. In the *Letter to Herodotus*, Epicurus describes the *psychē* as a body (*sōma*) of fine particles distributed through the ‘aggregate’ (*athroisma*)—the term he uses to speak of the atomic composite as a unity—that closely resembles wind and is mixed with heat. There is, however, a third element of the soul, still finer than the others, that, precisely because of its fineness, is ‘sympathetic’ with the rest of the whole (συμπαθές ... τῷ λοιπῷ ἀθροίσματι, *Ep. Hdt.* 63).<sup>40</sup> One area where sympathy is especially important is, as we may by now expect, sensation, a task that Epicurus primarily entrusts to the soul, albeit a soul that must be enclosed in the aggregate in order to perform its function.<sup>41</sup> The *psychē* also ‘gives’ sensation to the aggregate ‘on account of its proximity to and sympathy with it’ (κατὰ τὴν ὁμούρησιν καὶ συμπάθειαν καὶ ἐκείνῳ, *Ep. Hdt.* 64).<sup>42</sup>

The doctrinal importance of sympathy within Epicureanism is confirmed by the role it plays in Lucretius’s discussion of the corporeality of the soul in Book 3 of the *De Rerum Natura*. Lucretius, interestingly, begins by rejecting the idea that the soul is a harmony, glossed as a ‘vital condition of the body’ (*habitum quendam vitalem corporis*, 3.99). He is adamant, rather, that the

<sup>39</sup> On the ‘psychophysical holism’ of both schools, see Gill 2006a.

<sup>40</sup> On the nature of the soul, cf. Lucretius, *DRN* 3.177–287, 425–444, who attributes sensation to an unnamed *fourth* element; see also Aëtius 4.3.11; Plutarch, *Adv. Col.* 1118D–E.

<sup>41</sup> Sensation is thus an example of something ‘common to body and soul’, as Lucretius *DRN* 3.333–336 suggests: *nec sibi quaeque sine alterius vi posse videtur | corporis atque animi seorsum sentire potestas, | sed communibus inter eas conflatur utrimque | motibus accensus nobis per viscera sensus* (And we see that neither the body nor the mind has the capacity to feel on its own without the help of the other, but by common movements arising from both together sensation is kindled for us in our flesh). But Epicurus himself does not use such language, and, as many scholars have observed, the relationship he describes between the *psychē* and the aggregate seems designed in part to supplant the *psychē*–*sōma* pair.

<sup>42</sup> Note that the language of sympathy is also standard in Epicurus’s account of perception, where it describes how effluences preserve the qualities of the object perceived: *Ep. Hdt.* 48, 50, 52, 53.

mind (*animus*) can withdraw and be *unaffected* by the pains of the body, a position he defends in part by splitting off a thinking soul (*animus*), concentrated in the chest, from a sensing soul (*anima*), distributed throughout the aggregate (3.136–151).

Nevertheless, having established the divergence between the affections of the *animus* and those of the rest of the aggregate, Lucretius proceeds to emphasize the intimacy between the *animus* and the *anima* by pointing out that the *anima* is affected together (*consentire*) with the *animus* in cases of strong emotion (3.158–160). He then goes on to defend the corporeality of both the *anima* and the *animus* (3.161–162), arguing, on the one hand, that the mind and soul must be corporeal if they are to act on the body (for example, to initiate movement), and, on the other hand, that the mind is affected when the body is struck (for example, by a weapon).<sup>43</sup> The mind, in other words, not only communicates its affections to the aggregate but ‘suffers along with the body, and shares our feelings together [*consentire*] in the body’ (3.168–169). The last point confirms that not only is the *psychē* not unmoved: it is uncommonly sensitive to movement (3.203–205, 243). The mind, despite its capacity to withdraw from the suffering of the aggregate, thus remains vulnerable to the affections of the whole, not just because it is corporeal but because it is especially susceptible to being affected.

The Stoics, for all their differences with the Epicureans, also make sympathy central to their arguments about the nature of the *psychē* and its relationship to the rest of the body.<sup>44</sup> In an argument credited to Cleanthes, sympathy is central to establishing that the soul, in fact, *is* a body:<sup>45</sup>

οὐδὲν ἀσώματον συμπάσχει σώματι οὐδὲ ἀσωμάτῳ σώμα, ἀλλὰ σώμα σώματι.  
 συμπάσχει δὲ ἡ ψυχὴ τῷ σώματι νοσοῦντι καὶ τεμνομένῳ, καὶ τὸ σώμα τῇ ψυχῇ·  
 αἰσχυνομένης γοῦν ἐρυθρὸν γίνεται καὶ φοβουμένης ὄχρον· σώμα ἄρα ἢ ψυχὴ.  
 (Nemesius, *Nat. Hom.* 2 [21,6–9 Morani] = *SVF* 1.518, in part)

<sup>43</sup> Lucretius does not specify why only some of the pains of the body are passed on. It may be that the capacity of the *animus* to withdraw from bodily pain is strengthened by mental pleasures (such as the memories of philosophical conversation Epicurus called upon on his deathbed).

<sup>44</sup> The Stoics actually posited two different forms of *psychē* in a human being: the *psychē* that is responsible for the form of the rest of the body and vital functions (and that is present, too, in other animals) and the hegemonic *psychē*, located in the heart, that functions as a ‘ruler’ in rational beings. See Sextus Empiricus, *Math.* 7.234, with Long 1996 [1982]. The argument about *psychē-sōma* sympathy implicates both these aspects of the *psychē* in the rest of the body (and vice versa) insofar as they are both corporeal.

<sup>45</sup> For this argument and the two other Stoic classes of argument for proving the corporeality of the soul (‘genetic’ and ‘contactual’), see Long 1996 [1982], esp. 235–236.

