Healthcare and the Role of the Orthodox Church in Byzantium

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Introduction:

This project considers the healing role of the Orthodox Church in Byzantium in the absence of a modern, somewhat more secularized medical infrastructure. Additionally, I hope to establish the Byzantine conceptualization of disease and its pathogenesis as a catalyst for the Church’s involvement in healthcare. Along with a discussion of the relation between the Orthodox Church and medicine, I will also provide an overview of Byzantine medical techniques, technology and pharmacology as well as a description of available institutions and their systems of administration. In conjunction with a brief comparison between secular Islamic medicine and Byzantine medicine, this medico-historical survey will provide the context necessary to appreciate the extent of the Orthodox Church’s involvement. A note of caution: throughout this proposal, I will use the terms Byzantine and Orthodox interchangeably; for our purposes, they can be considered synonymous.

Background:

Quite plainly, this proposed project combines my two strongest interests: medicine and Byzantium. Early on in my education, I developed a fondness for both history and the basic sciences. As time went on, my appreciation for the two fields of study became more refined. By my junior year of high school, while my fascination with history still lacked focus, my interest in science had become a desire to study medicine. Once in college, I began fulfilling my premed requirements and decided to enroll in a course on ethnography in Greek and Roman classics. Shortly thereafter, I realized that although medicine remained my ultimate goal, the classics department was where I wanted to be.

So, one course led to another, and I quickly found myself declaring a major in Classical Civilizations. But, what began as an appreciation for Greco-Roman history and the ancient Mediterranean eventually became a much more focused fascination with the continuation of everything Greek and Roman in the guise of the Byzantine Empire. The catalyst for this change was Professor Andrew Ekonomou’s course on Byzantine history at Emory University. His course served as my introduction to the topic and led to my enrollment in Penn professor Robert Ousterhout’s undergraduate and graduate courses on Byzantine art history.

At first glance, a treatise on the role of religion in Byzantine healing may seem inapplicable and even esoteric to an audience composed primarily of medical students and healthcare professionals. Yes, I could argue that this project is relevant to the extent that it does exhibit grounding in medical science and the history of medicine. But, more importantly, I would argue that the greatest potential inherent in this project is its ability to enhance our understanding of the role religion and spirituality still play in our healthcare system today.

Despite the technical and technological progress made between now and the fall of Constantinople, religion still remains. As a result, many of the same attitudes persist, albeit in slightly different forms.
Although we live in an age of reason, we continue to cross our fingers and pray for health and happiness. In fact, one might argue that as long as disease and infirmity exist, religion will continue to play a role in healing. Put another way, until our own knowledge and understanding of the world become absolute, religion will remain an important aspect of everyday life.

So, as medical professionals intent on providing patient oriented care, we will all encounter the religious beliefs of others. And, regardless of our own beliefs, it is important that we understand the role the patient prefers religion to play in his or her healthcare. As such, with this paper, I hope to provide some insight into the relation between religion and medicine that still exists today.

**Description:**

In this paper, I will focus on the healthcare providing role of the Orthodox Church in the context of contemporary Byzantine medical techniques, technology and infrastructure.

I. Overview of Byzantine medical techniques and technology:

In order to provide some historical context, my paper will begin with an overview of medicine in Byzantium. Given the amount of time available for research, this treatment will consist of a relatively definitive condensation of the available literature. This portion of the paper will include details on medical techniques and technology as well as pharmacology and the extent of specialization available. For example, diagnostic procedures like uroscopy will be discussed. Also included will be a breakdown of the various types of medical professionals, from the common barber-surgeons to the classically trained physicians of Constantinople. Furthermore, I will address the presence, capacity and character of medical institutions such as hospitals, hospices and centers of learning. Additionally, as the evidence allows, I will provide concrete examples of individual physicians whose contribution to the medical literature of the time have survived as well as specific examples of healthcare institutions in the Empire. And finally, I will include an evaluation of payment for services rendered and to what extent healthcare was a private expense, government funded or both.

Baldwin, Barry. “Beyond the House Call: Doctors in Early Byzantine History and Politics.”  


Campbell, Sheila, Bert Hall and David Klausner, eds.  *Health, Disease and Healing in Medieval Culture.*  


II. The development of the hospital in Byzantium:

What role(s) did the first hospitals play? Were there different types of hospitals? Did particular hospitals specialize in a specific area of treatment? If so, were patients referred from one hospital to another in order to provide appropriate care? Were hospitals in Constantinople or Thessaloniki considered preferable to more provincial healthcare centers?

Was there a similar or related institution that preceded the hospital? How did the Byzantine hospital evolve over the course of the Empire’s history? Did the hospital originate in a military setting? If not, what were the immediate needs that necessitated the establishment of an institution to complement the individual physicians and surgeons already in existence?

