Necrotic and Purulent Infections in the Ancient and Early Christian World

by

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Abstract

This thesis focuses on the startling ways in which a significant number of early Christian hagiographies feature saints with rotting flesh and suppurative wounds. It explores this phenomenon first by considering ancient medical understandings of diseases such as phagedenic ulcers, gangrene, and the production of pus as evidence of humoural imbalances requiring medical intervention. Then it considers reasons why early Christians developed more positive attitudes regarding these conditions. These include associating rotting flesh with superior spiritual fortitude. They also include non-theological reasons for this phenomenon. This thesis hypothesizes that early Christians also enjoyed looking at rotting saints out of a voyeuristic desire to gaze upon otherwise hidden bodies. Furthermore, it argues that Christians enjoyed exposing themselves to feelings of fear and anxiety because of the neurochemical dimensions the experience stimulated.
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Necrotic and Purulent Infections in the Ancient and Early Christian World

This thesis, *Necrotic and Purulent Infections in the Ancient and Early Christian World*, is an examination of the socio-cultural roles and complex meanings attributed to bodies that have suffered disfigurement from traumatic wounds and infections in early Christian and ancient medical literature. This thesis will argue that early Christian concepts of the significance of the human body, its physical state, and its ability to suffer provided novel, innovative and more positive options for people living with disfigurements and disabilities due to decaying and damaged body parts. While some aspects of these new perspectives towards the body were inspired by the lives of Christian saints, other aspects were continuous with a pre-existing socio-cultural framework in the ancient world. I contend that some early Christians reimagined the relationship between the self and the body so that instead of perceiving their damaged bodies as medical problems in need of correction, sick and injured saints could form new identities as holy rotting bodies.

Furthermore, this thesis will argue that an early Christian ideological focus on the importance of imitating Christ and the self-identification of Christians as a community of sufferers allowed some people and groups to develop a more positive evaluation of the meaning, function, and symbolism of rotting flesh, maggot infested wounds, and foul abscesses that ravaged the holy bodies of saints.\(^1\) From this research, I intend to demonstrate

\[^1\] The meaning of illness in this context should be understood as the symbolic properties attributed to diseases characterized by rotting flesh. The function of the illness, however, is defined as the way in which necrotic infections were used by saints to accomplish goals, such as transforming the corporeal body or visually demonstrating their ability to suffer through mortifying injuries.
that some early Christians were engaging with the meaning and function of illness in a way that allowed them to see grotesque abscesses and festering flesh as divine enhancements which elevated corporeal and spiritual status. Thus, the saints’ abilities to suffer with equanimity and overcome their physical pain was an indication that their corporeal bodies were strengthened by God’s divine power. This is in contradiction to ancient medical schemas which portray necrosis and pus as being caused by an imbalance of humours and fluids into or away from inflicted body parts. Based on this understanding of rotting flesh ancient physicians predominantly viewed necrotic infections as harmful diseases warranting medical treatment.

Contemporary scholarship has made significant advancements in the exploration of illnesses in antiquity and in the study of the abilities of early Christian saints to use illness as a form of asceticism and spiritual expression. This thesis will go beyond current scholarship on illness in antiquity by narrowing its focus to specialize in accounts of illness and disability involving rotting flesh, decaying bones, necrosis, and purulent infections. It will also contend that rotting flesh is important for the same reason Theodoret suggested people were drawn to Saint Symeon’s festering foot; the shocking nature of rotting flesh demanded their attention and continues to call out to us today. Like the unfortunate stars of now bygone

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2 This thesis will use the terms corporeal nature and divine nature throughout this text. By corporeal or bodily nature this thesis is referring to the flesh and bones of a person, corruptible, impermanent, and capable of becoming diseased and dying. By divine or spiritual nature/soul this thesis is referring to the Christian theology that dictates that all humans have an eternal soul, from birth, that came from and is connected to God. By cultivating one’s divine nature one can fortify themselves spiritually which can result in superhuman abilities including the power to perform miracles, communicate with God, and transcend “normal” corporeal limits.

3 While all necrotic and purulent infections are negative the presence of pus could be interpreted as positive in the sense that pus could be implemented as a method for cleaning a wound or draining the body of bad humours. This category of pus was referred to as “laudable pus” and even though it could produce positive outcomes it should be noted that laudable pus was still indicative of the presence of a humoural imbalance or a traumatic wound.
Freak Shows, the rotting flesh described in ancient medical literature and early Christian hagiographical texts also fulfills a voyeuristic, human compulsion to look at the strange bodies of others. This thesis’ narrowed focus on decay and infection will allow readers to look at ancient bodies that existed on the periphery of already marginalized groups. If we can learn about normative society via the marginalized then focusing our lens further should yield new insights into the lives of the ancients, with possible applications for current social paradigms and lines of inquiry.

In this vein, this thesis will be organized into three main sections. First, it outlines ancient medical evidence and ancient social roles available to people with rotting flesh with a focus on case studies of Hippocrates and Galen regarding rot, suppuration, and gangrene. The second section examines the role rotting flesh played in the lives of saints and early Christians who flocked to witness their strange beauty. It sets out to determine the different ways in which saints used their diseased flesh including its pedagogical and transformative abilities. The third section focuses on possible reasons why some early Christians were drawn to the deformed and diseased bodies of saints. It does so by exploring David Frankfurter’s arguments regarding the voyeuristic compulsion people have to look at otherwise hidden bodies, Patricia Cox-Miller’s notion of visceral seeing, the similarities between early Christians viewing rotten, deformed bodies of saints and modern interests in witnessing the gore and violence in horror films, and Daniel Lord Smail’s conception of training one’s brain to release pleasurable chemicals in the presence of a given trigger, in this case rotting flesh.

The first chapter of this thesis explores socio-cultural aspects of and medical approaches to treating disability and deformity associated with necrotic and purulent
infections in the ancient world. The medical literature and bio-archaeological data presented in this chapter explains which specific forms of microbial organisms were endemic to the Graeco-Roman world and capable of causing severe necrotic infections, skin disorders and bone diseases. Drawing from a vast collection of ancient medical literature this thesis provides insights into ancient beliefs and practices towards rotting bodies from physicians such as Hippocrates and Galen. These sources will help to establish continuity over the centuries regarding how the ancients understood the body and disease and how rotting flesh was medically treated. It also provides bio-archaeological evidence to substantiate anecdotal textual documentation with physical osteological and microbial data of necrotic infections to establish the prevalence of necrosis in the ancient world. To accurately interpret the complex socio-cultural and medical aspects of this project, this chapter relies heavily on primary source material. In so doing, this thesis endeavors to avoid retrospective diagnosis, that is to say, it relies on ancient terminology and understandings of rotting flesh and avoids using modern knowledge, treatment and classification of diseases related to necrosis and suppuration, which can read modern biases into ancient lives.

On this matter, Piers D. Mitchell’s article, “Retrospective Diagnosis and the Use of Historical Texts for Investigating Disease in the Past,” addresses certain hazards associated with the analysis of texts that provide evidence of diseases in past populations. Mitchell notes that “ancient texts were typically written from the perspective of that civilization” and different belief systems may lead to alternate descriptions of diseases. As such, it is of value
to read ancient texts in the context of their own civilization and not from a modern medical perspective. It is for this reason that this thesis will attempt to adhere to ancient understandings of rotting flesh relying on ancient terminology to express its findings with the words of the ancients themselves. Mitchell goes on to assert that:

It is clear that retrospective diagnosis cannot be attempted for a large proportion of past disease descriptions found in written sources where the evidence is simply not specific or sufficiently detailed. It is no longer acceptable to read of an epidemic in a past army, without any symptoms being described, and just guess that it might have been cholera or typhoid.\(^5\)

For this reason, and those previously mentioned, this thesis will rely solely on the words of the ancients, their contemporary understanding of the body and disease and their definitions of necrotic and purulent infections. Lastly, this chapter will present four broad categories of social roles, (Hired Entertainer, Skilled Trade Worker, Beggar/Outcast and Scapegoat) that would have been available to diseased and disabled people based on an examination of historical accounts of people who lived with deformities in ancient Greece and Rome.

Following the first chapter’s medical perspective, Chapter Two focuses specifically on the lives of saints who suffered with rotting limbs and festering sores to examine how early Christianity provided neoteric perceptions of the human body and the social value of the sick. To this end, this chapter examines hagiographical evidence of sick and injured saints and their significance in early Christian attitudes towards decaying flesh to showcase the extreme suffering some saints endured through their intentional cultivation of necrotic infections. As such, Chapter Two argues that a careful reading of the lives of the saints indicates that some early Christians were involved in producing a more positive evaluation of illness, disability,
disfigurement, and suffering, in tandem with new constructions of the human body as the saints transformed their corporeal bodies with rotting flesh and oozing sores. Early Christian hagiographies provided exciting new narratives for the sick, where a person’s ability to suffer in this world was not only a positive characteristic but a potential source of spiritual power. The hagiographical genre of early Christian literature was useful for functions beyond entertaining via the enticing depictions of rotting holy bodies and eroticism described within it. The popularity of these graphic accounts of decaying and oozing bodies made the Lives of saints powerful mediums through which Christian writers espoused profound religious knowledge and gained influence. Successful hagiographers could produce popular literature that reaffirmed fundamental theological concepts and often used the popularity and authority of the saints to convey personal ideologies and new models of Christian identity and community. As Robert Doran notes, in *The Lives of Symeon Stylites*, Theodoret’s *Historia Religiosa* served several purposes and “His explicit contrast of his heroes with those of Greek drama and epic as well as with philosophers’ aims at setting new models for Christians to imitate and admire.” Mary-Ann Stouck, in *Medieval Saints: A Reader*, recognizes that the conventionality of hagiography made it an ideal vehicle for teaching. Patricia Cox Miller also touches on this theme in “Visceral Seeing: The Holy Body in Late Ancient Christianity,” where she remarks that Athanasius’ *Life of St. Antony* contained numerous miracle stories “that conveyed a new sense of what counted as religious knowledge.” As such, the hagiographer

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6 The term “Lives” is a broad term used to refer to hagiographical texts that describe the lives of saints.
influenced the ways in which Christians came to believe the saints lived and the theological lessons they expounded. In this vein, Judith Perkins, in *The Suffering Self: Pain and Narrative Representation in the Early Christian Era*, states that, frequently, a “‘Life’ was the means by which the author could assert a superior authority.”

One of these new concepts was the idea that illness could be interpreted as a marker of superior morality.

This topic was common to the later Roman world and depicted in various letters, rules, treatise and other literary sources. Andrew Crislip, in *Thorns in the Flesh: Illness and Sanctity in Late Ancient Christianity*, writes that “The debate was grounded in the widespread influence of the types of ascetic models promoted by monastic hagiography, as well as the complementarities and tensions between illness and asceticism.” Subsequently, hagiographers could influence how their readers came to understand the saints and the theological lessons the saints and hagiographers espoused. Crislip compares the hagiographies of Antony and Syncletica to illuminate how texts such as the *Life of Antony* were able to influence how other hagiographers portrayed the ascetic practices and illnesses of many subsequent saints. He elucidates how both texts have a “largely conventional bibliographical introduction,” including sayings and teachings from the saint, and culminating in a death narrative. Moreover, he writes:

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11 This shift in attitude may have derived in part from the notion that illness was sometimes caused by demons and the visibility of the saints infested wounds and blackened flesh were symbolic of the battle of good and evil taking place, with the saint’s body acting as the battleground. Additionally, some Christians believed that saints could suffer for the collective sins of all of humanity and thus their physical suffer was a positive indication of the saint’s capability to pay the debt humanity owes due to its inherited Original Sin.

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[Syncletica], like Antony, never took to the life of the world but always inclined towards asceticism. Also like Antony, she lost her parents as a young adult, and she was left in charge of a sister, at which point she liquidated her estate for the benefit of the poor and took up the monastic life.\textsuperscript{13}

Crislip goes on to explore her sayings and teachings from other texts such as the \textit{Apophthegmata Patrum} concluding that “Syncletica’s own teachings undermine her image as an unwavering advocate of bodily mortifications and austere asceticism, so fostered by her hagiographer’s focus on her asceticism and sufferings.”\textsuperscript{14} For instance, her hagiography highlights her physical suffering from a cancerous black abscess in her mandible that spreads throughout her face and mouth forcing her to stop eating and speaking all together. This extreme asceticism is contradictory to Syncletica’s teachings that one must find balance in asceticism and not fast too long or too much. Moreover, she contends that extreme asceticism is the result of arrogance and a nun should be rebuked for engaging in such behavior. She says:

If these thoughts come to the mind of a woman leading an anchorite’s life, she must enter a community; and she must be forced to eat even twice a day if, at least, she is caught up in this illness through an excess of discipline. And she should be censured as vigorously as someone who is doing nothing important.\textsuperscript{15}

This may suggest that the author of the hagiography has altered Syncletica’s teachings in order to imitate Athanasius’ model for Antony’s life, which had already proven to be a popular model for hagiographical texts. This case is representative of how some hagiographers, like Athanasius, could influence how other hagiographers wrote about the lives of saints and how they defined what “proper” ascetic practice was for their readers. Beyond how ancient authors

\textsuperscript{13} Crislip, \textit{Thorns in the Flesh}, 101.
\textsuperscript{14} Ibid., 104-105.
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wrote about saints, how the audience viewed the bodies of saints was also important. In this vein, hagiographical texts were crafted in a way that recreated the experience of seeing these rotting saints in the flesh with literary devices that could trigger profound sensory experiences.¹⁶

The theological nature of hagiographies, along with competing early Christian understandings of the body, often related to competing interpretations of bigger theological points. Furthermore, the prescriptive nature of hagiographies allowed their authors opportunities to influence how people viewed the holy bodies of saints and how they understood specific theological concepts. Perkins contends that a culture’s self-perceived reality is shaped via their own systems of representation that construct that culture’s way of being in the world; and in the case of early Christians, their reality was extrapolated from representations that focused on pain, suffering, and the glory of death.¹⁷ Perkins goes on to ask:

For if Christians were not writing texts focused on suffering, and passing these around from community to community to buttress their adherents’ resolve to endure systematic and unavoidable persecution, why were they constructing such a subject? And why would the representation of such a subject succeed in attracting adherents in the Greco-Roman world?¹⁸

Thus, careful readings of hagiographies offer modern scholars insights into the practices, theological beliefs, and debates in the early Christian world including topics such as the conflict

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¹⁶ These literary devices, which will be elaborated on in Chapter Three, were effective whether the hagiography was being read silently or out loud. Since many people at this time were illiterate or did not have access to books these texts often were read aloud to groups of listeners.

¹⁷ Perkins, The Suffering Self, 15.

¹⁸ Ibid., 16-17.
of desires between the body and the soul, whether saints were merely conduits for God’s power or imbued with their own divine strength and the relationship between sickness and sin.