No incorporeal interacts with a body, and no body with an incorporeal, but one body interacts with another body. Now the soul interacts with the body when it is sick and being cut, and the body with the soul; thus when the soul feels shame and fear the body turns red and pale respectively. Therefore, the soul is a body. (Trans. Long and Sedley)

Here, as in Lucretius, affections travel in both directions, from the soul to the body—with the emotions invoked again as a paradigmatic example—and from the body to the soul (e.g., in pain). The argument ascribed to Chrysippus emphatically posits causal relationships designed to prove the corporeality of the soul. The *psychē* is, nevertheless, a specific kind of stuff (a combination of fire and air), perfectly suited to the functions associated with the highest expression of life in human beings.

The sympathetic relationship of the body and the soul shores up, too, the Stoic emphasis on the cohesive unity of bodies (human and non-human), which are held together by the tension of the air or breath (*pneuma*) pervading them. The principle of cohesion extends to the Stoic conceptualization of the cosmos as a whole. The Stoics believed, accordingly, that sympathy operates not just within the microcosm but at the level of the macrocosm as well, between parts and the whole within a continuum of matter.<sup>46</sup> The idea of sympathy is thus central to Stoicism, to the extent that it expresses the dynamic unity of matter, both inside and outside the human being.

Even a cursory overview shows that the concept of psychophysical sympathy has its own history within the ancient philosophical tradition. We glimpse the foundation of this tradition in Plato's understanding of an affection common to body and soul and specific to each. Aristotle appears to have been more ambivalent about the susceptibility of the soul to being moved, but his commitment to understanding the *sōma* and the *psychē* as two halves of an organic whole lays the groundwork for sympathy's entry into the Peripatetic vocabulary. The concept of sympathy seems to truly come into its own in the Hellenistic schools, where it acquires a degree of

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<sup>46</sup> On sympathy in the cosmos, see Chrysippus in Alexander, *On Mixture* 3 (216,14–17 Bruns; see also 227,8 Bruns) (SVF 2.473): ἡνῶσθαι μὲν ὑποτίθεται τὴν σύμπασαν οὐσίαν, πνεύματός τινος διὰ πάσης αὐτῆς διήκοντος, ὅφ' οὐ συνέχεται τε καὶ συμμένει καὶ σύμπαθές ἐστιν αὐτῷ τὸ πᾶν ([Chrysippus] holds that while the whole of substance is unified, because it is totally pervaded by a *pneuma* through which the whole is held together, and is sympathetic with itself ... [trans. Todd]). See also Cicero, *Div.* 2.33–34 (SVF 2.1211); *Nat. D.* 2.19; Cleomedes, *Caelestita* 1.1.13 (SVF 2.534), 1.1.69–73 (SVF 2.546); Diogenes Laërtius 7.140 (SVF 2.543); [Plutarch], *Fat.* 574E (SVF 2.912); Sextus Empiricus, *Math.* 9.78–80 (SVF 2.1013). On cosmic sympathy and the continuum, see Sambursky 1959, 41–44; White 2003, esp. 128–133.

technical precision and plays a significant role in establishing the corporeality of the soul and its intimate bond with the larger composite. To speak of *sōma-psychē* sympathy in this context, it would seem, carries a core commitment to the shared materiality underwriting the sympathetic bond.

In sketching this brief history, I have touched only incidentally on mental disturbance and disorder. In some contexts, such as the *Philebus* or Lucretius's arguments about the violent impact of bodily diseases on the mind and the spirit (3.463–469, 487–509), the idea of sympathy leaves mental or psychic functions vulnerable to troubles erupting from within the body. But the body may also be affected by the mind. Moreover, as the concept of things shared by the body and the soul is developed by Aristotle and the Hellenistic philosophers, it comes to describe normal states and processes as often as it describes turmoil. I turn now to the ways in which Galen engages both the philosophical and medical traditions to elaborate an intriguing concept of sympathy, marked, on the one hand, by an emphasis on disturbances of the mind and, on the other hand, by its inability to bridge the domains of the body and the soul.

### *Sympathy and Mental Disturbance in Galen*

Galen was no stranger to the concept of sympathy. He not only invoked sympathy as central to his own understanding of the body as an intelligently fashioned, interconnected unity: he attributed that vision to the divine Hippocrates himself. What is at stake for Galen in laying claim to sympathy is nowhere made clearer than in the treatise *On the Natural Faculties*. There, he declares that, when it comes to the nature of Nature, there are two sects in medicine and philosophy: there are those who believe in a continuum theory of matter and those who adopt a corpuscular or atomist physics.<sup>47</sup>

The division, at first glance, may appear surprising. For, as we have seen, both the Epicureans (atomists) and the Stoics (continuum theorists) use sympathy to describe the interaction of the soul with the rest of the organism or aggregate. But for the Stoics, sympathy is also a macrocosmic principle that bears witness to the absence of void and the tensional unity of the world. It is this larger, philosophically charged concept of sympathy that Galen presumably has in mind in *On the Natural Faculties*.<sup>48</sup> The more

<sup>47</sup> *Nat. Fac.* 1.12 (11 27 K = 120,7–11 Helmreich); see also *QAM* 5 (1v 785 K = 46,9–17 Müller).

<sup>48</sup> Galen is often seen as an enemy of the Stoics because of his attacks on their psychology,

global perspective certainly colors the view he ascribes to Hippocrates: 'substance is unified and undergoes alteration and the body as a whole breathes together and flows together' (ἤνωται μὲν ἢ οὐσία καὶ ἀλλοιοῦται καὶ σύμπνου ὄλον ἐστὶ καὶ σύρρου τὸ σῶμα, *Nat. Fac.* 1.12, II 29 K = 122,7–9 Helmreich).<sup>49</sup> The grander meaning of sympathy is confirmed by the fact that he sums up the position of his opponents—physicians who defend corpuscular theories of the body and, above all, the first-century BCE physician-theorist Asclepiades of Bithynia—in turn, as the *rejection* of sympathy outside but especially inside the body.<sup>50</sup> Galen's nightmare is a body where interconnectivity is thwarted by fragmentation at the most basic level. To deny sympathy, on his view, is to deny not simply the cohesion but the *coherence* of nature.