Where were hospitals generally located? Were they primarily urban, rural or both? If hospitals existed in both settings, were there differences in size, capacity and administration between urban and rural?
Who staffed the hospitals? Were hospital clerics generally monks? Were hospital clerics devoted to a specific order or holy figure? In addition to the clerical staff, did hospitals also employ a variety of health professionals (i.e. nurses, surgeons, physicians, specialists, etc.)?

What were the various manifestations of the hospital in Byzantium? Did they act primarily as institutions for inpatient care? Did they serve as centers for assisted living? Did they act as academic centers? Were they considered a place where people simply went to die; in other words, were they primarily centers of palliative care? Did they act to quarantine individuals with contagious disease? In short, what was the primary role of the hospital? Did it also play a number of secondary roles? Were there different types of institutions with different primary functions included in the category of hospital?

In hospitals, were patients divided according to their illness or prescribed treatment? With that, was there a prototypical layout used for most Byzantine hospitals? Were patients tended to primarily by physicians? Or was there an important role played by other professionals (i.e. nurses, social workers, orderlies, etc.)? Was there a hierarchy among the hospital staff?

How were hospitals funded? Were they state-run? Were they run solely by the Church and thus reliant upon private contributions as well as contributions from the emperor? Which individuals acted as hospitals administrators? Were they affiliated with the Orthodox Church? Were they physicians? Or, were they simply well-situated bureaucrats appointed by the emperor or another more provincial power? Were hospital patients charged a fee? If so, were they charged by the institution or by individual medical practitioners?

How did monasticism contribute to the development and evolution of the Byzantine hospital? As centers of learning, did they play an important role in medical education and application? Did monasteries and their monks play an active role in the provision of healthcare? If so, in what capacity did they function? Did they help staff and maintain facilities such as hospitals and centers for assisted living? Were hospitals built near a monastery or as part of a monastic complex? As somewhat autonomous entities, were monasteries and their monks free to develop their own style of healthcare? If so, how did the healthcare and hospitals affiliated with Orthodox monasticism differ from other non-monastic manifestations?

Were hospitals associated with other charitable organizations (i.e. orphanages, homeless shelters, etc.)? If so, did hospitals typically include such accommodations for the destitute?

What role did what we would today call non-traditional medicine play in the hospital setting? Were icons, relics or holy men and women typically relied upon in the hospital setting?

Which members of Byzantine society comprised the typical clientele of the imperial hospital? Were they civil servants? Were they soldiers? Were they poor? Were they rich? Or, did all strata of the Byzantine population seek medical care in these hospitals? Was practice of the Orthodox faith a prerequisite for treatment in one of these Byzantine hospitals? Were non-Christians or members of heretical sects turned away? Were the physicians staffing these hospitals predominantly Orthodox
Christian? Were there Muslim, Jewish or other religiously affiliated professionals associated with Byzantine hospitals?

How did Islamic hospitals compare to their Byzantine counterparts?

Baldwin, Barry. “Beyond the House Call: Doctors in Early Byzantine History and Politics.”


### III. The Orthodox Byzantine psyche and conceptualization of illness:

How did the Byzantines conceptualize disease and its pathogenesis? To what extent was the Byzantine understanding of disease processes dictated by their Orthodox faith? To what extent was their understanding inherited from Greco-Roman religious cult and paganism? How did the professional view of disease differ from that of the medical layman?

Did Byzantines consider evil spirits to be a principal cause of illness and infirmity? More specifically, was direct demonic possession considered necessary to cause disease? Could disease be attributed to benign spirits? Were primarily chronic illnesses rather than acute diseases considered the result of demonic possession? To what did contemporary Byzantines attribute their chronic illnesses to demonic possession? Was the belief in demonic possession as the cause of chronic illness subscribed to by secular medical practitioners? Did religiously affiliated medical practitioners share this belief? Or, was this belief held primarily by the patient population lacking medical education?
How did mental illness relate to the notion of demonic possession and to what extent was exorcism considered an appropriate treatment for chronic and/or mental illness? Which individuals were considered qualified to perform exorcisms? Did individual exorcisms have to be sanctioned by local Church leaders? Was clerical opinion necessary to make the diagnosis of demonic possession? Were treatments other than exorcism deemed appropriate? Was secular treatment used in concert with exorcism?

How did the Byzantine conception of the health of the soul relate to their understanding of mental and physical wellbeing? Was a healthy soul a prerequisite for a healthy mind and body? Could the former be mutually exclusive of the latter? In other words, could you have a healthy mind and body without a healthy soul? Conversely, could you have an ill mind or body with a healthy soul?