To further explore these topics, Perkins evokes the advice of Ramsay MacMullen in *Christianizing the Roman Empire* which dictates that in order to avoid imprinting one’s own modern assumptions about the ancient world onto the lives of early Christians, the focus ought to be on “what contemporaries [of early Christians] focused on or considered significant about this new cult.”19 Following this suggestion and an analysis of contemporary Christian and non-Christian documents it becomes clear that one of the most prominent characteristics of the early Christian community (and what attracted many Romans to convert) was the perception and self-identification of Christians as sufferers.20 This thesis contends, in part, that it was because of this desire to be identified as “sufferers for Christ” that many saints willingly caused their bodies to endure necrotic ulcers and gangrenous wounds. Many of these texts also expound theologies that focus on sin and purification of the soul, the body as a battle-ground for good and evil, and the ability of the spiritually powerful to suffer through the flesh for the good of humanity. These topics are significant as they help to establish the fundamental ideologies surrounding the ideal nature of the body and soul and the role of rotting diseases in ancient societies.

Furthermore, it is helpful to recall that early Christians read hagiographical texts in a manner distinctly different from how modern readers read these texts today. The aforementioned method of visceral seeing allowed the reader to visualize the saint’s rotting

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19 Ibid., 17.
20 Ibid., 18.
body on a deeply realistic level. Miller, in her book *The Corporeal Imagination: Signifying the Holy in Late Ancient Christianity*, states that “‘Corporeal imagination’ also designates textual images whose ocular and affective immediacy contributes to, or even creates, the religious significance of the thing that is their focus.”21 This is similar to the way textual images of rotting bodies of saints contributed to the image of saints as being transfigured by disease and divinely empowered through their suffering. The method by which hagiographical texts were able to inspire such reactions from their readers is summarized by Miller who writes that “They are narrative pictorial strategies that seduce the reader into forgetting that these are images in texts.”22 As such, hagiographical texts, enticed Christian readers into visualizing decaying and festering bodies of saints while providing profound sensory experiences and the opportunity to gaze upon otherwise hidden holy bodies. As Miller has noted, “The acts of the saints were performed spectacles enacted to entice the gaze of bystanders.”23 I contend that in a similar manner the hagiographies of rotting saints and their extreme ascetic practices enticed the literary gaze of readers and the voyeuristic bystander alike, due to writers intending to reproduce the lived experiences of first hand viewing.

The ability these texts had to expose the holy bodies of saints is demonstrated in hagiographical descriptions of the bodies of saints who lived in monasteries removed from the public sphere or those described by Palladius in his desert reporting of ascetic saints documented in his work *The Lausiac History of Palladius*. Consequently, hagiographies could

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22 Patricia Cox Miller, “Visceral Seeing,” 403.
offer their readers a similar experience and level of enjoyment as being in the audience at a martyr’s execution or of gazing upon rotting flesh in living colour. Therefore, reading about incidents, such as Symeon showing his purulent foot ulcer to a confused man and the conversion of the Arab King after he saw a maggot from Symeon’s thigh turn into a pearl, could have been as meaningful and enlightening as witnessing the live event.

Focusing the lens further, the third chapter examines the significance of the act of seeing, voyeurism, and neuro-biology in response to stimuli from viewing or imagining the rotting bodies of saints. This final chapter explores the role of voyeurism in the ancient world and the desire to look upon the bodies of disfigured saints in tandem with the argument that biology, evolution and brain chemistry all play a role in why some Christians enjoyed seeing the rotting bodies of saints. Thus, Chapter Three investigates the social phenomenon of the gathering of people to view the rotting flesh of saints. The act of looking, and the voyeuristic desire to look at the exposed bodies of others, is of particular interest throughout this thesis. Miller has published several articles on the act of looking at the bodies of saints and has suggested that there may have existed a perceptual construct embedded in how early theologians wrote and spoke about ascetic lifestyles that allowed some early Christians to perceive ascetic Christian saints as “performing artists enacting the spiritual body in the here-and-now.” Beyond Miller, this chapter will draw from David Frankfurter’s argument, in “Martyrology and the Prurient Gaze,” that sado-erotic violence, as part of the spectacle of the execution of the martyrs, allowed the audience to piously enjoy watching the death of the martyr without having to admit their less than virtuous enjoyment of witnessing acts of

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Miller, “Desert Asceticism,” 137.
violence and sexuality. This act of looking satisfied a voyeuristic desire to see exposed holy bodies. The pan-human phenomena of voyeurism described by Miller and Frankfurter also applies to the interest Christians had in witnessing the gore of mortified bodies and will be put forward as a reason why many Christians, and non-Christians, ventured to look upon the bodies of the sick and self-mutilating saints. By incorporating Daniel Lord Smail’s conception of deep history and the combined role of biology, neurophysiology, history and culture, from his book *On Deep History and the Brain*, this chapter argues that early Christians engaged in acts of voyeurism because they had trained their brains with repetitive behaviors and literary triggers to elicit feelings of excitement and danger. In this way, Smail offers insight into the biological and cultural stimulants that caused some early Christians to enjoy looking at fetid flesh, phagedenic infection and pus oozing sores. This thesis suggests that this desire is not unlike modern enthusiasm for watching graphic horror movies and slasher films. In the same way that people to this day enjoy seeing mangled and deformed bodies in horror films, so too did early Christians flock to see the grotesque bodies and ghastly wounds of saints. But by sanctifying this experience via theological discourse, they could enjoy these experiences without owning their pleasure. It is in this way, Frankfurter argues, that Christians could disavow themselves from the scandalous aspects of their behavior by focusing on the pious elements of such actions. As a result, Christians could relish in the suffering of their saints in the same way that God is pleased by the testing of his subjects.

Ultimately, this thesis seeks to gain unique insight into the medical, cultural, and religious elements pertaining to what it meant to be a person living with a rotting body from 500 BCE – 500 CE. This will be accomplished via analysis and comparison of ancient medical
case studies and hagiographical descriptions of decaying saints. The intention of this thesis is to examine what qualities were characteristic of early Christianity that allowed some of its followers to view rotten flesh as miraculous and exciting, positively reframing what it meant to live with mortifying diseases, in a world that was otherwise developing methods for treating and removing necrotic infections.
Chapter One: Textual and Physical Evidence of Necrotic Infections in Ancient Medicine from a Historical and Biological Perspective

This chapter examines pus and necrosis in the context of ancient theories of health and humoural balance. It draws from the Hippocratic and Galen Corpuses to determine the prevalence of rotting flesh, diagnostic techniques and methods of treatment pertaining to necrotic and purulent infections in the ancient Graeco-Roman world from 500 BCE to 200 CE. It includes an analysis of primary source textual evidence of case studies that describe people living with and receiving treatment for severe necrotic and purulent infections including but not limited to gangrene, phagedenic ulcers, abscesses, necrotizing bone and tissue infections, and suppurative skin infections. Aside from textual evidence this chapter also draws from osteological Paleolithic evidence to substantiate the fact that necrotic microorganism existed in the ancient world. Due to the nature of these infections primarily affecting soft tissue most evidence is lost as the body decays; however, in some instances the damage from the infection can impact bone and leave physical evidence that is still detectable today. Because of limited physical evidence this chapter encompasses a wider timeframe, analyzing evidence dating from 3000 BCE onward. Finally, this chapter explores the socio-cultural implications of living with a necrotic or purulent infection by examining possible social roles that people adopted, or were forced into, while suffering from the disabling and stigmatizing effects of these infections.
Primary sources included in the chapter’s analysis of ancient medical literature include texts from the Hippocratic and Galenic Corpuses. These texts are useful not only for descriptions of ancient diseases and case histories, they also offer insight into archaic conceptions of diagnosis and prognosis of disease and how ancient physicians explained natural phenomenon such as the production of pus. For instance, in *Nutriment* the Hippocratic writer describes the process of the formation of pus as coming from crushed flesh and that blood and liquid mix to form purulent humours. This conception is opposed to modern science’s understanding that the presence of pus stems from an infection and that the formation of pus is the result of a build up of dead leukocytes (*macrophages and neutrophils*) from the body’s immune system that consume and destroy infectious microorganisms. On this, Mirko D. Grmek in *Diseases in the Ancient Greek World* writes, “In short, the opinions in the Hippocratic corpus are that pus is formed either from decaying battered flesh or extravasated blood or, more rarely, from the aqueous humor, or even from

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25 Hippocrates was born circa 460 BCE in Cos, Greece and died around 371 BCE. He was a famous physician and medical teacher who came to be known as the Father of Medicine for the formative role he played in ancient medicine. His approach to the body and health was based on the concept of the humoural system and put forward that disease was the result of an imbalance of the humours. The Hippocratic Corpus is a collection of texts composed by Hippocrates as well as other Hippocratic writers who published under his name pseudonymously. The extant corpus consists of roughly sixty works written in Ionic Greek, although the total number of treatise is uncertain. See Vivian Nutton, *Ancient Medicine*, (London: Routledge, 2013), 60. From the Hippocratic Corpus, this thesis draws from *On Ancient Medicine*, *On the Epidemics Books 1-7, On Wounds in the Head, On Joints, On Fractures, Instruments of Reduction, Nutriment, On the Nature of Man*, and *On Ulcers*. Galen was born in 129 CE in Pergamon, Turkey and died around 216-17 CE (Nutton, *Ancient Medicine*, 233). Galen was familiar with the teachings of Hippocrates and studied the Hippocratic Corpus in depth. Galen admired and agreed with Hippocrates’ approach to treating the body as a whole and employing logic and reason to solve medical problems. For his significant influence and contribution to the art of medicine, Galen was often referred to as the Prince of Medicine. From the Galenic Corpus this thesis pulls from *On the Differentiae of Diseases, On the Causes of Diseases, On the Differentiae of Symptoms, On the Causes of Symptoms I, II, & III, Method of Medicine Books 5-9, On Anatomical Procedures, and On the Affected Parts.*
phlegm.” As such, pus was conceived of as forming within the body and provided insight into how the body was functioning based on characteristic qualities of the suppurative matter, like how thick or foul smelling it is. Like fevers, purulent infections were considered diseases, not symptoms, and in the ancient world there could be many causes for a particular disease, but the consensuses throughout the Hippocratic and Galenic Corpuses are that all diseases stem from an imbalance of the humours.

Theories of the Causation and Function of Pus and Necrosis

In the Hippocratic writers, a disease resulted when the equilibrium of the humours, when some "exciting cause" was disturbed, causing the body to restore the necessary balance through coction. As such, the focus for ancient physicians was on the body’s need to evacuate unnecessary fluids to attain humoral equilibrium. The importance the authors’ placed on the evacuation of bodily fluids in the *Epidemics* highlights the importance physicians put on the expulsion and retention of bodily fluids. A return to health was often associated with a favourable crisis which would be determined by the adequate expulsion of bad humours through suppurative, draining abscesses and oozing ulcers, among other methods. On this matter, W. H. S. Jones, in his introduction to *Hippocrates Vol. I*, writes:

The crisis, if favourable, was accompanied by the expulsion of the residue remaining after coction and (κρααςίς) of the humors had occurred. This expulsion might take place through any of the ordinary means of evacuation—mouth, bowels, urine, pores—and the evacuated matters were said to be concocted (πέπτονα), that is to say, they presented signs that coction had taken place. But nature was not always able to use

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27 Coction is the process of the blending of humours that results in perfect equilibrium and health.
28 A crisis in this sense is the moment during an illness when the eventual outcome is determined “as it were by a judicial verdict.” Possible outcomes included recovery, relapse, aggravation of disease, or death. A positive crisis could lead to evacuation of left-over putrid matter through a variety of means, and a negative crisis could result in prolonged illness (*Hippocrates Vol. I*, LII).
the ordinary means of evacuation. In this case there would be an abscession (ἀπόστασις). When the morbid residue failed to be normally evacuated, it was gathered together to one part of the body and eliminated, sometimes as an eruption or inflammation, sometimes as a gangrene or tumour, sometimes as a swelling at the joints. An abscession did not necessarily mean recovery; it might merely be a change from one disease to another. The Hippocratic writers are not clear about the point, but apparently the abscession might fail to accomplish its purpose, and so the disease continued in an altered form. In other words there was abscession without real crisis.29

In this sense a disease (in this case an abscess) can be beneficial if it develops in a way that facilitates the release of purulent humours. However, if that disease fails to function in this manner it becomes a harmful disease in its nature. Thus, it seems as if abscesses in and of themselves are neither positive nor negative diseases. What matters is if the body uses the abscess as a method of expelling foul humours or if the abscess shifts into its own suppurative infection. The following example highlights the possibility that an abscess draining pus could be interpreted as a positive or negative condition, noting:

In all dangerous cases you should be on the watch for all favourable concoctions of the evacuations from all parts, or for fair and critical abscessions. Coctions signify nearness of crisis and sure recovery of health, but crude and unconcocted evacuations, which change into bad abscessions, denote absence of crisis, pain, prolonged illness, death, or a return of the same symptoms.30

This conception that pus could function as a method of purging a wound of bad humours and assist in the healing process can be found throughout the Hippocratic Corpus. In, On Wounds, the Hippocratic writer describes how wounds are more moist than healthy skin and should be left uncovered to dry out and drain any fluids. He explains that suppuration should be induced and the wound should be left open so as not to impede the flow of pus. He notes that no


suppuration at all, save the little pus that is necessary is also positive. Moreover, the

Hippocratic writer details how the heating of blood results in inflammation and suppuration.

He writes:

You should rather make the wound suppurate as quickly as possible; for thus the parts about it will be least inflamed and it will be most rapidly cleansed for the tissues that are pounded and contused by the weapon must necessarily become purulent and slough away. When the wound is cleansed it should get rather dry, for so it will soonest become healthy, the growing tissue being dry and not moist, and thus the wound will have no exuberance of flesh.31

In the following excerpt, the Hippocratic writer describes how in some cases the presence of pus should not be interpreted as a negative or alarming sign, writing:

Should there be none of this, but the sore itself is found to be irritated, extensively blackened or foul with tissues about to suppurate and tendons on the way to be thrown off, it is by no means necessary to leave them exposed, or to be in any way alarmed at these suppurations, but treat them for the future in the same manner as cases in which there is a wound from the first.32

In this vein, it becomes apparent that pus was not always interpreted as a sign of negative health or as a detriment to healing. In fact, in some instances suppuration was not only perceived as positive evidence of healing it was induced by the application of plasters and suppuratives. Following Hippocrates, Galen also found a positive purpose for pus in medicine and coined the term “laudable pus.” David E. Gyorki wrote a letter published in the ANZ Journal of Surgery that stated:

Galen of Pergamum (129–200 AD) first described pus as being ‘bonum et laudabile’ after observing that suppurating wounds were often the ones to heal. While he recognized the Hippocratic adage of ubi pus ibi evacua, he also considered there to be significant benefits to this materia pecans (sinful substance). He inferred that pus was

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a necessary step in wound healing. Wounds that remained clean were taken ‘rapidly through suppuration’ using greasy wool soaked in wine. Galen’s teachings were widely followed and with the demise of the Roman Empire, Islamic medicine was largely modelled on it.33

In this manner, via observation of purulent infections and the words of Hippocrates, Galen deduced that pus could be associated with healing and health as a method of flushing out bad humours and cleaning wounds in the process. This theory then spread rapidly throughout the ancient medical world because of his widespread influence. More than serving as a tool for draining putrid humours interpretations of the changes in pus could serve as indicators for the prognosis of an infection. A most graphic account of this theory can be found in Ancient Medicine.