The image of Hippocrates as the champion of sympathy that Galen puts forth here and elsewhere has its basis in *On Nutriment*.<sup>51</sup> The treatise is almost certainly Hellenistic, in part because the sympathetically unified body described there betrays such clear Stoic influence. Yet the idea of the body as a unity in which air and fluids circulate through a network of vessels is, as we have seen, not foreign to some of the early medical authors. And despite the serious gaps in our evidence for medicine between the Hippocratics and Galen, there are good indications that some time after the first phase of classical Greek medical writing, the idea of co-affection came to be closely associated with the term *sympatheia*; that term acquired, in turn, a degree of technicality within medicine. Soranus, to take one example, writes that when the womb suffers, it acts sympathetically on the stomach and the meninges (πάσχουσα μέντοι πρὸς συμπάθειαν στόμαχον ἄγει καὶ μήνιγγας); it has, too, he observes, some kind of natural sympathy with the breasts (ἔστι δὲ τις αὐτῇ καὶ πρὸς τοὺς μαστοὺς φυσικὴ συμπάθεια, *Gyn.* 1 15 [10,27–28 Ilberg]).<sup>52</sup> In a fragment from Rufus of Ephesus's *On Melancholy*,

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but there are a number of points of contact in their philosophies of nature: see Manuli 1993; Gill 2007a and 2010a. On Galen's relationship with Stoics contemporary with him, see Tieleman 2009.

<sup>49</sup> For similar citations of Hippocrates, see *Caus. Puls.* 1.12 (IX 88 K), *Nat. Fac.* 1.13 (II 38 K = 129,7–9 Helmreich), 3.13 (II 196 K = 243,10–13 Helmreich); *MM* 1.2 (x 16 K); *Trem. Palp.* (VII 616 K); *UP* 1.8 (III 17 K = 1.12 Helmreich), 1.9 (III 24 K = 1.17 Helmreich).

<sup>50</sup> *Nat. Fac.* 1.13 (II 39 K = 129,9–12 Helmreich).

<sup>51</sup> The key passage is *Nutr.* 23 (IX 106 Littré): ξύρροια μία, ξύμπνοια μία, ξυμπαθέα πάντα· κατὰ μὲν οὐλομελίην πάντα, κατὰ μέρος δὲ τὰ ἐν ἐκάστῳ μέρει μέρεα πρὸς τὸ ἔργον (There is one confluence; there is one common breathing; all things are in sympathy. All the parts as forming a whole, and severally the parts in each part, with reference to the work).

<sup>52</sup> For other affections produced sympathetically, often with the womb, see Soranus, *Gyn.* 1.63 (47,16 Ilberg), 1.67 (48,25 Ilberg), 2.11 (58,11 Ilberg), 2.49 (88,22 Ilberg), 3.17 (105,17

preserved only in Arabic, the connection of the head to the stomach may have been framed in terms of sympathy in the original Greek.<sup>53</sup>

The concept of sympathy appears, then, to have developed independently in medicine as a way to describe axes of communication between different parts of the body that leave each part vulnerable to the affections of the others. In *On the Natural Faculties*, Galen outfits this medical concept of sympathy with the larger philosophical connotations it acquires in Stoicism in order to give it a starring role in the confrontation he is staging between the continuum theorists and the atomists. Yet a brief scan of his use of sympathy in his vast corpus suggests that the concept primarily functioned for him as a practical diagnostic tool. Still, we should not be misled into expecting that larger philosophical concerns disappear when we shift to the more pragmatic side of Galen—on the contrary. Galen's diagnostic use of sympathy can tell us something about how the hegemonic principle or mind and, more distantly, the soul, is implicated in the non-conscious, physiological body.

Galen refers to sympathy in a number of treatises (including in commentaries on Hippocratic texts where the term itself is absent).<sup>54</sup> Half a century ago, Rudolph Siegel organized these references into five classes of sympathetic affection according to the means of transmission: two are neural (irritations transmitted via the nerves or through the blockage of nerve

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Ilberg), 3.20 (106,19 Ilberg), 3.22, *bis* (107,18; 107,27 Ilberg), 3.25 (109,8 Ilberg), 3.29 (113,6 Ilberg), 3.31 (114,6 Ilberg), 3.41, *bis* (120,13; 121,12 Ilberg), 3.49 (127,11 Ilberg), 4.7 (137,7 Ilberg), 4.9 (140,7 Ilberg), 4.15 [1.72], *tris* (145,16; 145,18; 145,29 Ilberg). The verb (συμπάσχειν) is also used to describe women sympathizing with each other's pains: see 1.4 (5,22 Ilberg); a similar (person-to-person) use is found at *Praec.* 14 (IX 272 Littré = 35,6–7 Heiberg). For sympathetic affections, see also Anon. Med., *Morb. Acut.* 7.3.11 (54,27 Garofalo), 22.2.2 (172,5 Garofalo), 37.2.2 (194,1 Garofalo), 40.2.4 (246,19 Garofalo); Cassius, *Quaestiones medicae* 21 (152,3 Ideler), 40 (158,13 Ideler), 83 (167,15–16 Ideler); Severus, *De instrumentis et infusoriis* (24,3–7 Dietz, 30,14–16 Dietz). Maire and Bianchi 2003, I.430–432 list uses of the equivalent Latin terms *consensus* (fifty instances) and *consentire* (thirty-eight instances) in Caelius Aurelianus: see, e.g., *Morb. Acut.* 1.71 (62,17–18 Bendz), 3.140 (376,21 Bendz); *Morb. Chron.* 1.62 (464,24 Bendz), 2.25 (558,18 Bendz), 2.27 (560,3 Bendz), 3.69 (720,16 Bendz). The noun and verb appear frequently in Oribasius as well. Galen refers to earlier treatments of sympathy as a diagnostic concept at *Loc. Aff.* 1.6 (VIII 49 K), 3.11 (VIII 198 K). All this evidence makes it unlikely that Galen was the first physician to establish sympathy as a diagnostic concept, *pace* Siegel 1968, 360–361, although he was no doubt instrumental in installing it in the later medical tradition.