How did the view of demonic possession, the health of the soul and chronic illness affect treatment? Were secular approaches used solely for acute illnesses? Were chronic illnesses treated only by spiritual means? Were non-Christian, non-traditional (i.e. magical) approaches ever used? To what extent was magic deemed an appropriate means of treatment? Did physicians use magic or items associated with magic (i.e. amulets) because they themselves believed in their efficacy or because their patients did?

How did the Byzantine understanding of disease and its causes invite the involvement of the Orthodox Church? If physical and mental wellbeing was believed to be a reflection of spiritual wellbeing, was the role of the Church in the administration of healthcare inevitable? Was the involvement of religion a new phenomenon, or are there examples of pre-Christian religious healing in the Roman Empire?

How did the Islamic conceptualization of disease and its pathogenesis compare to that of the Byzantine? Specifically, how did Islamic medical professionals approach the question of chronic and/or mental illness? Did they subscribe to any similar belief system regarding demonic possession?


Pioreschi, Plinio. A History of Medicine: Vol. IV, Byzantine and Islamic Medicine. New York:
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**IV. Miracles, saints (and holy men/women) and healing in the Eastern Orthodox traditions:**

Miracles, particularly of healing, play an important role in the Eastern Orthodox tradition. Incidents of healing are an essential criterion for the canonization of saints in the Orthodox Church. As such, what role did saints play in the administration of healthcare? How does the hagiographical tradition depict the relationship between saints and secular medical professionals? Was this relationship one of antagonism? Or, did physicians and saints work in concert with one another for the benefit of the patient? By what means did saints perform their miracles of healing? Did healing require physical contact, general prayer or specific Orthodox incantations? Did saints require other intercessors, or could they channel the divine power of healing directly? Was this a strenuous process on the part of the saint and/or his/her patient?

Although almost every saint is associated with healing, some are actually linked to medical practice in a more professional sense. Examples of physician-saints include Samson the Hospitable as well as the fraternal saints Damian and Cosmas. What were the characteristics common amongst these physician-saints? Did they reflect a professional ideal? And, more specifically, as saints already associated with the healing arts, were they sought after by the ill and infirm? In other words, did they and their relics and icons play a preeminent role in spiritual healing? Or, did they simply act as the patron saints of the living, working medical professionals throughout the Empire? To tie this to the present, it might also be interesting to consider the current criteria for canonization and the curriculum vitae of the Orthodox physician-saints of the modern era.

Pilgrimage was an important aspect of worship in the Orthodox Church, and Christians regularly visited shrines, tombs and other holy sites associated with particular religious figures and their relics. Oftentimes, as part of this religious experience, pilgrims would take with them either stamped tokens or ampullae filled with dirt from the site, holy oil or some other similar substance. For some, they may have served as simple souvenirs, but for most, these items were imbued with the power of the associated holy figure. So, what role, if any, did holy sites and their associated ‘souvenirs’ play in the administration of healthcare? If these tokens could be used as a means of healing, was contact with the actual object necessary for effective use? Did the holy substance (i.e. ground token, dirt, oil, etc.) need to be ingested to perform its healing function? For superficial injury, could these holy substances be
applied directly to the affected area? To what extent is the practice of direct application of these tokens influenced by the religious record of Christ’s use of saliva or the laying on of hands to cure disease?

Monasticism was and still is an important element of Orthodox Christianity. As centers of learning and as somewhat autonomous entities, what role, if any, did monasteries and monastic communities play in Byzantine healthcare? If monasteries and their monks played an active role in the provision of medical care, in what capacity did they function? Did they staff and maintain facilities such as hospitals or centers for assisted living? Could monks act as physicians or surgeons? What relationship existed, if any, between monks and secular medical professionals? Was there a standing dialogue between secular and religious healers, which would allow referrals between the two groups?

As individuals who by way of prayer, meditation and social isolation were imbued with the power of the Holy Spirit, holy men and women were an important albeit marginalized element of Byzantine society. With such power, in what capacity, if any, did these individuals take part in the provision of healing? Also, practically speaking, since these men and women were more accessible than actual saints, did they play a more prominent role in healing? Did physicians and other secular medical professionals refer their patients to these holy healers? What was the professional relationship between these holy men and women and medical professionals?

What role, if any, did non-monastic clergymen play in the administration of healthcare? Were they caregivers? Were they administrators? In regards to healing, what relationship existed between the non-monastic clergy and both monasteries and secular medical professionals? Did these clergymen play an active healing role amongst their congregations? Or, did they refer individuals to monastic communities or secular professionals?