In this example a Hippocratic writer describes a case of ophthalmia and pneumonia where the change in purulent discharge, from being thick and acrid to thicker and less pungent, is an indication of the restoration of health. The Hippocratic writer recounts the following:

Again, such discharges as settle in the eyes, possessing powerful, acrid humors of all sorts, ulcerate the eyelids, and in some cases eat into the parts on to which they run, the cheeks and under the eyes; and they rupture and eat through the covering of the eyeball. But pains, burning and intense inflammation prevail until the discharges are concocted and become thicker, so that rheum is formed from them. This coction is the result of mixture, compounding and digestion. Secondly, the discharges that settle in the throat, giving rise to soreness, angina, erysipelas and pneumonia, all these at first emit salt, watery and acrid humors, whereby the diseases are strengthened. But when they become thicker and more matured, and throw off all trace of their acridness, then the fevers too subside with the other symptoms that distress the patient.34


What is important to take away from this passage is that, in the case of purulent infections, determining the benefit or harm of such a disease was more complex than simply labeling all fetid abscesses as negative or hindrances to health. This point is again put forward in *Epidemics I*, when the Hippocratic writer reports that during one epidemic, “After long intervals, with many pains and with pernicious wasting, there supervened abscessions either too severe to be endured, or too slight to be beneficial, so that there was a speedy return of the original symptoms, and an aggravation of the mischief.”

This description paints a picture of a medical approach that viewed any change in health as potentially dangerous and unwanted; although, in the right circumstances, even dangerous diseases might be helpful in restoring balance to the body. However, the notion that pus could be beneficial should not detract from the overarching conception of disease as a negative state. Even in the case of “laudable pus,” the need to drain a wound is still indicative of humoural imbalance and the necessity of medical intervention. Thus, while ancient physicians viewed disease as a negative humoural state, some also saw a possible positive function for certain diseases, such as suppurating sores, in conjunction with other humoural imbalances.

Working within the framework of the humoural system Galen (like Hippocrates) made clear that imbalances, including excesses and deficiencies, within the body resulted in unnatural physical states which caused diseases such as necrosis and purulent infections. Those diseases would then hinder the function and constitution of a healthy body. In *On the Differentiae of Disease*, Galen writes that:

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35 Hippocrates, “Epidemics I,” VIII.
One must seek health in these two things: either in functions which accord with nature, or in the constitutions of the organs by which we function, so that disease is equally damage of either function or constitution...From this it is clear that to be healthy is not to function but to be able to [function], and we are able to function from the constitution that accords with nature. Constitution now will relate to function as cause so that whether you wish to call health a constitution of all the parts in accord with nature, or the cause of the functions, both statements amount to the same thing. But if health is this, then clearly disease is the opposite, i.e. either some constitution contrary to nature, or a cause of damaged function. It is clear, in fact, that if you speak of a condition contrary to nature, you will be using an old term but you will be signifying the same thing.\textsuperscript{36}

In short, here, Galen is reinforcing the belief that the Hippocratis writers promulgated in their works that health and disease are opposing states. A healthy state was characterized by the body being able to function properly according to its nature; and, disease was indicative of an imbalance contrary to nature and an inability to function in accordance with one’s nature. Ian Johnston in his book, \textit{Galen: On Diseases and Symptoms}, summarizes Galen’s definition of disease as “an imbalance, involving the whole body or a part, contrary to nature or a cause of damaged function. Each... [having] its own basic nature or substance.”\textsuperscript{37} This definition supports the ancient viewpoint that disease and injury were unnatural, damaging to the self, and required medical intervention.

In, \textit{On the Differentiae of Diseases}, Galen contends that every time a body is unable to function in accordance with nature a disease is involved. He explains that bodies are made up of many parts and any fluctuation in the balance of those parts results in disease. He argues that bodies consist of pores and when those pores contract and dilate they alter the delicate

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equilibrium of the body which causes disease.\textsuperscript{38} If a body part becomes severely constricted
or dilated that part is subject to dissolution and destruction.\textsuperscript{39} Galen describes one hypothesis
for the differentiae of disease writing:

The differentiation of diseases happens also to be twofold in that sometimes, in fact,
the \textit{homoiomeric} bodies are changed in qualities alone, whereas, sometimes a certain
substance flows into them which has the qualities spoken of...For the \textit{erysipelata},
inflammatory swellings (\textit{phlegmonai}), swellings (\textit{oidemata}), tumours (\textit{phumata}),
glandular swellings (\textit{phugethla}), Scrofulous swellings (\textit{choirades}), \textit{elephantiasis, psorai,}
\textit{leprai, alphoi} and indurations (\textit{skirroi}) are of this class, and can escape no one.\textsuperscript{40}

Aside from the contraction and dilation of pores Galen also describes how humoral
imbbalances can travel through the body via channels and cavities leading to an influx or
decrease in fluid resulting in suppurative and necrotic infections. Galen writes:

There are many such disease, some arising through a certain coalescence, some
through the obstruction of viscid and thick humors, some again when bodies are dried
up, or when surrounding [structures] are narrowed by something falling in on them
and causing compression. Sometimes, also, the substance of the actual bodies that
have such channels when it is indurated (\textit{skirromene}), or inflamed (\textit{phlegmone}), or
gangrenous (\textit{sphakelizoua}), or suppurring (\textit{diapuiskomene}), or swollen (\textit{oidiskomene}),
or in any other way whatever acquires an added magnitude, having poured the
swelling into the internal cavities, obstructs the channels.\textsuperscript{41}

He goes on to explain that obstruction in and of itself is a disease and often leads to secondary
diseases such as pustules (\textit{anthrakes}). There are two other causes of rotting diseases
described by Galen in \textit{On the Differentiae of Diseases}, those being, excess and dissolution of
union (or continuity). Diseases of excess include the formation of pus, pustules, swellings, and
abscesses as a result of excess fluids or bad humours. Dissolution of union describes diseases

\textsuperscript{38} Pores were known to Asclepiades and later to Galen as ducts that were non-anatomically definable
that played a role in the balance and imbalance of health and disease in the body. They do so by controlling the
inflow and outflow of humoral fluids (Ibid., 16-22).
\textsuperscript{40} Ibid., V.2.
\textsuperscript{41} Ibid., VII.2.
where a part of the body is damaged in a way that the continuity or unity of one part is
broken. Examples of this form of disease are the tearing away of necrotic flesh, broken bones,
ulcers, and crushing wounds that pulverize tissue. In, *On the Differentiae of Diseases*, Galen
uses an example of an ulcer to outline the roles of dissolution of continuity, humoural
balance, and the importance of functioning in accordance with nature. This explanation is
significant because it presents dominant medical theories regarding the causation of diseases
that result in necrosis of the flesh. First, it incorporates the humoural system Hippocrates
followed which dictates that a surplus in heat, cold, moisture, and dryness departs from the
natural balance of the body and results in disease or a combination of diseases. Galen reports
that ulcers, as a disease, result in dissolution of continuity because they damage and erode
the flesh. He further suggests that inflammation is a form of disease as it causes the body to
become hotter and more moist than what is natural.

For it is not impossible for a part to be ulcerated and, at the same time, also more dry
than accords with nature, or more moist, or more cold, or more hot, nor to be
ulcerated and, at the same time, more moist but not to be more hot at all. Therefore,
parts that are simultaneously ulcerated and inflamed depart from what accords with
nature in three ways: owing to the ulceration there is destruction of the unity of the
specific parts, whilst because they are inflamed they are made hotter and more moist
than is natural.42

This excerpt demonstrates Galen’s belief that anything that causes the body/part to not
function according to nature is a disease. Such is the case with swellings of body parts if the
swellings are severe enough to impact the natural function of a body part. This understanding
of the body highlights the ancient medical concept that anything that causes a body to be
unable to perform a given function appropriately is a disease. Moreover, it reflects the theory

42 Ibid., XII.2.
that a disease could and often did present alongside multiple other diseases in the same patient as combined diseases (in modern medicine many of these secondary diseases would be considered symptoms). In this vein, Galen goes on to write:

Of course, the swelling in these [parts], whenever it has taken on such a size as to harm function of itself, must be thought of as being now a disease. Otherwise it is only a symptom of affection (*pathema*), just as pain also is. Therefore, all bodies that are simultaneously inflamed and ulcerated are necessarily diseased in three ways, and sometimes in four... In this way also, ulcers sometimes occur in the *erysipelata*. In pustules (*anthrakes*) it cannot be otherwise, whereas intermediate in nature between these are the *herpetes* and cancers (*karkinoi*), many occurring accompanied by ulcers but sometimes also apart from them. All such diseases are, at any rate, combined, even if they occur without an ulcer. In one way, all these diseases are creations of superfluous fluid whether hot or cold: *erysipelata* of yellow bile, cancer (*karkinos*) of black bile, inflammation (*Phlegmone*) of blood, and swelling (*oedema*) of phlegm.43

Additionally, this excerpt demonstrates that Galen was familiar with ancient medical terminology and that over time certain terms were redefined. He comments that ancient thoughts regarding inflammation and “burning heat” are not conducive to his contemporary conception of inflammation. He explains that, “what we now call inflammation is clearly not the kind of ‘burning heat’ of the parts which was customary among the ancients, but a red, firm and painful swelling.”44 Further evidence of Galen’s use of the works of physicians who predate him is portrayed in his discussion of the dissolution of continuity as a class of diseases in, *On the Causes of Diseases*, when he espouses:

It is necessary still to speak of the cause of genesis of one further class of disease common to all parts, whether these be *homoiomeris* and entirely simple, or combined. I am accustomed, then, to call this whole class a dissolution of unity...For we have not received any term concerning this, established by those who have gone before us.45

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43 Ibid.
44 Ibid.
This statement betrays Galen’s preference to ground new classifications in ancient knowledge, demonstrating a continuum of medical knowledge from the past to the present which rooted his medical theories and practices in the authority of already established knowledge.46

Examples of medical theories and practices promulgated by Galen can be drawn from *Method of Medicine* V and IX, in which he describes how to treat cases of ulcerated genitals and compares the prognosis and treatment of two febrile men. He explains:

> Wounds and ulcers in the penis and anal region don’t require a poultice but a cicatrizing medication, although not, by Zeus, one of such a nature that it leads wounds and ulcers of the flesh to a scar, but one which, in terms of capacity, is drier to the same degree as the parts are drier than the flesh. What is more to be wondered at is that the actual wounds that exist in the penis need to be dried still more, both those that are in the whole shaft and those that are beyond the end of it in what they call the glans. Wounds and ulcers that are in the foreskin have less need of drying medications than these, and the need is even less in the remaining skin which surrounds the whole penis.47

This statement indicates two things about ancient thoughts and understandings of the function of the body. First it demonstrates the importance of knowing which body parts are dry/wet and hot/cold as these qualities are key for properly treating an afflicted area. Secondly, it shows that there were multiple ways to treat wounds and ulcers. This is indicated by the fact that Galen makes a point of explaining physicians should not be administering scarifying medication or poultices (suggesting some were) but drying medications instead.

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46 Hippocrates himself suggests that one ought to learn from those who have come before, writing: But medicine has long had all its means to hand, and has discovered both a principle and a method, through which the discoveries made during a long period are many and excellent, while full discovery will be made, if the inquirer be competent, conduct his researches with knowledge of the discoveries already made, and make them his starting point. (*Hippocrates, Ancient Medicine*, II).

Another interesting case study is a comparison of two continuous fevers where one is attributed to systemic putrefaction and the other is not. In the case of the non-putrefied fever Galen notes that he will bleed the patient until he faints to treat the fever and hopefully avoid the onset of putrefaction (this method of bleeding the patient until they pass out is also the treatment for the patient with putrefaction). This is interesting because it suggests a belief that fevers, at least severe and continuous fevers, could cause putrefaction of the humours. Galen explains that the reason why fevers can putrefy is that certain types of fevers can cause the blockage of pores which can lead to a build-up of fluids resulting in swelling, redness and suppuration throughout the body. He writes:

I said these [fevers] are from the class of the ‘ephemeral’ if they are without putrefaction, whereas if some putrefaction supervenes in them, either right from the start or later, when this exists in all the veins, and particularly in the large ones, it generates continuous fevers... In those whom the body, which has become slow to disperse due to the abundance of humours, has built up such a heat as to be already febrile, it is necessary to remove as much blood as their capacity tolerates, recognizing that, if this remedy is not put to use, those who are in such a condition in terms of their nature will choke or suffer syncope unless, as I said, the strength of their nature, or substantial sweating, or violent loss of blood saves them from death.\(^\text{48}\)

As such, these examples of continuous fevers showcase how the delicate balance of humours could easily be disturbed resulting in imbalances, such as excessive heat, which could heat the blood causing systemic putrefaction. While these case studies demonstrate the main theories of pus formation the following sections establish the commonality of such diseases in the ancient world by looking at the prevalence of cases of fetid infections in osteological data and medical literature.

\(^{48}\) Galen, *Method of Medicine IX.5*, 617K.
Osteological Data of the Prevalence of Pus and Rotting Flesh in the Ancient World

A primary source of physical evidence of necrotic disease in the ancient world stems from Mirko D. Grmek’s analysis of osteological data from the ancient and pre-historic world in his book *Diseases in the Ancient Greek World*. Grmek asserts that the “mutual adaptation, which makes the pyogenic microbe a saprophytic companion of mankind, is the best proof of the antiquity of the common suppurative diseases.”

Grmek references Roy L. Moodies’s work with fossil bacteria dating back to prehistoric animals that showed signs of osteomyelitis. He explains that even though there may be doubt about the presence of the bacteria in bone sections collected by Moodie, “there is no denying his diagnosis...which in and of itself suffices to establish the existence of pyogenic bacteria.”

The oldest fossil evidence in Moodie’s collection is described as a saurian of the Permian period “in which a spine fracture is complicated by a purulent bone infection.” Regarding hominids, there is early evidence of pyogenic germs, specifically alveolar pyorrhea being found in the lower jaw of *Sinanthropus lantianiensis* dated to approximately 450,000 BCE. Furthermore, in one instance, osteological data of a male who died at approximately thirty-five years of age, dating back to the Middle Bronze Age, contained “traces of pariestis and ankyloses of the last joint on the thumb and the little finger of the right hand... [as a] result of a typical V-shaped phlegmon: after a wound to the wrist or palm.”