<sup>53</sup> Rufus, *On Melancholy* fr. 8 (Pormann). The Arabic contains the word *mušāraka*, which we can see being used to translate *sympatheia* in medical texts extant in Greek and Arabic: see Holmes 2012. I am grateful to Peter Pormann for the reference and assistance with the Arabic.

<sup>54</sup> Galen's strategic projection of his own theories onto the Hippocratic texts is well known: see von Staden 2002; Flemming 2008, esp. 343–346.

impulses); the others involve the humors, vapors, and contact through proximity.<sup>55</sup> Galen himself does not provide such a neat classification, at least in the texts we have, and at times he equivocates on whether all these cases are properly instances of sympathy.<sup>56</sup> Still, Siegel's classification offers a good starting place.

If we read the Galenic system sketched by Siegel together with the 'circular' model that we saw earlier in *On Places in a Human Being*, we notice immediately that Galen has multiplied the possible channels of communication in the body in comparison with his Hippocratic predecessor. More specifically, where the earlier writer focuses on fluids circulating in the body, Galen elevates the nerves to one of the most important routes for the communication of affections.

Indeed, despite the fact that Galen himself attributes a sophisticated grasp of neural anatomy to Hippocrates, it is the nervous system that decisively divides the Galenic body from that of the classical-era medical authors. How information moves between the mind or the soul and the rest of the body was a question increasingly posed by physicians and philosophers in the fourth century BCE. But it is only with the beginning of systematic human dissection at Alexandria in the following century that people came to recognize the role of the nerves in transmitting sensation and motor impulses throughout the psychophysical organism. Galen's model of the body owes much to the anatomical investigations of Herophilus and Erasistratus, and he was himself an accomplished anatomist (and a physician to gladiators early in his career).<sup>57</sup> Perhaps most important, he enthusiastically embraced what he saw as one of anatomy's most impressive contributions to the study of human nature—namely, irrefutable proof that the ruling part is located in the head and not in the heart, as the Peripatetics and the Stoics believed.<sup>58</sup> He himself undertook vivisectionary experiments to demonstrate the control of the brain over the sensory, motor, and mental functions.<sup>59</sup> It is

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<sup>55</sup> Siegel 1968, 362–370, with examples.

<sup>56</sup> See esp. *Loc. Aff.* 1.6 (VIII 51–51 K), where he doubts whether humoral transmission is really sympathy. On the difference between the transmission of stuffs and the transmission of powers, see De Lacy 1979, 360–361.

<sup>57</sup> On the 'discovery' of the nerves, see esp. Solmsen 1961; von Staden 1989, 247–259. On the cultural context of dissection and its disappearance in the centuries after Herophilus and Erasistratus, see von Staden 1992a.

<sup>58</sup> *PHP* 8.1.3–4 (V 649–650 K = 480,16–24 De Lacy).

<sup>59</sup> On these experiments, see Hankinson 1991a, 219–224; Mansfeld 1991, 129–131; Tieleman 2002. They were often performed in front of large crowds in Rome with the express aim of disproving the positions of opponents: see Debru 1995; von Staden 1995; Gleason 2009.



in Galen's writings that we begin to grasp what the advances in Alexandria meant not only for the concept of sympathetic affections but also for ideas about the implication of the mind or soul in the whole.

The concept of sympathy, as I have already noted, appears throughout Galen's corpus. But he discusses it most extensively in *On the Affected Parts*, which is not surprising given that he believes that a physician has to know *how* a part has come to be affected if he is to administer the proper therapy.<sup>60</sup> In his opening remarks, Galen distinguishes affections that arise through sympathy with another part from those that arise from the damaged condition (*diathesis*) of the part itself ('idiopathy').<sup>61</sup> In theory, he reserves the term sympathy for affections that act as the 'shadows' of affections occurring elsewhere in the body, appearing and disappearing together with them; he introduces the terms 'secondary' or 'later' affection (*deuteropatheia*, *hysteropatheia*) to describe cases where an affection first triggered by sympathy takes hold in the part itself.<sup>62</sup> In practice, however, terminological precision tends to fall by the wayside. Galen usually uses the term 'sympathy' to refer to *all* affections triggered by suffering elsewhere in the body, while continuing to note when the affection has damaged the sympathetically affected part (creating the need for therapy targeted at that part).<sup>63</sup>

Beyond trying to specify under what conditions an affection arises (that is, whether or not it is caused through sympathy), Galen is interested in *On the Affected Parts* in where and how sympathetic affections most commonly arise. The backdrop to his discussion is the networked body uncovered by anatomy. It comes as no surprise, then, that the major control centers occupy important positions on the map of sympathy. Galen compares the brain at one point to a sun emanating light—that is, psychic *pneuma*—over the rest of the body.<sup>64</sup> The sun's pride of place also means damage to it can trigger a cascade of problems elsewhere.<sup>65</sup> For example, if the brain is

<sup>60</sup> For the importance of understanding sympathy in diagnosis and therapy, see esp. *Loc. Aff.* 2.10 (VIII 129 K). See also *Comp. Med. Loc.* 2.1 (XII 559 K); *Loc. Aff.* 3.4 (VIII 146 K), 5.6 (VIII 339 K).

<sup>61</sup> *Loc. Aff.* 1.3 (VIII 30 K). At 2.10 (VIII 129 K), he suggests that such a differentiation, given its therapeutic importance, is the proper topic of the treatise.

<sup>62</sup> *Loc. Aff.* 1.3 (VIII 31 K); see also 1.6 (VIII 48 K). On the shadow, a concept Galen attributes to Archigenes, see *Loc. Aff.* 3.1 (VIII 136–137 K).

<sup>63</sup> See esp. *Loc. Aff.* 3.2 (VIII 138 K), where protopathy and idiopathy appear interchangeable, and 3.7 (VIII 166 K), where Galen refers to two types of sympathy, one that comes and goes with the primary affection and one that fixes in the secondarily affected part. At *Comp. Art. Med.* 15 (I 282 K = 106,12–13 Fortuna), sympathy is opposed to protopathy.

<sup>64</sup> *Loc. Aff.* 1.7 (VIII 66–67 K).