What does it mean to have healing as an expected function of a religion? Is this a universal aspect of all organized religion? Or, is it primarily associated with Judeo-Christian religion? Where does secular healing end and spiritual healing begin? Are the two mutually exclusive in the case of Byzantium? Were they generally antagonistic, or was there a sense of collegiality among the various types of healers? Were secular and religious treatments interchangeable, or did one supersede the other in certain cases? Was there any overlap among classically trained physicians and religious figures? In other words, could monks or other holy figures train as physicians, and could medical professionals include religious healing in their repertoire of medical expertise?


Harakas, Stanley S. Health and Medicine in the Eastern Orthodox Tradition: Faith, Liturgy and

Harvey, Susan A. “Physicians and Ascetics in John of Ephesus: An Expedient Alliance.”


V. The role of Orthodox iconography in healing:

What role, if any, did relics play in the administration of healthcare? If relics played an important role, how were they used? How were they perceived as tools for healing by patients? How were they perceived by physicians? How were they perceived by other medical professionals? If used by physicians, were they used because medical professionals believed in their effectiveness or simply because of the possibility of a placebo effect? Were they used in concert with more ‘traditional’ applications of healthcare?

Like relics, icons acted as media through which the devout could commune and even interact with the holy figure depicted. In this way, both could be likened to portals to the divine dimension, providing individual access to saints, Christ and the Mother of God. As such, what role, if any, did icons play in healing? Was this role comparable to that played by relics? Was one considered more effective than the other?
For both relics and icons, were associations with particular saints or holy figures more important? For instance, was an icon of a physician-saint deemed more effective or more appropriate than one of Saint George? Moreover, were icons of or relics associated with Christ or the Virgin Mary considered more potent than those of lesser holy figures?

Practically speaking, how were icons and relics used for healing? Did they simply facilitate communion with a particular holy figure? Was physical contact with the relic or icon an important aspect of the healing process? Was ingestion of any part or product of a relic or icon necessary to access the healing power of the divine? Was the vocalization of prayers essential? Or, could prayers remain silent? Was communal prayer with the relic or icon among patient, physician and family necessary?


Pentcheva, Bissera V. *The Sensual Icon: Space, Ritual, and the Senses in Byzantium*. University Park:


I will conclude with my own thoughts regarding the parallels that can be drawn between the association of religion and medicine then and now. In short, I will take a brief look at how medicine today is influenced by religion. This portion would be based on my own perspective and experience as a medical student here at the University of Kansas. In this way, I will direct the reader’s attention towards a consideration of the dynamic stasis (or static dynamism) of medicine and its relation to religion.

**Timeline:**

My time will be spent among my apartment, the Clendening Library and the libraries on the Lawrence Campus. Although I will carry out a great deal of my research on the two campuses, I will spend the majority of my time working from home. In addition to my review of the literature, I will also set aside time to visit two Greek Orthodox churches in the area: St Dionysios in Overland Park, KS and Annunciation in Kansas City, MO. Below is a working timeline for my project:

**May 27th to June 6th-**Research section I and prepare a summary of the pertinent information.

**June 7th to June 16th-**Research section II and prepare a summary of the pertinent information.

**June 17th to June 26th-**Research section III and prepare a summary of the pertinent information.

**June 27th to July 6th-**Research section IV and prepare a summary of the pertinent information (Visit St Dionysios and meet with a church representative).

**June July 7th to July 17th-**Research section V and prepare a summary of the pertinent information (Visit Annunciation and meet with a church representative).

**July 18th to July 21st-**Outline the paper.

**July 22nd to July 25th-**Write a preliminary draft of the paper.

**July 26th to July 28th-**Make revisions and produce a polished draft.
Post-July 28th-Make additional revisions if needed.

**Methods:**

Most of my project will consist of literature review. As such, to complete my project, I will take advantage of the resources made available by the University of Kansas libraries. In addition to the collection of books and journals on both campuses, I will rely heavily on the online journal database JSTOR as well as interlibrary loan whenever necessary. Because I have access to a relatively reliable vehicle, I do not foresee any obstacles to my use of campus resources.

**Contacts:**

In addition to my faculty mentor, my primary contacts in this endeavor will be Dr. Andrew Ekonomou, PhD, a former lecturer on Byzantine history and literature at Emory University and Dr. Robert Ousterhout, PhD, a professor of Byzantine art and architectural history at the University of Pennsylvania.

Dr. Andrew Ekonomou (aekonomou@thelambrosfirm.com)

Dr. Robert Ousterhout (ousterob@sas.upenn.edu)

**Budget:**

My expenses will consist of the cost of transportation between Kansas City and Lawrence as well as the cost of transportation to and from the Annunciation and St Dionysios Greek Orthodox Christian Churches in Kansas City.