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49 Grmek, *Diseases in the Ancient Greek World*, 121. Pyogenic saprophytic microbes are bacterium or fungi that cause suppurative (pus-producing) infections in animals and feed off dead or decaying organic material.

50 Ibid., 120.

51 Ibid.

52 Ibid., 122.
bones shows that there was an acute purulent inflammation that was successfully treated resulting only in a slight handicap which would have been present until end of life.

Additional evidence of the occurrence of purulent bone infections comes from the upper jawbone of an athletic fifty-year-old man exhumed from a royal grave at Mycenae. On this subject Grmek concludes that “A cystic formation in the area of the upper second molar testifies to the existence of an old abscess. His gum infection propagated in the maxillary sinus, whose thickened bony walls bears the marks of an inflammation of the mucoperiosteum- in other words, a sinusitis.”\(^{53}\) This osteological data establishes that there were microorganisms causing necrotic and suppurative infections well before 500 BCE thus establishing the possibility of infection throughout the ancient world. Not only were these infections possible, but broken, fractured, and diseased bones were commonplace, according to osteological data from Egypt and the Graeco-Roman world, as cited by Robert Garland in *The Eye of the Beholder: Deformity and Disability in the Graeco-Roman World*. Garland notes that ten percent of all known Greek skeletons exhibit at least one fracture. Out of a sample of 233 skeletons fifty-six percent exhibited “bone pathologies due to fractures, metabolic disorders and systemic infections.”\(^{54}\) This data, paired with Grmek’s data on purulent infections and the high risk of severe infection following a bone fracture, suggests that a high rate of cases would have likely resulted in necrotic and purulent infections.

\(^{53}\) Ibid.

Regarding disease and injury to bones, the Hippocratic writers recorded numerous accounts of broken, fractured, or dislocated bones that led to rotting flesh. One such writer described multiple cases where a patient presents with a broken bone which ultimately results in the avulsion of flesh from the bone and necrotic infection. The Hippocratic author reported that, “In some cases the upper part of the bones are denuded, in others the soft parts surrounding them perish, and the starting point of the necrosis is in some of the bones, the old wound, in others not.” Similarly, *On Joints*, also documents necrosis, denudation, and chronic abscesses in cases of dislocated thigh-bones explaining “if necrosis of the thigh-bone occurs in some of the cases, chronic abscesses are formed requiring tents; and, in some there is denudation of bone.” While osteological data provides evidence of the existence of the presence of flesh-eating microorganisms in the ancient world there were numerous sores, rashes, and skin infections that are only preserved in textual records.

**Textual Data of the Prevalence of Pus and Rotting Flesh in the Ancient World**

Textual evidence of the prevalence of eroding sores, necrotic abscesses, and purulent infections is demonstrated in all the Hippocratic texts addressed in this thesis. To showcase this, I have selected nine key terms used throughout Hippocratic works to describe rotting flesh, purulent infections, and necrotic sores. The terms are, blacken(ed), gangrene(ed), necrosis (necrotic/necrotized), mortify(ied), pus, purulent, suppurate (suppurative), abscess, and ulcer. From there, I counted each instance those words occurred in a text and how many

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55 Hippocrates, “On Fractures,” XXXIII.
total cases were documented. In this vein, in *Epidemics* (Books 1-7) these terms appear a total of 137 times in 121 separate cases out of a total of 384 entries. Thus, over a third of all cases in *Epidemics* 1-7 pertain to rotting flesh and pustulating sores. Furthermore, many of these accounts depict how easily one might contract a suppurative infection or phagedenic sore. For example, in *Epidemics* V the author describes a case where a young man had pain in his foot after having gone jogging and within twenty days his foot had blackened and he had died. The Hippocratic author states that:

> A young man who had sprinted on a rough road had pain in his heel, especially the lower part, but the area did not allow an apostasis because it was collecting moisture. But on the fourth day the whole area became black, up to the so-called astragalos (ankle joint) and to the hollow behind the ball of the foot, and the blackness did not break out; rather, he died first. He lived a total of twenty days after his run.\(^57\)

In this case, we see how rapidly certain necrotic infections could spread and the physician’s inability to deduce its cause or prescribe a treatment before the patient died.

Further, the prevalence of such infections is evidenced in, *On Fractures*, where the Hippocratic writer documents how the simplest of activities could result in necrosis. The writer explains that people who come down on their heels after jumping or falling can cause the foot to dislocate resulting in soft tissue trauma. The author outlines three ways in which this seemingly minor injury can lead to necrosis. First, the injured limb and joint can become suppurative due to improper pressure from inappropriately bandaging the extremity. This would restrict the flow of fluids resulting in imbalance. Second, the patient might not stay in the proper resting position which could also result in the build up of fluids and the blackening

of skin. This again likely relates to the flow of fluids towards and away from the wound and the notion that certain positions can cause fluids to collect in a part of the body. Third, an improperly treated wound may become a chronic wound with reoccurring necrosis throughout the patient’s life stressing the importance of accurate diagnoses and proper treatment of wounds and diseases.\textsuperscript{58}

The prevalence of rot in the lives of the ancients is further evidenced in accounts where the Hippocratic writers describe arriving in new locations and finding multiple people living with phagedenic ulcers and black, oozing sores. The following quote from \textit{Epidemics IV} presents multiple patients in one locale all suffering from suppuration and phagedenic ulcers.\textsuperscript{59} The Hippocratic writer recorded that:

\begin{quote}
After the equinox and the Pleiades, the affections were like consuming ulcers and mucous sores. The man whose head I opened had drainage behind the ear, the one in Leocudes’ house on the foot. Phanodicus’ toes were towards the ball of the foot. The man whose calf was cut developed a blackness on the outside of the calf where there was a large ulcer, which spread from the rear. After it became clean he had pain in the ribs and chest on the corresponding side, the left, and fever. He died from the fever.\textsuperscript{60}
\end{quote}

All of these cases demonstrate that at least some people who contracted necrotic and purulent infections seem to have continued to live in their communities. It also shows that when given the opportunity to get medical help they took it. One only needs to recall previous excerpts describing the foul, pungent, acrid stench or suppurative sores and rotting flesh to understand how negative social stigmas existed regarding being out in public with these types

\textsuperscript{58} Hippocrates, “On Fractures,” XI.
\textsuperscript{59} Phagedenic ulcers had multiple names including consuming ulcers, eating ulcers, and corrosive ulcers. These ulcers are aggressive, dangerous and literally consume the flesh of the affected person. They present with localized pain, edema, sloughing of tissue, pus and a foul odour.
of infections. Although it should be noted that necrotic infections were common in the ancient world and most communities would have ample experience with suppurative citizens and this familiarity may have lessened the intensity of negative stigmatization.

Further evidence of the prevalence of infection comes from Grmek’s report on a case of a phagedenic ulcer that afflicted a man’s penis. He recalls the unfortunate fate of the Alexandrian rhetorician Apion circa the first century CE. This account is from Flavius Josephus’s work Against Apion and it describes how Apion “was circumcised of necessity, to treat an ulcer on his genitals; moreover, the circumcision did him no good, as his flesh became gangrenous and he died in excruciating pain.”

This case of Apion’s ulcerated penis and the case studies presented up to this point all bolster this thesis’s argument that necrosis was a common and prevalent condition. A simple tooth ache or fever might be reason to believe you had a serious suppurative infection. This is the case with the following two accounts. The first account documents a nursing woman who had a fever and ended up with worms in her tongue (unfortunately the details are scarce). The author describes how “Thersander's wife... developed [an] acute fever. Her tongue was burned, and she was parched generally at that time. Her tongue grew hard like thick hailstones, and there were worms in her mouth. Incomplete crisis about the twentieth day.” The second case is of a man with a rotten tooth that quickly spreads to adjoining teeth, then to his jaw and ultimately his eyes and sinuses. The Hippocratic writer documents the following summary:

Hegesistratus' tooth: he had a suppuration by his eye and also by his back tooth. The eye later healed and he exuded thick pus through the nostrils. At the gum, small,

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round, fleshy, globs came away. He seemed to be going to suppurate by the third tooth, then it turned back. Suddenly his jaw swelled, and his eyes. In Hegesistratius, his two back teeth were eaten away in the area where they met. The back one had two "knuckles" above the gum, one next to where it was eaten away, the other opposite. Where these two were, there was a single plinth-like root formed from two, and on the other side a single half round root.63

To reiterate, these two cases demonstrate how aggressively a necrotic infection could spread and how easy it was to contract a variety of rot related diseases in the time of Hippocrates.

Grmek also relies on the works of Hippocrates as evidence of common purulent inflammations in ancient times and he additionally includes diseases such as furuncles, whitlows, and a phlegmon of the foot, among necrotic infections present in ancient times.64

Grmek examines two instances where superficial wounds result in severe and fatal necrotic infections. He writes:

For instance, an inhabitant of Thasos died the second day after a phlegmon began forming on his big toes; or a shoemaker succumbed in three days to a swelling of his thigh caused by an accidental puncture with one of his tools. In both cases the infection of an apparently insignificant cut is followed by violent inflammation and fatal sepsis. The likeliest agent is an especially virulent streptococcus, probably a betahemolytic Streptococcus pyogenes.65

Based on this case study and those previously described herein, this thesis demonstrates that osteological data and ancient medical literature, from 500 BCE- 200 CE, are evidence that necrotic and purulent infections commonly occurred in the ancient world and often resulted in disfigurement, disability, and death. In this vein, from the time of the Hippocratic writers onward, attitudes towards decaying limbs and festering bones evolved along with medical

63 Ibid., 25.
64 A furuncle is a boil, a whitlow is an abscess in the soft tissue near a fingernail or toenail, a phlegmon is a diffuse inflammatory process affecting soft or connective tissue with the formation of suppurative exudate or pus.
65 Grmek, Diseases in the Ancient Greek World, 129.
insights into diagnosis and treatment of such conditions. As the ancients honed their medical skills they developed new and superior ways for diagnosing infected body parts and treating festering wounds.

**Diagnosis of Necrosis and Suppuration**

In, *On Wounds in the Head*, the Hippocratic author reports that even a minor laceration could result in necrosis and suppurative sores. He notes how to diagnose signs and symptoms of simultaneously suffering from fever and purulent infection, writing, if fever sets in “the lesion gets a bad colour and a little ichor flows from it... [then] it gets macerated and looks like dried fish of a rather livid reddish colour. Necrosis of the bone sets in... When it has become purulent, blebs appear on the tongue and the patient dies delirious.”66 Further on the matter of diagnosis, in *Method of Medicine X*, Galen questions both the diagnosis and the treatment of a patient with a purulent lung. He berates a group of doctors known as the Methodics (followers of Thessalus) for their erroneous practices. First, he critiques their diagnostic skills writing:

> But let it be conceded, at least for the present purposes, that the followers of Thessalus recognize that a wound has occurred in the lung. Shall we, then, just as we allow them this, in like manner also concede that they know whether it is filthy or clean, hollow or flat, or filled with ichors and pus, and that they see this either by divine inspiration or in a dream? And even in this, shall we question them anyway on the diagnosis, or apart from the diagnosis, allow that they know to give whatever medication they might wish?67

Then he describes how he would treat the patient, stating:

> For I think there is a need to cleanse the filth from wounds that are filthy as a first measure, and to enflesh those that are clean and at the same time hollow, and to clear

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66 Hippocrates, “On Wounds in the Head,” XIX.
away the ichors and pus by which these wounds are surrounded, and then in this to cicatrize them. I also do not know how they will cure such [infected] wounds, for to begin with, Thessalus did not write anything about them, so that he did not reveal his own ignorance or his inconsistency.68

As such Galen demonstrates that necrotic and purulent infections are present in the ancient world and that sufferers sought out the diagnosis and treatment of trained doctors to treat their putrefying body parts. Moreover, there was no universal approach to treating such infections, as Galen explains, the Methodics were known by him to use inappropriate medications and speculations to treat suppurative patients in contrast to his superior methods.

In addition to Galen’s critical remarks, his case studies illustrate myriad ways in which rotting and purulent infections presented in ancient times, including ulcerated ear infections, purulent wounds, or suppurative internal infection of the organs. Most notably, however, some cases illuminate how complicated and medically advanced some treatments were. For instance, in a case where a slave contracts a suppurative infection of him sternum, Galen and a team of other doctors are called in to treat him which results in a drastic and dangerous surgery. In this account a slave is injured after receiving a blow to the chest while wrestling. After four months, the sternum began to suppurate and a physician operated on the wound but shortly afterward the pus returned and the wound would not heal. The slave’s master called in a panel of physicians (including Galen) who all agreed that the issue was “suppuration of the sternum.”69 Note that suppuration is the diagnosis, a disease in its own

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68 Ibid.
right, not a symptom. This case is complicated by the fact that “there was visible movement of the heart on the left of [the sternum], so that no one dared remove the affected bone, thinking that it would involve a ‘perforation’ (syntresis) of the thoracic [cavity].”\textsuperscript{70} Galen, however, agreed to perform the surgery and excised the bone without perforating the thoracic cavity. He describes how:

The limits [of the wound] on either side, under which extended the arteries and veins, were seen to be healthy, and I thus gained more confidence in the proceeding. When the bone affected had been excised, particularly at the highest level reached by the pericardium, the heart was seen exposed, for the membrane round it had here mortified. We then had little hope for the slave. Yet before long he recovered completely.\textsuperscript{71}

Unfortunately for the patient this was not his only purulent infection and a doctor other than Galen treated the infection in his arm. Galen reports that “another physician, operating on a septic state in the arm due to determination of the humours there, severed a large artery through ignorance of the parts.”\textsuperscript{72} He goes on writing, “Nevertheless, he killed the man in another way, for gangrene produced by the ligature seized on the artery first and next on the surrounding parts.”\textsuperscript{73} This case introduces a new category of necrotic infection, the internal infection, which remained primarily unseen prior to advancements in medicine that allowed doctors to attempt more complex surgeries. It was due to advancements in understanding human anatomy and physiology, focal points for Galen, that allowed educated doctors like Galen to advance medical understanding of the diagnosis and treatment of necrotic and purulent infections.