<sup>65</sup> *Ibid.* 4.10 (VIII 282 K).

corrupted by bilious humors, it can affect the eyes through sympathy: smoky fumes are transmitted through the vessels joining the eyes to the brain and create optical illusions.<sup>66</sup>

But damage can travel the other way, too: not just from the brain but also towards it, and here is where the story becomes particularly interesting. For trouble often arrives in the brain along a path that connects the brain to the stomach and, more specifically, the mouth of the stomach, the *cardia*. It is probably no accident that in his opening remarks on sympathy in *On the Affected Parts*, Galen uses the example of noxious vapors or humors rising up from the stomach cavity to the brain.<sup>67</sup> In his more detailed discussions, too, affections frequently migrate to the brain from the stomach or its mouth. So, for example, when he classifies types of melancholy and epilepsy, he distinguishes between cases that originate with a primary affection of the head and cases that develop in sympathy with the opening of the stomach.<sup>68</sup> Later in the treatise we come across a case of sympathetic epilepsy involving a young student of literature. Galen figures out that the problem is that the young man is too absorbed in his studies to remember to eat; he cures him by enforcing regular meal-times.<sup>69</sup> The problem with the brain, in short, starts in the stomach. Elsewhere we learn that the delirium associated with high fevers is not a primary affection, but a sympathetic condition triggered by the migration of hot vapors from the gut to the brain.<sup>70</sup> Once again, trouble brews at the mouth of the digestive system.

What makes the brain so vulnerable to problems in the gut is the existence of a large nerve (or nerves) connecting it to the opening of the stomach.<sup>71</sup> The nerve in question creates a path upwards for noxious humors, as well as for various vapors that ascend beyond the brain to the eyes.<sup>72</sup> And it

<sup>66</sup> Ibid. 4.2 (VIII 227–228 K).

<sup>67</sup> *Loc. Aff.* 1.6 (VIII 48 K).

<sup>68</sup> On types of epilepsy and melancholy, see *Loc. Aff.* 3.11 (VIII 193–200 K). For the role of the stomach in triggering delirium, melancholy, and loss of consciousness, see also *Comp. Art. Med.* 15 (I 282 K = 106,15–17 Fortuna); *Loc. Aff.* 5.6 (VIII 338 K); *Symp. Caus.* 1.7 (VII 128, 137 K).

<sup>69</sup> *Loc. Aff.* 5.6 (VIII 340–342 K).

<sup>70</sup> *Loc. Aff.* 3.9 (VIII 178 K).

<sup>71</sup> See esp. *Loc. Aff.* 3.9 (VIII 178–179 K), where large nerves (identified now as the vagus nerves) connect the brain to the stomach; see also 5.6 (VIII 341–342 K), 6.2 (VIII 381 K); *UP* 9.11 (III 724–731 K = 2.30–35 Helmreich), with Siegel 1968, 362–365. In Galen's view, these nerves do allow movement in both directions (e.g., headaches can trigger gastric trouble), although the majority of the traffic that he describes runs from the stomach to the brain (most of the vagal nerves, in fact, are afferent, relaying information from the gut to the brain). For Galen's identification of the vagus nerve, see *AA* 11.11 (104–105 Duckworth), 14.7 (208–209 Duckworth).

<sup>72</sup> On sympathetic affections of the eyes, see *Comp. Art. Med.* 15 (I 282 K = 106,15–17 Fortuna); *Loc. Aff.* 4.2 (VIII 221–225 K), 5.6 (VIII 342 K).

is not just the brain that falls prey to gastric distress. The heart, too, is easily affected by affections of the stomach—indeed, violently so, often resulting in cardiac syncopes and loss of breath. The reason, once again, is a passage, in this case an artery connecting the stomach and the heart. In *On Causes of Symptoms*, for example, Galen emphasizes the sympathetic relationship of the mouth of the stomach and the heart alongside the relationship between the stomach and the brain. He connects the stomach to the heart by way of the ‘great artery’; the stomach and the brain are related, as we have just seen, by way of the vagus nerve.<sup>73</sup>

These lines of sympathy suggest a triangle of sorts involving the heart, the brain, and the stomach. But it is not exactly the triangle that a reader of Galen would expect. That the heart and the brain are included here is no surprise, since each is classified by Galen as a major *archē* in the body and, so, the origin of a major network. What is missing is the liver, the origin of the third network, namely the veins that Galen thinks distribute nourishment through the body.<sup>74</sup> The liver would also complete a triad that replicates—not by accident—Plato’s tripartite soul, which Galen defends vigorously against the Stoic theory of a unified hegemonic principle (located in the heart) in his *Doctrines of Hippocrates and Plato* and which he continued to advance throughout his career.<sup>75</sup> The influence of Plato is also strongly felt in Galen’s interest in conceptualizing his three *archai* as the origins not just of physiological systems but also of psychological ones: the brain is allied with reason, the heart with emotion and spirit, and the liver with appetitive and sensory desires.

Galen’s appropriation of the Platonic soul is, admittedly, not without its problems. Interestingly enough, one of the most pressing is the awkward role of the liver, the only organ we have not seen as a major sympathetic player.<sup>76</sup> Galen himself was aware of the difficulties involved. He openly

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<sup>73</sup> *Symp. Caus* 1.7 (VII 138 K). The chapter more generally privileges the heart and brain in sympathetic affections with the stomach or the cardia. See also *Hipp. Fract.* (XVIII/2 458 K): ἀλλὰ διὰ μὲν τὰς ἀρτηρίας ἡ καρδία συμπαθοῦσα, διὰ δὲ τῆς τῶν νεύρων οὐσίας ὁ ἐγκέφαλος (But the heart suffers sympathetically on account of the arteries, the brain on account of the substance of the nerves). On sympathetic affections of the heart with the cardia, see also *Loc. Aff.* 5.2 (VIII 302 K), 5.6 (VIII 342–343 K). On sympathy between the heart and brain, see *Loc. Aff.* 5.1 (VIII 300 K); *Praes. Puls.* 4.8 (IX 410 K).