\textsuperscript{70} Ibid., Book VII.13.
\textsuperscript{71} Ibid.
\textsuperscript{72} Ibid.
\textsuperscript{73} Ibid.
Treatment of Pus and Rotting Flesh

Once an ancient person developed a necrotic infection they would, at times, have to be subject to equally painful medical procedures. While some cases required less invasive treatments such as eating the appropriate diet, resting in the appropriate position and using medication such as hellebore and hydromel, applying bandages, plasters, oil, wine, pitch cerate, blood letting, and tents (for draining wounds), some unfortunates were treated with more painful methods such as cauterization and amputation. Regarding cauterization, a Hippocratic author writes about a man who required this treatment yet ultimately dies due to poor diet. The author describes how the man “became purulent in the lower belly, [and] was cauterized later than he should have been by thirty days. He was all right, and the pus dried up in the belly. But in the hottest season, as he was eating fruit and other inappropriate foods, fever seized him and diarrhea, and he died.”74 A similar case involves “Hecason, in Omilus, [who] was cauterized late like the other one. Still his belly almost dried up. Dysentery seized him, and when he escaped it he used to eat everything, until he swelled up all over, and pus broke out below, and diarrhea, and he died.”75 As such, there seems to be a correlation between improper diet and suppurative infections. In, On Instruments of Reduction, the Hippocratic writer notices that cases of curvature of the spine caused by a fall may cause patients to spit blood and develop abscesses. Again, treatment for these necrotic sores was “cauterity, [in cases] where bone [was] involved, down to the bone, but not of the bone itself; if between

75 Ibid., 30-31.
the ribs, not right through, yet not superficial. Necrosis: try also the treatment with tents.”

When cautery was not an aggressive enough form of treatment some patients were subject to amputation of the dead body part.

On the matter of amputation, On Joints outlines the appropriate procedure in accordance with Hippocrates’ instructions. The author writes:

Cases of complete amputation of fingers or toes at the joints are usually without danger—unless a patient suffers from collapse at the time of injury—and ordinary treatment will suffice for such wounds. Again, where the amputation is not at a joint, but somewhere in the line of the bones, these cases also are not dangerous, and heal even more readily than the former; and if the projection of fractured finger-bones is not at a joint, reduction is without danger in these cases also. Complete amputations even at the joints both of the foot and hand, or of the leg at the ankle, and of the forearm at the wrist, are in most cases without danger, unless syncope overcomes them at once, or continuous fever supervenes on the fourth day.

This method of amputating rotting and gangrenous limbs is a form of what is termed passive amputation. This method only removes tissue that is already dead and leaves all healthy flesh intact to not cause further harm to the patient (this is in keeping with the Hippocratic Oath which swears to do no harm). Later, in On Joints, the author goes into further detail about the appropriate method for removing dead flesh and bone. The author explains that:

In cases of fractured bones, when strangulation sets in at once with lividity, lines of demarcation are rapidly developed on the part, and that which is coming away does so quickly, the bones having already yielded; but in cases where the lividity comes on with the bones are sound, the flesh dies rapidly here also, but the bones separate slowly along the border of the lividity and denudation of the bone. As regards parts of the limb which are below the limit of mortification, when they are quite dead and painless, they should be taken off at the joint, taking care not to wound any living part. For if the patient suffers pain during amputation, and the limb happens to be not yet

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77 Hippocrates, “On Joints,” LXVIII.
dead at the place where it is cut away, there is great risk of collapse from pain; and collapses of this kind have brought sudden death to many.\textsuperscript{78}

To this effect, many ancient physicians saw necrotic infections as unnatural, harmful, and meriting amputation. Later, during first and second century CE physicians like Celsus and Galen practiced a more evolved form of active amputation. Celsus writes:

Between the healthy and diseased part of the bone the flesh should be cut with a scalpel as far as the bone but not over a joint. It is preferable that some of the healthy part be removed than that any of the diseased part be left. When you get to the bone, the healthy flesh should be drawn back from the bone and undercut around it so that some of the bone is stripped away in that part too. A small saw should be used to cut through the bone as closely as possible to the health flesh which still adheres to it. Then the surface of the bone, which the saw has roughened, should be smoothed over and the skin drawn over it. In a procedure of this kind the skin should be sufficiently loose to cover the bone on all sides as much as possible. The part of the bone which is not protected by skin should be dressed with lint and a sponge soaked in vinegar.\textsuperscript{79}

What is significant here are the differences in method between the Hippocratic doctors and Celsus which denote an evolution in the technique of amputation as medical knowledge developed. There are two significant deviations that are apparent when comparing the Hippocratic writer’s and Celsus’ method of amputation. The former recommends the amputation be done at a joint (although the author does note that amputations which are not done at joints are often not dangerous either). This method is contradictory to Celsus’ which specifically explains one should refrain from amputating at a joint (it should be noted that in modern medicine amputations at the joint are still avoided when possible). Second, the Hippocratic writer is adamant that only flesh that is clearly dead and free from sensation

\textsuperscript{78}Hippocrates, “On Joints,” LXIX.
should be removed. In fact, a patient feeling any pain is indicative of his guidelines not being met which may prove fatal for the patient. This is opposed to Celsus’ statement that one must remove some healthy flesh less the disease return. This suggests that Celsus had a more sophisticated understanding of how necrotic infections spread to healthy tissue or he was at least aware that one could remove a rotting limb only to have the infection return in the surrounding healthy flesh. However, it must be said that Celsus’ conclusions were likely based on the observations of Hippocrates which had evolved over the centuries.

The following incident from *Epidemics V* highlights the main processes by which an ancient physician would have diagnosed and treated purulent sores and necrotic infections. This Hippocratic author describes how he concludes that the patient is suffering from broken ribs and a purulent infection based on the information that the patient had a loaded cart run over him crushing his chest. With the tissue pulverized it has turned to pus and humoral fluids have collected at the site of the wound. The treatment is threefold; first, the author describes treating the wound with cauterization, then he seeks to re-establish humoral balance and lastly, he surgically removes the putrid flesh and the rotten parts of the peritoneum. The Hippocratic writer notes:

The man from Malia: a loaded cart ran over him in the rib area, and broke some of his ribs, and in time pus gathered below the ribs. Cauterized below the spleen and treated with a tampon, he continued for ten months. When the skin was cut, an opening into the peritoneum appeared which led in both directions: a rotten channel ran to the kidney and to the bones. The state of his body was bilious, though one did not notice it.

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80 In this manner, Hippocrates’ focus is on causing little to no pain as pain in and of itself could result in shock and death, possibly illuminating a primary concern for the patient’s wellbeing. Celsus however, emphasises the need to remove healthy tissue to prevent the return of infection, thus demonstrating a focus on curing the disease rather than minimizing pain.

Upon his initial assessment of the patient he notes the presence of pus and proceeds to treatment. He evokes the rule that opposites treat opposites noting that since damp drugs did not work dry ones should be used. He explains:

In his body generally and at the site of the disease there was much putridity of the peritoneum and of other flesh, which one needed to remove immediately, if one could, with a dry(ing) drug so long as the man had any strength, since he did not improve from the damp (drugs), but grew purulent.\textsuperscript{82}

Moreover, the author states that moisture from the tampons further aggravated the condition reporting that:

Because the moisture was held by the tampons, shivering and fever seized him and he suppurated more. There flowed forth a black, foul-smelling corruption, and before one took the treatment in hand it flowed out in quantity every day, but it did not flow freely. It was recognized that the nature of the disease was farther off than below the skin. Had he been properly cared for in all respects, it still does not seem that he would have survived. Diarrhea also seized him.\textsuperscript{83}

This excerpt is significant because it shows that Hippocratic writers were promoting the removal of rotting flesh as being appropriate and necessary for severe cases. However, it should also be noted that the physician is diligent only to remove dead flesh, leaving all living tissue intact (this relates to the Hippocratic philosophy that the role of the physician is merely to assist the body in healing itself). Moreover, his alluding to the presence of channels within the body that carry rotten humours to and from different body parts is consistent with Galen’s later understanding of the body and the migration of fluids throughout its many parts, channels and chambers.

\textsuperscript{82} Ibid.  
\textsuperscript{83} Ibid.
Up to now, this chapter has focused on the scientific and medical aspects of rotting flesh in the ancient world by examining case studies from the Hippocratic and Galenic Corpses and by analysing osteological evidence of the antiquity of bacteria and viruses that cause necrotic and suppurative infections. This thesis will now turn to socio-cultural factors about how people with necrotic infections lived in the world and how the majority of society treated people who were disabled or disfigured because of such infections.

**Socio-Cultural Attitudes Towards Rotting Flesh**

The following is an analysis of the social environment and socio-cultural factors involved in the formation and promulgation of normative expectations regarding how human bodies ought to look, act, and perform. Additionally, this section seeks to answer the following: how did ancient Greek and Roman society treat rotten bodies? What historical case studies are there to support these claims? What makes a body normal versus abnormal in antiquity and who was in a position to decide? It also aims to determine how Graeco-Roman medicine and society treated necrotic and suppurative people and seeks to examine the disabilities and stigmas associated with such conditions to decipher normative practices that can be compared to the more positive attitudes early Christians demonstrated toward the sick. Garland, in *The Eye of the Beholder*, describes how the Greeks and Romans utilized deformity for a variety of social ends and that deformed people were often forced into predetermined social roles by normative society. Focusing primarily on the case studies mentioned in Garland’s book, I have created four separate typologies that merit further exploration including hired entertainers, skilled trade workers, scapegoats, and beggars/outcasts.
Hired Entertainers

Having survived a severe necrotic infection a person would often have been left with missing limbs or disfiguring scars, and finding employment in such a condition was difficult due to stigmas associated with illness and physical appearance. Unlike modern Western society, where there are laws against discrimination in the workplace and services to assist with finding a job, the disabled and deformed in the ancient world were not afforded any such accommodations. However, the prevalence of people suffering from such conditions was higher in the ancient world than in our modern society. Thus, the ancients likely would have had more experience interacting with people with necrotic infections which may have reducing the shocking nature of such infections, in comparison to modern perspectives.

Garland writes that “the world of entertainment probably provided the most lucrative form of employment for a talented minority.”84 Two examples of hired entertainers that disfigured people often played in the ancient world were clowns and mimes. Whereas clowns and mimes today paint their faces with a variety of colours to distort their appearances, it is most likely that ancient clowns and mimes were selected because of their naturally shocking facial appearances due to deformities and scars. Garland suggests that although the satirist Lucian wrote in parody “we need hardly doubt that clowns were chosen in part for their ugly and misshapen appearance;” Garland explains, “some mimes appear to have relied exclusively on facial and other peculiarities, rather than on masks and make up for dramatic effect.”85 The amusement the elites of Greece and Rome found in the shocking and deformed appearances

84 Garland, The Eye of the Beholder, 32.
85 Ibid., 33.
of these entertainers also applied to the interest in seeing decaying limbs, amputated extremities, and massive scaring from major wounds, purulent infections and necrosis of the tissue and bone. Osteological data collected from the Kerameikos Cemetery in Athens produced one curious skull of a man from the tomb of the Messenians where the skull had an iron nail embedded in it which must have occurred antemortem. The most interesting part, however, is that “the nail was not the cause of death nor would it have been difficult or dangerous to remove while the man was still living.”

Perhaps the unique and shocking appearance of the man with the protruding nail presented him with employment opportunities for entertaining the elites with his appearance. Hence, there is ancient evidence to suggest that people with altered physical appearances due to suppurative and necrotic infections could have found employment as hired entertainment, not unlike the outcast performers of more modern Freak Shows and roadside attractions. While many were relegated to the position of entertainer based on their appearance some disabled people were able to find employment using a skill or trade which provided them not only with an income but a meaningful social role.

**Skilled Trade Workers**

Depending upon the disability, some trade or skilled work opportunities were left entirely or almost entirely to persons with specific disabilities. Trades such as pottery-making, vase painting, leather-working, metal-working, banking, retailing, and teaching were all sedentary and accessible employment options for any disabled person who was adequately educated. If a person happened to contract a suppurative infection and, thus, lost a limb, the

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86 Ibid., 19.
ability to walk or went blind from ophthalmia, many of the above employment opportunities would have been possible and could have provided a meaningful salary and position in society. Historical precedent of this can be found in ancient Greek mythology. This is most apparent in accounts of the disabled god Hephaistos who was often treated with disdain or as the butt of cheap humour. His life in many ways mirrors the lives of many disabled people of the Graeco-Roman world. Although he was often treated abusively it has been proposed that ancient Greeks believed, in principle, that defects and disabilities came in conjunction with special gifts or talents (hence why one might presume that blind people make good poets or seers). This worldview offered a more positive spin on disability suggesting that with certain restrictions and sorrows came some advantages. As such, a person with an amputated limb or an oozing abscess may have found meaningful employment and a valuable social role which would reduce socio-cultural stigmas related to disease, disability, and social worth. In this vein, attitudes towards the deformed were complex. Whereas some people were subject to ridicule in order to make a living, others were viewed as harbingers of special abilities. Unfortunately, even more diseased/deformed people were deemed undesirables and marginalized to the outskirts of society.

Scapegoats

The marginalization of disabled people occurred in part because those who lived on the periphery of society with no meaningful social role, throughout history, have incited fear and anxiety from normative society. Ancient Greeks and Romans who were disabled or deformed tended to become victims of psychological and physical persecution which could result in severe trauma and at times death. Often those who were marginalized due to their
perceived ugliness and deformed appearances fell victim to the anger of normative society. As Garland explains, it was thought that the deformed harboured anger and resentment towards nature, the gods, and the rest of society; and that the disabled blamed healthy members of society for their unfortunate station in life.\textsuperscript{87} It was this perceived anger towards the rest of the world that allowed normative society to justify the marginalization and mistreatment of the deformed. Garland goes on to describe how:

In Greek society the psychological need to personalise the dread evoked by some crisis was institutionalised by the practice of selecting a victim known as a \textit{pharmakos} or ‘scapegoat’, upon whom the blame for the current evils that beset the community was then laid. The victim, who was often but not invariably ugly and deformed, underwent ritual expulsion or, much less commonly it seems, execution.\textsuperscript{88}

The pharmakos ritual is evidence of the abuse, mistreatment, and anxiety directed towards the severely deformed, disabled, and marginalized members of ancient Greece. Many of these undesirables would have had great difficulty finding traditional employment and thus they would have been forced to beg for their subsistence.

\textbf{Beggars and Outcasts}

Following any period of infirmity due to an infectious disease, traumatic injury and possible surgical intervention, many people would have suffered not only physically but socially and economically as well. Limited employment opportunities in tandem with social stigmatization of the sick would have left many unfortunates not only marginalized from society but physically forced to the borders of the ancient world. Garland explains that the disabled were often held in disdain by their families and the rest of society alike. Thus, many

\textsuperscript{87} This theory that the disabled would be angry with Nature agrees with the arguments made in \textit{On the Sacred Disease} that the natural word (although passively controlled by the gods) was the cause of disease.

\textsuperscript{88} Garland, \textit{The Eye of the Beholder}, 23.
disabled people were forced to live on the streets and beg as their only means of survival. As Garland puts it, the societies of ancient Greece and Rome “by and large viewed [the] disabled as expendable and useless.”

Further evidence of the abuse and abandonment of the disabled can be found in Greek literature including works by Sophocles and Seneca.

In Sophocles’ *Philoctetes*, Philoctetes is “abandoned on the island of Lemnos by fellow countrymen on account of his festering and malodorous wound [which testifies] to the practice of rejecting those whose physical condition was deemed offensive to the rest of society.”

On this case, Martha L. Rose, in *The Staff of Oedipus: Transforming Disability in Ancient Greece*, comments that “the stench of Philoctetes’ wound, which had festered for ten years, was a literary device, certainly, but surely familiar to the fifth-century B.C. Athenian audience and drawn from direct observations of a festering wound.”

Seneca’s story, *Controversiae*, describes a man who mutilates children by “smashing legs, cutting off arms, tearing out tongues and eyes, and beating shoulder blades into humps” so that he can send them out to beg and collect money for him.”

It is worth noting that such beatings would likely have resulted in a host of different purulent and gangrenous infections (as was ascertained by the previous exploration of the prevalence of necrotic infection). From here, Garland suggests that regardless of whether Seneca’s story is fiction or based on real events this texts “provides not only a haunting image of the physical appearance of those who

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89 Ibid., 29. This tension surrounding the presence of the deformed and disabled is the same tension that led to the ritual sacrifice, violence, and exile discussed in the previous section on pharmakos and the desire to blame the deformed for any disasters to befall the ancient world.

90 Ibid.


begged alms, but also an object-lesson in their vulnerability to extortion and exploitation by unprincipled ‘patrons.’” Moreover, it provides insight into a new level of suffering for the already disadvantaged and downtrodden.

Although these cases, by modern standards, portray abuses towards disabled people and social injustices, against which we seek to protect and legislate, it is worth noting that there were also job opportunities (even if they may be demeaning by modern standards) and the possibility of living independently or with the assistance of compassionate family members. As such, this examination of the lives of deformed and rotting people in ancient Greece and Rome indicates there was likely more compassion and opportunity in ancient Graeco-Roman societies than is generally presumed in modern conceptions of the ancient past. For instance, even though Seneca’s story depicts great suffering and violence, Greek audiences would not have found the story credible if people were not giving alms to at least some unfortunate, outcast members of society. Through the lens of disability studies, Rose contends that the care of disabled Greek citizens was constantly being renegotiated in the hopes of providing sufficient health care and social support. For some, family members took on the responsibility of caring for a sick relative. Herodotus wrote about Cleobis and Biton who “were so dutiful that they yoked a cart to themselves in order to transport their old mother.” One instance of an injured man requesting his sister’s care is documented in a letter described by Plutarch in Solon. The letter reads: “For when I want to turn over on to my

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93 Ibid.
94 Rose, The Staff of Oedipus, 2.
95 Ibid., 27.
other side, I cannot do it by myself, unless two other persons turn me over, and I have no one to give me so much as a cup of water.”96 Having described his dire situation, the man goes on to ask his sister to travel to him and aid in his care.97 Additionally, there is also evidence that lame and immobile people visited sanctuaries of Asclepius and were carried or otherwise transported with the help of others, be they family or not; and, therefore they must have had enough social support to accomplish such a journey.98 This however should not be taken as evidence that all families dutifully and willingly cared for their disabled members, but instead it shows that a precedent was established that suggested caring for family members was, in some situations, the ideal response. Ancient Greek philosophers argued for the fair treatment of the disabled when the disability was caused by a natural event, such as a purulent infection, and not the fault of the suffering person. In Protagoras, Plato writes that Socrates espoused, “when people believe that others are experiencing misfortune by Nature or by luck nobody gets angry...or punishes them in the hopes of changing them. Instead they feel pity towards them.”99

Outside of familial compassion and the considerate arguments of philosophers, where a person lived also impacted how society treated them. For instance, Athens is generally characterised as having had a more compassionate approach towards diseased and disabled citizens in comparison to other ancient societies of the same period. One reason for this is that Athens provided some sorts of welfare to its disabled citizens. Although, how helpful or

96 Ibid.
97 Ibid.
98 Ibid., 25.
fair the welfare system was is debatable. Also, Athens had experience with serious epidemics, such as the plague of 429 BCE that would have left many citizens with open wounds and supplicative infections resulting in disfigured or deformed body parts, and almost everyone would have been aware of the suffering that resulted from such an epidemic.

What should be taken away here is that there was no cohesive method or system of socio-cultural ideologies present in the ancient Graeco-Roman world regarding attitudes towards people with rotting or missing limbs or foul, festering ulcers and pustulating sores. Even city to city, philosophies and practices concerning the deformed or disabled were different, and over time policies and practices continued to change. Additionally, there were multiple factors that influenced how a society dealt with its sick and disabled members, including if the disease was considered natural or the result of impure behaviors. Moreover, local civil customs such as the Athenian welfare system and the ability of a person to find employment played a role in how that person could exist within any given society. Garland summarizes these points well, explaining that:

Opportunities for enrichment and advancement existed for those who were prepared to submit to being ridiculed and humiliated with a good grace. Those who could convince others that their deformity invested them with special powers, and those, too, who possessed special talents, would have been largely liberated from the constraints which governed the lives of the rest.

Garland explains that Athens was the only ancient community known to have provided financial assistance to the poor and disabled. The process required the disabled person to apply for the support which was followed by a physical examination by the Council to confirm the validity of the claim. If the Council was sufficiently convinced the disabled citizen would receive two obols daily from the public purse. The disability per diem varied throughout the centuries from its initial one obol in the fifth century BCE up to five obols in the third century BCE, however, it was “at all times barely sufficient to support the disabled at the poverty line” (Garland, 36).


Garland, The Eye of the Beholder, 43.
However, even if one could find a meaningful social role, the perception of society towards abnormal bodies was still largely that being sick or disabled was an undesirable state. For physicians, disease was a natural imbalance to be treated with an “opposites cure opposites” approach that was based on experience and observation. But the general population might view the cause of disease to be the result of impurity, a punishment for angering the gods or a malevolent curse, all of which buttressed negative stereotypes and stigmatization.

Three conclusions can be drawn from this chapter: first, there were numerous ways for someone to contract a necrotic infection in the ancient world. There are many cases from the Hippocratic and Galenic Corpuses, ranging from minor cuts and bruises to major traumatic injuries, broken bones, chronic necrosis, and improper care of wounds that all led to a variety of purulent infections. Second, most people viewed the blackening of limbs, purulent sores, gangrene and mortification as undesirable bodily states and sought medical treatment to cure their necrotic diseases. For the authors of the medical accounts of rotting and purulent flesh to have documented so many cases of infections, and to have outlined specific medical approaches for treating such cases, one can infer that these infections were common; and, that people were often seeking the assistance of a physician to treat their medical problems. This is evidenced in both the Hippocratic and Galenic Corpuses which describe diseases of this nature as imbalances of the humours and damaging to the patient. Third, some people who suffered from fleshing eating diseases and massive infections ended up with deformities and

\[103\] Moreover, Hippocrates and Galen both often dealt with elite clientele due to their high social standing and such clientele would have also had access to the best nutrition, hygiene, and living spaces. As such, we can assume their health was better than the poorer members of society who had to manage with low nutrient diets and exposure to dirtier and more dangerous living situations. Based on this, I argue that the number of cases of rotting flesh is likely higher than what is depicted in these corpuses.
disabilities that made social life a challenge. Some people were ostracized from society, violently attacked or abused, used as ritual scapegoats and forced to beg; however, some more positive social roles were available to some skilled disabled people. If the disabled person could find meaningful employment in a socially valued trade, they would be less likely to succumb to the stigmas and prejudices associated with the aforementioned medical conditions.

In review, Chapter One analyzed medical literature from the works of ancient physicians such as Hippocrates and Galen, demonstrating that their theories and practices stemmed from a belief in the humoural system and the notion that any imbalance was the result of disease and required medical intervention. Furthermore, this chapter showed that ancient attitudes towards necrotic and suppurative people were predominantly pejorative due to the stigmatization of the deformed and disabled. The following chapter parts ways from many of the previously discussed theories, ideologies and conceptions of rotting bodies. Chapter Two examines the lives of Christian saints from the third to sixth century CE who suffered from necrotic and purulent infections and the more positive attitude early Christians had towards people with rotting flesh. It focuses on the symbolism of rotting flesh and the ways in which some saints used their ulcers and abscesses to transform their bodies into something more divine and as pedagogical tools. Additionally, it shows that rotting saints were able to fill valuable social roles in their societies compared to being relegated to subordinate social roles reserved for the deformed and disabled members of ancient Graeco-Roman society.
Chapter Two: Pus and Necrosis in the Lives of Saints: The Rotting Flesh of Holy People in Early Christian Hagiography

From the third to sixth century CE early Christian saints transfigured their bodies with fetid abscesses and suppurative sores and their wounds served as markers of their spiritual fortitude. This chapter argues that early Christianity re-valenced rot and necrosis in positive socio-cultural terms relative to popular non-Christian attitudes outlined in the previous chapter. It demonstrates this phenomenon by exploring hagiographical accounts of the lives of saints that include graphic descriptions of saints with gangrenous, blackened, and oozing body parts. These lives also depict the saints’ rotting bodies serving a positive socio-religious function. Moreover, it looks at the symbolism and function of illness in the lives of early Christians in order to illuminate how illness, decay, and suffering were expected aspects of Christian life and consequences of Original Sin. To begin, however, this chapter looks at evidence of the shift in attitudes from Graeco-Roman physicians, who argued that disease was caused by imbalance and was contradictory to the ideal physical state, to the Christian ideology that diseases could be cultivated and used as tools for the promulgation of God’s will.

On the matters of human anatomy and physiology most scholars would agree that there was some overlapping of opinions between ancient physicians and early Christians; for instance, both groups generally accepted the humoural system as the foundation for understanding how the corporeal body functioned. However, what is most important for this thesis is how Christianity differed from ancient medicine. In this regard, Susan Holman, in
“Healing the Social Leper in Gregory of Nyssa’s and Gregory of Nazianzus’s Greek ‘περ’ι φιλοπτωχια,’” argues that the manner in which lepers were treated by the non-Christian population was opposite to early Christian ideologies and attitudes of compassion and charity toward the poor and the sick (philosophies which were inspired by the life of Christ).

In her article, Holman explains that Aretaeus (c. 1st century CE, physician) argued that leprosy was caused by an air-born contagion. This meant that lepers were seen as dangerous and contagious. This triggered a reaction of fear and anxiety towards the diseased bodies of lepers within their community and as a result most lepers were exiled and forced to suffer on the margins of society. Holman draws from three late fourth century CE sermons written by Gregory of Nyssa and Gregory of Nazianzus,104 which address the concern some Christians had regarding the common fear of contagion. They also make clear that in spite of some anxieties the moral imperative to imitate Christ by serving the needy and healing the sick was more important. For instance, Gregory of Nazianzus espoused that “Basil’s care was for the sick and the relief of their wounds, and the imitation of Christ, by cleansing leprosy not by word but in deed.”105 As such this quote serves to demonstrate that some Christians still subscribed to the popular view that leprosy was dangerous; but the moral mandate was clear, namely, it was the duty of all Christians to help the needy.

As such, Gregory of Nyssa and Gregory of Nazianzus argued against the theory that leprosy was contagious. Instead they agreed with each other that leprosy was caused by

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104 These include one sermon from Gregory of Nazianzus entitled Oratio 14, and two sermons from Gregory of Nyssa entitled De pauperibus amandis: Oratio duo. Together these sermons make up the περ’ι φιλοπτωχια, or “On the Love of the Poor.”

putrid humours which are not contagious. By removing the labels of contagion and danger from this disease, Christianity was able to safely establish a new and more positive social role for people suffering with leprosy. While other communities exiled their sick based on social anxieties regarding the spread of disease, Christianity re-appropriated disease as an opportunity to imitate Christ. Holman remarks that “Like Nyssen, Nazianzen exhorts his audience to enter into physical contact with the sick to fulfill the moral mandate of a *philanthropia* that, in turn, may open one to receiving spiritual healing.”106 In this manner, disease became a tool for purifying the soul through acts of charity and for demonstrating one’s devotion to Christ.

Central to Holman’s argument is the concept she terms “reverse contagion.” She explains that while contagion theory puts forward the idea that physical contact with the sick will cause the spread of disease, “reverse contagion” dictates that through physical contact with the sick one can be healed of one’s own sins. Holman summarizes this concept asserting that:

> Although Gregory of Nyssa argues that leprosy is exclusively internal and not contagious, he deliberately uses the image of contagion to argue for spiritual healing based on a type of "reverse contagion." That is, he suggests that goodness and salvation are also contagious. This contagion of holiness may be "caught" through direct contact with lepers, those channels of divine sanctity who are "always able to run to God." The persons who assist them may receive healing of their own "diseases" of wealth and greed. In this way, the church needs contact with lepers in order to cure spiritual diseases. Yet, lepers also need contact with the healthy to relieve their own very physical suffering.107

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106 Ibid., 295.
107 Ibid., 303.
In this manner, Gregory of Nyssa is creating a positive social role for the diseased lepers that becomes mutually beneficial to the sick and the healthy. This mutual relationship is comparable to the relationship between the viewers of the sick saints’ bodies and the saints themselves. In this vein, saints were often dependant upon alms for all their physical needs while the crowd was reliant on the power of the saints to advise them, teach them and heal them of their sins. As such, the role of suffering is significant in that it seems to imbue the sufferer with spiritual power and the ability to benefit the healthy through miraculous deeds.

The Significance of Suffering

The significance of suffering and the self-identification of early Christians as a community of sufferers was primarily a result of their desire to imitate Christ’s life and his teachings. In the Beatitudes (Matt 5.3-5.12, Luke 6.24-6.26), Christ taught his disciples that it is far better to be poor, sick, and suffering for one will be called a child of God. Theodoret, in his hagiography of saint Symeon, notes that Symeon converted to Christianity after hearing the Beatitude “blessed are those who mourn and weep.” Moreover, the Beatitudes emphasize the significance of the persecution of Christ’s followers as a result of their adherence to their faith, stating:

Blessed are those who are persecuted for righteousness’ sake, for theirs is the kingdom of heaven. Blessed are you when people revile you and persecute you and utter all kinds of evil against you falsely on my account. Rejoice and be glad, for your reward is great in heaven, for in the same way they persecuted the prophets who were before you.108

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This excerpt highlights how pervasive the representation of followers of Christ as sufferers and as victims of persecution was at the time the Gospels of Matthew and Luke were composed. Additionally, it associates the persecution of all Christians with the persecution and suffering of historic and heroic religious prophets and their authority. This narrative tactic was employed regularly by multiple authors in the lives of the saints and the acts of the martyrs in order to establish the religious authority of the saint and the author alike, as well as to supplant the life of the saint into an already accepted historical narrative. Symeon’s hagiographies accomplish this by describing his deeds as equal to when Jeremiah placed a wooden, and later an iron, collar on his neck; or when Ezekiel lay for forty days on his right side and a hundred and fifty on his left. Doran, in *The Lives of Simeon Stylites*, concludes that “in the Syriac Life... Simeon is placed, not simply among the spectacular prophets, but in the line of all God’s heroes.”109 The significance of suffering was one reason saints chose to lead ascetic lives and to cultivate disease but it was not the only motivating factor. The Christian focus on the afterlife and the foregoing of all things corporeal or this worldly also compelled many saints to neglect their physical selves and strengthen their eternal selves.