<sup>74</sup> See, e.g., *Loc. Aff.* 5.1 (VIII 298 K); *PHP* 6.3.9 (V 522 K = 374,25–29 De Lacy), 7.3.2–3 (V 600–601 K = 438,28–440,8 De Lacy). Galen also speaks of a quaternary system incorporating the testicles: see Véronique Boudon’s remarks in the discussion to Tieleman 2003b, 164–165.

<sup>75</sup> On Galen’s Platonism in general, see De Lacy 1972; Singer 1991.

<sup>76</sup> See De Lacy 1988; Hankinson 1991a, 223–231; Tieleman 2002, esp. 266–268 and 2003, 153–154, 158–160; Donini 2008, 193; Gill 2010a, 104–124, 218–220.

admits, for example, that he is unable to demonstrate the liver's importance in the same way that he had used vivisection to prove the roles of the brain and the heart, since damage to the liver does not produce immediately observable effects.<sup>77</sup> And, as contemporary scholars have observed, it is a bit of a leap from the liver's physiological function of regulating nutrition to its purported psychological role as the seat of appetitive and sensory desires.<sup>78</sup> Finally, Galen, for all his interest in the anatomical substratum of the body, never demonstrates how the three parts interact.<sup>79</sup>

The very difficulty of integrating the liver into Galen's anatomico-physiological body makes the sympathetic relationship of the stomach to the brain and the heart newly intriguing.<sup>80</sup> For these major lines of sympathy seem to trace an alternative tripartite structure, a structure as much embedded in the networked flesh of the Galenic body as Plato's soul is disconnected from it.<sup>81</sup> What is more, the rival triangle, by shifting attention from the liver to the stomach, suggests a way of seeing the vulnerability of the rational part of the soul not captured by Galen's Platonic framework. For it grants the stomach considerable power to compromise the rational faculty by disturbing the state of the brain. Recall the image of the brain as a sun emanating its light throughout the body. If we turn to sympathetic affections originating in the gut, that image is quite literally eclipsed by another:

<sup>77</sup> *PHP* 6.3.2–6 (v 519–520 K = 372,19–374,8 De Lacy).

<sup>78</sup> Hankinson 1991a, 229–231; Gill 2010a, 107–124.

<sup>79</sup> Singer 1991, 45; Tieleman 2002, 270. Mansfeld also observes the difficulty of seeing the heart and liver as autonomous sources of motion when they lack motor nerves (1991, 141–142). Note, too, that Plato does not locate the third part entirely in the liver but sometimes seems to locate it in the belly as well: see *Tim.* 70d7–71d4. Tieleman suggests that, in privileging the liver, Galen is responding to its role in digestion and growth as it was described by Aristotle (2003, 153–154). See also von Staden 2000, 110, emphasizing the similarity of Galen's system to Erasistratus's model of three sources (of psychic pneuma, vital pneuma, and blood).

<sup>80</sup> The liver is excluded from the discussion at *Symp. Caus* 1.7 (vii 136–138 K), although cf. *MM* 12.5 (x 844 K), where all three *archai* can be led into such sympathetic affections. The liver is not particularly prone to sympathetic affections in *On the Affected Parts*, but see 5.7 (viii 351–352 K), where humoral imbalance is transmitted to the liver from elsewhere in the body. On sympathy between the heart and the liver, see *Marc.* 7 (vii 693 K); *Loc. Aff.* 5.1 (viii 299 K); *Praes. Puls.* 4.4 (ix 399–400 K).

<sup>81</sup> It is particularly interesting in this regard that Galen recognizes that hunger and thirst are transmitted to the brain not from the liver but from the stomach, via the large connecting nerve: see *Hipp. Epid.* iii 15 (xvii/2 664 K = 118,22–24 Wenkebach); *UP* 4.7 (iii 275 K = 1.201,19–202,2 Helmreich), 16.5 (iv 289 K = 2.394,18–24 Helmreich). At *UP* 4.13 (iii 308–309 K = 1.226,18–22 Helmreich), Galen tersely notes the small nerve running to the liver. The relationship between the heart and the brain, in contrast, is secured through the anatomical body (in addition to their shared bond with the mouth of the stomach): see Gill 2010a, 120–122.

the image of smoky vapors rising from the gastric cavity to impair the functions of the mind.

Of course, a scenario where the desiring part gains the upper hand over the rational soul is precisely the definition of psychic disease in Plato's *Republic*. Are things really so different in Galen? Perhaps most important, the loose version of the Platonic triangle that sympathy creates in *On the Affected Parts* differs from its philosophical cousin to the extent it is decisively realized in the physiological domain.<sup>82</sup> The stomach that communicates its troubles to the brain is closer to the body in the *Philebus*, whose disruptive motions, as we saw earlier, surface in the soul, than it is to Plato's seat of desire.<sup>83</sup> But even the body of the *Philebus*, which is loosely defined through the rhythms of organic life, is not the same as the webbed inner world described by Galen. For Galen's is an inner world seen through an anatomist's eye—not just 'the body'. In Galen, the relationship between the stomach and the brain made evident by sympathy is embedded in an intricately mapped corporeal landscape. Galen's very anatomical precision in locating the brain as the 'ruling part' of the self means that when things go wrong, it is more firmly subordinated to the forces of the physiological body, especially the digestive body.

To seasoned readers of Galen, the claim that the brain is vulnerable to the functioning of the stomach may seem only natural. After all, Galen's belief that human life, from its lowest to its highest expressions, depends on the state of the body only grew stronger over the course of his life. In one of the most memorable moments of *That the Faculties of the Soul Follow the Mixtures of the Body*, Galen jauntily invites those who scoff at the idea that diet can strengthen the mind to schedule a consultation for a regimen to improve their mental acumen.<sup>84</sup>

Yet Galen's treatment of sympathy alerts us to another, less familiar way of imagining how the physician manages health—and especially mental health—through drugs and diet. When Galen dispatches bitter aloë to

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<sup>82</sup> The difference between the physiological and the psychological here is also stressed by Singer 1991, 46–47. The difference can be seen as part of a larger divergence between the understanding of psychic disease in medicine and philosophy, on which see Gill 2010a, 300–321.