In early Christianity, the focus was not supposed to be on this world, this body, or even this life. Instead, Christians were advised to embrace lives of suffering, pain, and death in exchange for the paradisal life promised to them in heaven. This sentiment is substantiated by Christian authorities such as Polycarp (69 CE- 156 CE, Smyrna) who taught not to live in the present world, or Cyprian (210 CE – 258 CE, Carthage) who exclaimed, “This is finally the difference between us and the others who do not know God, that they complain and murmur...

in adversity, while adversity does not turn us from the truth of virtue and faith, but proves us in suffering. “\textsuperscript{110} The identification of Christians as sufferers was also noted in non-Christian sources, such as in Lucian’s \textit{Proteus Perregrinus}, in which he mocked the Christian community describing how, “The poor wretches have convinced themselves, first and foremost, that they are going to be immortal and live for all time, in consequence of which they despise death and even willingly give themselves into custody most of them.”\textsuperscript{111} As a result, many Christians could conceive of no greater method by which to prove their devotion to Christ and earn their place in heaven than to be persecuted and executed by the Roman empire.

This interpretation of suffering inspired many Christians to joyously seek the violent and painful deaths of martyrdom, or the extreme asceticism of some saints, as methods for imitating Christ. Tertullian (160 CE – 220 CE, Carthage) offered an example of an entire community of Christians offering themselves for execution to Arrius Antoninus (c. 69 CE) who released almost all of them stating “‘wretched men if you wish to die, you have cliffs and ropes to hang yourselves.” On this matter, Perkins writes, “at this point in time Christians appeared to have been more willing to die than Roman officials were to punish them.”\textsuperscript{112}

Following Constantine’s rule in the early fourth century, and the resulting adoption of Christianity as a tolerated religion, the persecution and execution of Christians by the Roman empire was over. However, this meant Christians had to devise new and creative ways to maintain their status as a community of sufferers and show their devotion to Christ in a

\textsuperscript{111} Perkins, \textit{The Suffering Self}, 21.
\textsuperscript{112} Ibid.
similarly spectacular way. It was from the ashes of the martyrs that the holy rotting bodies of the saints would rise.

Following the acts of the martyrs, hagiographical texts and the lives of the saints detailed in them allowed Christians a new platform for continuing the spectacle of suffering Christian bodies. Perkins cites a debate between Caecilius and Octavius, regarding the purpose of suffering, demonstrating the positive outlook Christians had towards sickness, disease, and death. She writes:

A rebuttal by Octavius ended the debate and obviously secured Caecilius’ conversion…. [Octavius] showed how within the Christian paradigm suffering functioned for good. For Christians “human and bodily infirmities [corpus humana vitia] are not a punishment but a militia, a school of discipline.” God did love Christians and could have helped them, but used infirmities to explore and test each one. Octavius describes the pleasure God had at seeing Christians withstand suffering: “How fair a spectacle for God to see when a Christian stands face to face with pain.”

Crislip finds a similar view express in his analysis of early Christian theologian Basil of Caesarea’s (330 CE – 379 CE, Kayseri) understanding of the cause of illness. This interpretation depicts God allowing sickness and health to exist in tandem in the world as a means by which people can be physically and spiritual transformed and transfigured, or as a method by which God can interact with and test people.

Some Christians also believed they could attain spiritual reward through the suffering of their flesh which was bolstered by hagiographers like Antonius who, in his version of the Life of Symeon, states:

You must hunger and thirst, you must be assaulted and buffeted, you must groan and weep and be oppressed and suffer ups and downs of fortune; you must renounce

\[113\] Ibid., 39.
bodily health and desire, be humiliated and suffer much for men, for so you will be comforted by angels.114 Perkins notes that, “the Lives are filled with the specifics of the more wretched aspects of human existence; lice, worms, pus, and rotting flesh feature significantly in them.”115 These “wretched aspects” were regularly included in the Lives because of a) the ideological significance of Christians as sufferers as previously detailed and b) Christian audiences enjoyed hearing and reading about the rotting flesh of the saints. These accounts of festering wounds and oozing ulcers depicted saints not only suffering in this life, they also illustrate how saints were able to transform their physical bodies and become superhuman in nature.

Transfigurations and Functions of Holy Rotting Bodies

In this manner, asceticism provided a means by which saints could train and transform their bodies into superior states of being, elevating them to a realm between humanity and divinity. This was on account of a belief that the body was a burden on the soul, as it craves carnal pleasures that distract the soul from its divine nature. As such, by taking control of their physical bodies with necrotic sores, saints subdued their earthly flesh and made visible their superior souls. This allowed them to be transformed into something more than human, something approaching the divine. Miller, in *The Corporeal Imagination: Signifying the Holy in Late Ancient Christianity*, suggests that the body and its possession of simultaneously divine and material qualities was double edged. She writes:

On the one hand, and in a positive sense, the body could serve as a sign of the self in the process of being transfigured into its true status as image of God. One thinks of the profusion of hagiographical images, both literary and artistic, that present the bodies of the holy as suffused with light, whether in the angelic radiance flashing from the faces of desert ascetics or in mosaic portraits of saints whose visages glimmer against a

background of gold terrace. On the other hand, negatively, human beings could not be fully transfigured in the present, since their very embodiment subjected them to the ravages of time, decay, spatial limit, and ethical imperfection that were typically associated with corporeality.¹¹⁶

This was made evident in accounts of saints whose bodies were described as being mangled, worm infested and rotting in one instance, while their hagiographers also report that those who gazed upon such saints saw their skin glowing with radiant light and often noted sweet smelling perfume.¹¹⁷ In this manner, Miller contends that the diseased bodies of saints could function as a symbol that they were in the process of transforming themselves into the image of God; but, their very fleshly bodies also made it impossible for them to fully transform due to the limits of their corporeal nature. On this matter, Perkins presents an additional function of the body suggesting that the diseased bodies of saints managed to create and reinforce new socio-cultural constructions of what the ideal holy body ought to look like. By repeating similar accounts in the Lives of numerous saints the ascetic mode of living was constructed and then performed again and again. The goal of extreme ascetic practices was to transform the corporeal body into something more than human, in effect, to force the body to submit to the divine will of the soul. Ultimately, this led to the elevation of the saint to superhuman status. Miller reports that Theodoret believed that the holy men and women he wrote about in Historia Religiosa had the ability to annihilate their senses allowing them to focus on conditioning their soul. She writes:

Theodoret declared that the exemplary holy men and women about whom he wrote had “barred up the senses with God’s laws as with bolts and bars and entrusted their

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¹¹⁶ Miller, The Corporeal Imagination, 5.
¹¹⁷ It should be noted here that self-mortification and the cultivation of disease were not the only means by which a saint could take control of their corporeal body and become superhuman via ascetic practice. Some saints chose to cultivate perfect health to revert to a Pre-Fall state such as Antony, who will be discussed at length momentarily.
keys to the mind.” Once entrusted to “the mind,” that is, to spiritual guidance, however, those same senses became like strings in a musical instrument, producing “sound that was perfectly harmonious.”

In this regard, the necrotic diseases that afflicted saints were able to rapidly transform the physical body from human into something altogether novel. With the soul in control of the body and its senses, the body was able to function in perfect harmony with all its parts.

Gregory of Nyssa, in his *Great Catechetical Oration*, on the topic of the incarnation and divine nature of all humans, wrote:

> For who is so simple-minded as not to believe, when he considers the universe, that the Divine Being is in every thing, clothing Himself with it, embracing it, and residing in it. If, then, all things are in Him and He in all things, why are they ashamed of the plan of our religion which teaches that God came to be in man, seeing that we believe that not even now is He outside man. For if the manner in which God is present in us is not the same as it was in that case, yet it is none the less admitted that now, as then, He is equally in us *Now* He is commingled with us, in that He maintains nature in existence. Then He mingled Himself with our nature in order that by this mingling with the Divine Being our nature might become divine, being delivered from death and set free from the tyranny of the adversary. For His return from death becomes to this race of mortals the beginning of the return to the immortal life.

This text asserts that the Divine Being is in all things made by God, that God exists within all humans, and that he mixes his Divine Being with humanity in order to instill human beings with a divine nature. It is interesting to note here that this excerpt implies that any human being, saint or not, has the potential to cultivate their divine soul through this interaction with God. Transfigurations of this sort could simultaneously be ugly and beautiful but it was always positive as it was evidence of spiritual power and a deeper connection to God. This is apparent in the recounting of when Symeon’s disciples lay their eyes upon his brutalized body.

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118 Miller, *Corporeal Imagination*, 5.
119 Holman, “Healing the Social Leper,” 305.
and they see only a figure of beauty. Susan Ashbrook Harvey in, “The Sense of a Stylite: Perspectives on Simeon the Elder,” contends that through his ascetic practice and the disfigurement of his body, Symeon’s “reality has been transfigured from the squalor of his suffering to his perfection of god’s beloved.”¹²⁰ Harvey demonstrates that:

In Symeon we are presented with a Life of true philosophy by means of physical discipline, in pursuit of the higher virtue of the soul...the “savagery” of his asceticism (as one monk called it here), was the means by which he enabled his soul to ascend ever upward in its quest for god...So perfect is Symeon’s exercise of discipline, Theodoret tells us, that he has surpassed human nature. He lives the Angelic life.¹²¹

Crislip explains that “the Syriac poet Jacob of Serug (c. 451-521) turns [Symeon’s transformative] rot into an object of aesthetic (and ascetic) transcendence, comparing the stylite Simeon’s rotting, gangrenous foot to ‘a tree, beautiful with branches.’¹²² In the case of Syncletica’s worm ridden jaw, her rotting flesh also becomes a mode of self-transformation, “adapting the Pauline dialectic of weakness and strength (2 Cor.12:10).”¹²³ Her rotting body functions as a ruse against the Devil making her seem weak when in reality the perceived weakness of illness is her arcane strength. Miller also addresses this element of hagiographical texts remarking that the goal of ascetic practice was clearly to reshape the body; however, she regards the positive view Christians had toward this “reshaping” as perplexing. She writes, “for how, really, could desert reporters look at these bodies, pustulated feet and torsos, bodies seared by red-hot irons, and say, ‘I saw many fathers living the Angelic life?’”¹²⁴ She reconciles this peculiar phenomenon by suggesting such reshaping of

¹²¹ Ibid., 379.
¹²² Crislip, Thorns in the Flesh, 2.
¹²³ Ibid., 101-102.
¹²⁴ Miller, “Desert Asceticism and the ‘Body from Nowhere,’” 139.
saints’ bodies was understood as positive because Christians viewed these acts as directed against a particular way of perceiving the body. That is to say, per Miller, Christians viewed the human body from two perspective, to be elaborated on shortly, the “dim” which is represented by the ephemeral nature of the human body and the “dazzling” body, represented by the divine super-body. Desert asceticism transformed the body into the dazzling version allowing witnesses a glimpse at the divine and beautiful body.

The presentation of the saints’ rotting bodies as beautiful in hagiographical texts served two functions. First, it rewrote the script on what was to be viewed as beautiful by substantiating the Christian community as a distinct social group via its embracement of physical suffering and the denunciation of traditional Graeco-Roman concepts of beauty. On this matter, Geoffrey Harpham writes, “For the Christian ascetic, pagan beauty was thematized as the demonic, while the disfigured was figured as the desirable.”\(^{125}\) Umberto Eco, in his book *On Ugliness*, refers to St. Augustine’s sermon on the deformity of Christ to make the point that ugliness was made beautiful through Christ’s death. In this sermon, Augustine espouses:

> In order to maintain your faith Christ deformed himself, while he remains eternally beautiful...He was reviled and His position was deformed; a man covered with sores, one who has experienced every weakness...Had he not wished to be deformed, you would have never reacquired the divine form that you had lost. Therefore, He was deformed when He hung on the cross, but His deformity constituted our beauty.\(^{126}\)

In this manner, early Christians were able to adopt a perspective on deformed and decaying bodies that allowed them to view such bodies as beautiful and beneficial. Because of the saint’s desire to imitate Christ they took up the roles of broken, beaten, and deformed beings who suffered for the sins of others.

The second function which the saints’ rotting bodies served, perceived as something beautiful, was to symbolize that holy necrotic flesh, by means of repetitive ascetic ritual and performance, had been successfully subordinated by the superior divine soul. As such, the spectators who gazed upon the necrotic, putrefied flesh of the saints no longer perceived the corruptible human body; instead, they bore witness to the radiant divine nature emanating from that body. Miller explains these opposing perceptions of the body, briefly mentioned earlier, as follows:

The ascetic view of the human body oscillated between two modes of visual perception that can be aligned with the two views of the body, one that marks its dimness [corporeality]…and the other, its dazzle [divinity].

In this manner, when someone looked at the rotting flesh of a saint and saw only the saint’s physical body, that person was observing the dimness of flesh. Whereas, those who looked upon the same body and witnessed its radiance perceived the body through the dazzling or divine perspective. Harvey, in her analysis of Theodoret’s *Life* of Symeon Stylite, remarks that Symeon was able to achieve dominance over his body through his soul’s superior will. She explains that the body is bound by human weakness and it is through ascetic practice that God’s grace is able to reveal itself in the body. Based on the analysis of Harvey and Miller it

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127 Miller, “Desert Asceticism,” 142.
seems clear many Christians believed that human beings were simultaneously human and
divine on account of every human possessing a divine soul and a corporeal body.

Furthermore, it seems apparent that the divine soul could be trained and strengthened
through ascetic rituals that transformed, transfigured, and subordinated the physical body.