<sup>83</sup> Singer 1991, 43–46 discusses Galen's tendency to think in terms of bipartition rather than tripartition. What would be contrasted would not be *sōma* and *psychē* but *psychē* and *physis*. For the relevance of the contrast to Galen, see von Staden 2000, 102, 107–111; Tieleman 2003b, 159. See also Gill 2010a, 100–103, 114 on the *psychē-physis* distinction in Stoicism.

<sup>84</sup> *QAM* 9 (IV 807–808 K = 67,2–16 Müller).

corresponding patients in the Roman provinces who suffer from vapors clouding their eyes,<sup>85</sup> he is not so much treating the overall humoral and qualitative mixture, a stance we find already in texts like *On the Sacred Disease* and *On Regimen*. He is targeting the gut as the locus of disturbance. The stomach here emerges as the unruly ‘neighbor’—albeit, at a distance—of the brain. From this perspective, what we might call that of the ‘body in parts’, the physician manipulates diet in order to contain any turbulence at the mouth of the stomach. It is a way of ensuring that power continues to flow from the head downwards, rather than from the gut upwards. Diet, in short, is a considered response to the specific liaison between the stomach and the brain.<sup>86</sup>

Such a scenario casts the physician’s role in maintaining health in a new light. One of the quirks of the stomach-brain relationship is its asymmetry. Unlike the liver in Plato, which can be managed by messages from the rational part, the stomach lies beyond the control of the nerves that convey messages from the brain to the rest of the body. At the same time, the stomach easily communicates its own affections to the brain. By telling patients what to put in their mouths, the physician becomes an essential node in a network that determines not just gastric health but the health of the hegemonic principle, which is to say the mind. He becomes, as it were, the mind capable of controlling the stomach. The patient himself still matters, of course. But his appetitive desires fade into the background as the dietary expertise of the physician comes to the fore.

Does such expertise make the physician a doctor of the soul? The question turns out to be rather complicated. For despite the fact that Galen readily implicates the brain in the affections of the stomach, he is unwilling to locate the soul within the sympathetic network that dominates *On the Affected Parts*. Nor does he recognize sympathy between the soul and its corporeal home, that is, the brain. In other words, even as he elaborates a concept of medical sympathy to help account for mental disturbances, he seems to sidestep the concept of soul-body sympathy that gained ground in the Hellenistic period.<sup>87</sup>

<sup>85</sup> *Loc. Aff.* 4.2 (VIII 224–225 K).

<sup>86</sup> Such a liaison was assumed in Western medicine for centuries after Galen: see Siegel 1968, 372–377. For a contemporary analysis of the ‘brain-gut axis’, see E.A. Wilson 2004, 31–47 (who problematizes the idea of a single axial relationship between the two).

<sup>87</sup> The idea of sympathy could be eagerly embraced by a Middle Platonist: see Plut. *Mor.* 142E, 450A, 736A, 1096E.

The sharp contrast between one type of sympathy, enthusiastically embraced, and another, tacitly rejected, comes into particular relief in a passage from *On the Affected Parts*. Galen has just described the sympathetic relationship between the diaphragm and the respiratory organs. He goes on to introduce by way of analogy the involvement in diseases of the ribs and lungs of what he calls ‘the place containing the hegemonic principle of the soul in itself’ (τοῦ τὸ τῆς ψυχῆς ἡγεμονικὸν ἐν ἑαυτῷ περιέχοντος τόπου), where knowledge, judgment, and understanding are located.<sup>88</sup> Everyone knows, Galen says, that symptoms like delirium do not arise from the lungs directly. The experts recognize, rather, that the part where the hegemonic principle of the soul is located has suffered sympathetically with another part of the body, ‘and they try to show the manner of sympathy that agrees with their own doctrine’ (καὶ ζητοῦσιν γε τὸν τρόπον τῆς συμπαθείας ὁμολογοῦντα δεῖξαι τοῖς ἰδίοις δόγμασιν).<sup>89</sup> Presumably what Galen means by this is that the physicians and philosophers in question outline a connection between the primarily affected part and the place where they locate the hegemonic principle. That is to say, the doctrinal component bears more on the location of the ruling part than on the nature of sympathy itself.

Galen goes on, however, to problematize shared affection of another kind, not between two parts within the body, but between one part and the *archē* or the soul.

ἀλλ’ εἰ μὲν οὕτως ἐστὶ τὸ μόνιον τοῦτο τῆς ψυχῆς ἐν τῷ περιέχοντι σώματι, καθάπερ ἡμεῖς ἐν οἴκῳ τινί, τὴν μὲν ἀρχὴν ἂν ἴσως οὐδ’ ὑπονοήσασιν αὐτὸ βλάπτεσθαι τι πρὸς τοῦ χωρίου· θεασάμενοι δὲ βλαπτόμενον ἐζητήσαμεν ἂν ὅπως βλάπτεται· εἰ δ’ ὡς εἶδος τι τοῦ σώματός ἐστιν ἀχώριστον αὐτοῦ, συνεχωρήσαμεν ὑπὸ τῆς τοῦ δεδεδεγμένου σώματος ἀλλοιώσεως βλάπτεσθαι· διαστάντων δὲ τῶν φιλοσόφων περὶ αὐτοῦ, καὶ τῶν μὲν ὡς ἐν οἰκῆματι περιέχεσθαι φασκόντων αὐτὸ, τῶν δ’ ὡς εἶδος, ὅπως μὲν βλάπτεται, χαλεπὸν εὐρεῖν, ὅτι δὲ βλάπτεται, τῇ πείρᾳ μαθεῖν ἔστι.

(*Loc. Aff.* 2.10, VIII 127–128 K)

But if this part of the soul lies in the surrounding body just as we might stand in a house, then we probably should not imagine that the *archē* in itself is damaged at all through the part (where it is located). Once we had seen, though, that it does suffer damage, we might have investigated how it is damaged. But if [sc. the soul] as some form of the body is inseparable from it, we have conceded that it is damaged by an alteration of the body that has received it. But while the philosophers dispute about this, some saying that [sc. the soul] is enclosed as in a house, others that it is like a form, [we say] that *how* [sc. the *archē*] is damaged is difficult to find out, while the fact that it is damaged is learned by experience.

<sup>88</sup> *Loc. Aff.* 2.10 (VIII 126 K).

<sup>89</sup> *Ibid.* (VIII 127 K).

That the soul (or, here, the *archē*) is damaged by changes in the body is, in Galen's view, an empirical fact, and he goes on to adduce examples of the mind (*dianoia*) being impaired by direct injuries to the head. By contrast, it is difficult to know *how* the soul is harmed. Galen sketches two views that he presents as prominent in contemporary philosophical debates: that the soul resides in the body as one resides in a house and that the soul is some kind of form of the body. But although he implies that he finds it hard to reconcile the idea of the body as a mere house for the soul with the manifest damage done to the soul by the body, he rejects neither position out of hand.<sup>90</sup>

Galen's unwillingness to come down hard on one side of the issue of the relationship of the *archē* to the part where it is located is consistent with the agnosticism about the soul that he maintained to the very end of his career.<sup>91</sup> What I suggest is that it may be in part *because* of his uncertainty about the soul's corporeality that he does not describe the relationship of the soul to the body in terms of sympathy, even in the midst of a discussion awash in sympathy, *despite* his strong belief that the soul can be damaged by changes to the body.<sup>92</sup> For what we saw of the fragmentary Epicurean and Stoic evidence indicates that sympathy in the Hellenistic period was being strategically deployed by philosophers to prove or stress the physicality of the *psychē*. It is likely, then, that by Galen's time, the language of sympathy between the *sōma* and the *psychē* implied a commitment to the corporeality of the *psychē*—the very thing that Galen refrains from affirming or denying.<sup>93</sup>

<sup>90</sup> In fact, Galen comes close to an Aristotelian view of the soul as a form of the body at *QAM* 3 (IV 773–774 K = 37,3–38,1 Müller), although for 'form' he reads 'mixture', thereby mitigating the problem of how the body acts on the soul. In general, Galen appears committed to a Stoic notion of cause as bodily: see Hankinson 1991a, 203, 219; Gill 2010a, 54.

<sup>91</sup> Galen categorically restates his agnosticism about the nature of the soul—and, more specifically, whether it is immaterial and immortal—in the late works *On My Own Opinions* (*Prop. Plac.* 3 = 173, 13–18 Boudon-Millot and Pietrobelli) and *That the Faculties of the Soul Follow the Mixtures of the Body* (*QAM* 3, IV 775–776 K = 38,18–39,4 Müller). See also *Loc. Aff.* 3.10 (VIII 181 K). For a discussion of these and other relevant passages, see Hankinson 2006; see also Hankinson 1991a, 201–203; von Staden 2000, 112–116; Tieleman 2003b, 140–141; Donini 2008, 185–186.

<sup>92</sup> The language of sympathy, for example, is remarkably absent from *QAM*, the treatise most devoted to the relationship of soul and body (the verb in the title is *hepesthai*, 'to follow': the faculties of the soul 'follow' the mixtures of the body, an expression that keeps the nature of the interaction vague). On the language of body-soul interaction in the treatise, see Lloyd 1988, 33–39.

<sup>93</sup> See Alexander, *Mantissa* §3 (117,10–22 Bruns), where Alexander tries to account for sympathy without sacrificing the formal, incorporeal nature of the Aristotelian soul. His argument suggests that sympathy had come to entail a commitment to the corporeality of the soul.



It is impossible to know, of course, why Galen remained agnostic on the nature of the soul (although it is interesting that Descartes occupied a similar position). We might speculate, however, about his reluctance to deploy the soul-body sympathy of the philosophers. Whereas for the major philosophical schools, corporeality was an abstract concept and the inside of a human being was a rather ill-defined space, Galen knew the human body, its parts and its stuffs, with extraordinary intimacy. Perhaps it was this intimate knowledge that made it hard for him to accommodate the soul there. What is clear is that for him, sympathy was a technical concept, validated by the pathways beneath the skin that he had himself verified through dissection. The soul hovers beyond the boundaries of Galen's sympathetically webbed organism, tethered by a line he could map neither anatomically nor conceptually.

### *Conclusion*

Reading Galen on sympathetic affections of the brain, we need to keep in mind at least two different intellectual traditions, one medical and one more philosophical. By elaborating a concept of 'medical' sympathy, Galen confirms early Hippocratic models of the body as a self-communicating web of fluid and air while taking advantage of the networked models of the body developed in the wake of the dissections at Alexandria. In Galen, then, the abstract concept of the body as an interconnected unity acquires a particular texture and specificity. Moreover, by privileging the brain as a locus of sympathetic affection, Galen crosses into the territory of interaction between body and soul (or mind). Such territory had already been colonized by philosophers after Plato, philosophers equipped with their own concepts of sympathy, especially from the Hellenistic period on.

Galen leaves his own mark on this territory. His understanding of sympathy privileges the one-way movement of affections from the gut to the brain (and, to a lesser degree, the heart), affections that are cast as pathological. The pathology can be seen in terms of the old Platonic idea of psychic disease, where the appetites overrule the rational part. Yet despite Galen's own claims of fidelity to Plato, the implicit triangle that emerges in his account of sympathetic affections departs from the model of his master. Galen's triangle does a better job of accounting for how the mind is implicated in the dynamics of the lower order functions and, more specifically, the gut, while grounding the lower order functions firmly in the domain of the body. His triangle also favors the expertise of the physician. Still, even as Galen applies

anatomy to map the migration of affections to the brain, the soul's relationship to its physical location remains beyond his grasp. Transformed by the state of the body, even enslaved to it, the Galenic soul is nevertheless not sympathetic with it, its fragile but recalcitrant aloofness a figure of Galen's own resistance to ceding the possibility of escaping the coordinates of the body.

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