Regarding the conflict between the body which desires corporeal pleasure and the
soul which seeks the divine, it is important to ask, precisely how much of a saint’s corporeal
nature was perceived as human and how much was divine? Evidence of anxiety surrounding
this topic among early Christians can be found in Theodoret’s account of Symeon’s *Vita* when
a man travels to visit Symeon in order to confirm whether or not the saint is human or some
form of spirit. This ideological concern is similar to the early Christian Christological debate
concerning the divine nature of Christ which explored to what degree Christ was divine, if at
all, throughout his life. This correlation is exemplified by Harvey who writes:

> Scholars have traditionally seen the *Historia Religiosa* as one place where Theodoret is
> not arguing for his position as primary spokesman for Antiochene Christology, in the
debates leading up to the council of Chalcedon. But surely his Symeon represents a
mirrored image of his Christological position. Salvation for him as an achievement of
the union between humanity and god in which the integrity of each nature, human and
divine, remains intact but truly full.\(^{129}\)

In this excerpt, Harvey paints the picture of a saint attempting to find a harmonious balance
between the desires of the flesh and of the soul where the saint is both fully human and fully
divine. Miller also contends that these transfigured bodies of holy super-humans were visual
representations of the resurrected body in all its glory. She notes that there existed a
perceptual construction that enabled observers to ‘see’ saints as performance artists. What

\(^{129}\) Ibid.
the saints were performing was an enactment of the spiritual (or superhuman) body, even the resurrected body, for all to see.\textsuperscript{130} In this sense, through ascetic practice saints had an inherent ability to transform their flesh. Their transformations were evidence of their grace and guaranteed an eventual, idyllic physical state, namely, the resurrected body.

As such, accounts of festering flesh became evidence for Christians that rotting saints possessed the ability to ascend above the human realm, an ascension made visible by the fetid, putrefying bodies of saints and their ability to perform miracles. The status and visibility of such saints blurred the ontological line separating the human from the divine. The ambiguity about the body/soul distinction which the lives of saints raised caused Miller to question whether sick saints “were passive channels of divine activity, or was there an active synergy of human and divine at work in them, and if so, how was it to be pictured?”\textsuperscript{131} In other words, were the saints themselves divine and imbued with a spiritual power that allowed them to perform miracles, communicate with the Heavens, and suffer in these very specific ways? Or, were these holy men and women vessels through which god continued to be present on earth? In one instance the saint is given an active role, whereas the other subordinates the saint to merely being a conduit for God’s ultimate power. Doran suggests that Christian asceticism allowed the saints to remove themselves from human society by

\begin{enumerate}
\item Miller, “Desert Asceticism,” 137.
\item Miller, “Visceral Seeing,” 405. Interestingly, Miller also notes that the literary devices, \textit{Ekphrasis} and visceral seeing, are able to subdue dichotomies such as body/soul and human/divine by providing a mental space in which to safely contemplate these opposing qualities. She writes that late ancient arts such as this worked to subdue potential dichotomies between body and spirit, earth and heaven, material and immaterial by setting in motion an aesthetic play between planes of reality, with boundaries that are only apparently discrete. This statement demonstrates that such dichotomies did in fact appear within ancient texts and that the authors of such texts wrote in a manner to bring together opposing qualities.
\end{enumerate}
transforming their bodies so they might join the company of angels.\textsuperscript{132} Moreover, Sebastian Brock in “Early Syrian Asceticism,” has noted that Syriac tradition has interpreted the verses of Luke 20:35-36 as:

Those who have become worthy to receive that world (i.e. the kingdom) and that resurrection from the dead, do not marry, nor can they die, for they have been made equal with the angels, [and being] that sons of the resurrection [they are] like the sons of God.\textsuperscript{133}

Applying this interpretation to Syriac ascetics, such as the Stylites, leads to the suggestion that at least some Christians viewed the rotting bodies of saints as having transformed and transcended beyond the human realm and into the realm of the divine. This is significant because it shows how some saints were able to gain great power and prestige in the ancient world and ultimately influenced vast numbers of people in terms of their beliefs and behaviors. This is most evident with saints such as Symeon the Elder who drew in massive crowds with his transfigured, mutilated body and his ability to perform miracles.

In this manner, extreme acts of self-mortification and the resulting illnesses and infections were employed by holy men and women to harness the power of the resurrected and Adamic body. Peter Brown, in \textit{The Body and Society: Men, Women, & Sexual Renunciation in Early Christianity}, describes the ritualistic ascetic process in detail, writing:

The ascetics of late antiquity tended to view the human body as an ‘autarkic’ system. In ideal conditions, it was thought capable of running on its own ‘heat’; it would need only enough nourishment to keep that heat alive. In its ‘natural’ state- a state with which the ascetics tended to identify the bodies of Adam and Eve – the body had acted like a finely tuned engine, capable of ‘idling’ indefinitely. It was only the twisted will of fallen men that had crammed the body with unnecessary food, thereby generating in it

\textsuperscript{132} Doran, \textit{The Lives of Simeon Stylites}, 26.
\textsuperscript{133} NRSV, Luke 20:35-36.
the dire surplus of energy that showed itself in physical appetite, in anger, and in the
sexual urge.\textsuperscript{134}

It was in this manner that ascetic saints with rotting flesh trained and transformed their
bodies into something more than human, into something beautiful. This is not to say,
however, that the conceptualization of rotting saints as the ideal body was a pan-Christian
phenomenon; rather, early Christian thought on the symbolism and function of illness and
the body should be seen as existing on a continuum.

\textbf{Antony and Perfect Health as a Marker of Virtue}

As Crislip argues, from the third to sixth century CE, some Christians saw the
attainment of a physically perfect body, free from disease, as an indication of high moral
standing and superior spirituality, others saw illness as something to be cultivated for its
ability to purify the soul and as a powerful form of asceticism, while many fell somewhere on
a spectrum between these two extremes. Crislip explains that some Christians believed that
“physical affliction purified the soul and that the flesh could receive no more glorious
adornment than ulcers and open sores.”\textsuperscript{135} With this in mind, ideologies pertaining to illness
and disease can be divided into two primary categories. First, some argued for illness as a
positive and powerful force in the ascetic lives of diseased and disfigured saints and their
followers. In contrast, some argued that healthy “beautiful” bodies were signs of spiritual
superiority. Crislip points to the hagiography of Antony, written by Athanasius circa 355 CE, to
establish the most extreme form of perfect health demonstrating power and spirituality

\textsuperscript{134} Peter Brown, \textit{The Body and Society: Men, Women, & Sexual Renunciation in Early Christianity} (New
\textsuperscript{135} Crislip, \textit{Thorns in the Flesh}, 1.
which he then contrasts with the most extreme accounts of rotting saints. Crislip writes that “Athanasius of Alexandria in his *Life of Antony* famously characterized the same period of monasticism’s birth as a desert transformed into a city of health, led by Antony as a ‘physician (*iatros*) for Egypt.’”\(^{136}\) This juxtaposition highlights the way that some Christians viewed health as a sign of virtue, where some saw the transformed bodies of deformed saints as evidence of spiritual power, and yet others expressed anxieties which do not fit into a simple dichotomous relationship.

The successful adoption of Antony’s particular model of health and the popularity of his *Life* with Christian readers (made apparent by its rapid translation into multiple languages and its dissemination throughout the ancient world) suggests that the theologies espoused within it were also popular among early Christian communities. However, this is not to say that there weren’t Christians who were unwilling or hesitant to subscribe to this conception of the ideal physical state as we will see in the *Lives* of rotting saints. Crislip notes that, “Writers in the wake of *Life of Antony*, for all its influence, did not adopt its hagiographic model without anxiety.”\(^{137}\)

Early concepts of what a holy body ought to look like are further muddied by hagiographers who adopted this style of writing but modified and subverted Athanasius’ template for monastic health, which resulted in more confusion regarding the ideal physical state. One such example is the *Life of Onnophrius* which adopts the “master narrative” of St. Antony but complicates concepts pertaining to why holy bodies are caused to suffer. In the case of Onnophrius, “by enduring suffering (*hise*) through ascetic practices, the monk attracts the

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\(^{136}\) ibid.

\(^{137}\) Ibid., 60.
mercy of Christ or the angels, who strengthen the monk and provide all the necessities of life for him.”

Thus, while this paradigm of health and beauty may have been adopted by some Christians, Crislip warns us to take pause and “be wary of taking these preternatural states of health at face value.”

He alludes to the notion that early Christians may have been suspicious themselves about the validity of stories that described what some understood to be unattainable bodily states, elaborating that asceticism could not reliably create the body types found in some hagiographies; most notably, “Monks, even those who followed the example of Antony, could fall ill and die at any point.”

As Crislip has stated, holy people following Antony’s methods were still succumbing to horrible diseases and dying; as a result, the meaning and function of illness was still unclear. Hence, we can begin to see how complex Christian theology concerning illness and the body was in light of the Life of Antony. On the one hand, the Life of Antony emphasises the magnificence of Antony’s body after being holed up in a sealed cell for an incredible twenty-two years, emerging unchanged and achieving a perfect bodily state. Athanasius does address the issue of disease and festering flesh when he describes a sick and tormented girl who came to see Antony for healing. She is described as having “discharge from [her] eyes, nose and ears which turned to worms when it fell to the ground and her body was paralyzed and her eyes unnatural.”

By having Antony, in his state of perfect health, cure the worm

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138 Ibid., 74.
139 Ibid., 79.
140 Ibid.
141 Stouck, Medieval Saint, 65.
142 Ibid., 62. When compared to Symeon’s worm that turns into a pearl when it falls from his thigh to the ground, this is clearly no miracle to be marveled at.
ridden and demonically possessed girl, Athanasius sends the message, via Antony’s ideal bodily state, that health dominates sickness in the same way that Good triumphs over Evil. The inclusion of this healing story of a girl dripping with pus and worms in Antony’s hagiography indicates the author’s desire to juxtapose illness, rot, and demonic possession against the health, healing, and superhuman corporeality demonstrated by Antony.

Another key concept regarding the interpretation and role of disease in the lives of saints in *Life of Antony* is a theme of demons as the cause of illness. In antiquity, many Christians understood the desert to be a dangerous place populated with demons waiting to battle humankind; thus, the desert ascetics were the first line of defense against their malevolent intentions. The deformed limbs and purulent wounds of the desert saints became evidence of this supernatural battle and the ability of the saints to stand between the Devil and the human world. This theology further motivated Christians to view the rotting bodies of saints in a positive light as they revered the battle scars that adorned the bodies of their champions against evil. Based on the reoccurring depictions in hagiographies of demons attacking saints this thesis contends that demons were perceived as evil creatures envious of humanity’s relationship with God and compelled to deceive human beings to distract them from leading virtuous lives. This is also apparent in Antony’s Life as he battles and defeats numerous demons in the desert. The role of the saint as a champion against demons is

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144 Stouck, *Medieval Saints*, 57-64.
common place throughout the hagiographical genre as it is a reoccurring theme in the Lives and miraculous deeds of many saints regardless of how illness is depicted in the account.

While Antony stands as the primary example of the symbolism and function of perfect health in the lives of saints, John Chrysostom in his *Hom. de Statuis 1.5-1.7* expresses eight clear reasons why holy people succumb to disease. Crislip concisely summarizes these points, writing:

> There are eight reasons why the holy fall ill: illness prevents the saints from falling prey to vainglory and arrogance; it proves to others that they are indeed human and not divine; it better reveals god’s power when preached through the weak and sick; it proves that ascetics and saints do not live their lives out of hope for earthly rewards; it may convince others of the reality of the resurrection, since even the holiest of men are not rewarded in this lifetime; it consoles those who have also fallen ill; it prevents followers from being dissuaded from imitating the saints, assuming them to partake of a different physiological nature; and it allows Christians to distinguish between the truly blessed and the cursed.145

What is interesting here and what has been discussed already is the concern some Christians had regarding the human/divine nature of the saints. As a result, illness is used to prove the saint is of human nature and capable of suffering. Inspiration for the saints to engage in acts of physical suffering as penance for their own sins and the sins of humanity came from the exemplary life of Jesus Christ. For many Christians, Christ’s crucified body was an example of a battered mutilated body, marked by open wounds, and dead flesh. His resurrected body became a symbol of the power that comes from one’s willingness to suffer for the sins of others through God’s will.

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Theologian and sociologist Nancy L. Eiesland, in her book *The Disabled God: Toward a Liberatory Theology of Disability*, “draws on feminist thought by interpreting the disabled god [Jesus] as a figure for human interdependence and mutuality of care.”146 In her book, Eiesland makes the claim that Jesus Christ “is often portrayed as disabled...[and] urges Christian narratives to resymbolize disability through the ‘liberatory realism’ of acknowledging disability as the human condition, embodied in the figure of Christ.”147 Eiesland’s conceptualization of Christ as the impetus for a revolutionary attitude towards a spectrum of human conditions is in sync with my argument that early Christian attitudes towards suffering bodies, in general, offered the possibility of powerful social roles for holy rotting bodies in particular. With Christ as the pinnacle of spiritual perfection, the saints had powerful inspiration to stay the course and to suffer selflessly in accordance with God’s will. Eco argues that the acceptance of the “ugliness” of the disabled and deformed Christ on the cross was present yet not immediately accepted. He writes:

True, there was a page in Isaiah in which the Messiah is portrayed as disfigured and suffering, and this mention has not escaped certain Fathers of the Church, but then Augustine reabsorbed this scandalous evidence into his pascalistic vision, stating that Jesus certainly appeared deformed when he was hanging on the cross, but through that superficial deformity He expressed the inner beauty of his sacrifice and the glory it promised us.148

The notion that the deformed body of Christ is both ugly and beautiful substantiates my claim that it is more accurate to look at health and illness in the lives of saints as complementary elements appose to opposite states of being as certain illnesses came to represent strength

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147 Ibid.
and power. This concept is comparable to how many Christians viewed the broken, bloodied, rotting, worm infested bodies of the saints, not as ugly, but as expressions of their beauty and sacrifice to God for all humanity. Furthermore, suffering was not for the weak, it took great strength to live an ascetic life and it required God’s support to surpass the normal limits of the human body. Therefore, if a saint could maintain such an arduous lifestyle it was an indication that he or she was in God’s favour and doing God’s work. These onerous lives are detailed in hagiographical texts and contain descriptions of numerous saints living with necrotic infections, skin diseases, opens wounds, oozing ulcers and decaying bones.

Early Christianity put forward a theology of illness that states that illness and decay, as they pertain to the human body, were the direct results of humanity’s ejection from the Garden of Eden. Crislip writes that while the Genesis description of this event only vaguely touches upon the topic of illness, pain, and death “the popular and widely translated parabiblical Life of Adam and Eve makes the casual connection between the fall and illness painfully clear.”\(^{149}\) The Life of Adam and Eve dates back to the first century CE and marks The Fall as the primary cause of illness, death, and decay. This is one manner in which early Christianity differentiated itself from the rest of the ancient world.

Unlike other ancient concepts of the causation of illness, such as, nature, humoural imbalances, or jealous gods, early Christians understood illness as punishment for humanity’s sins and a debt that must be paid for all eternity.\(^{150}\) Illness was neither natural nor demonic, it

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\(^{149}\) Crislip, *Thorns in the Flesh*, 3.

\(^{150}\) Ibid.
was and still is the punishment humanity must endure because of its inherited Original Sin.

Crislip notes that:

In early Christian tradition illness, bodily decline and decay, and pain, as Elaine Scarry and Teresa Shaw have variously argued, were understood as direct consequences of the first humans’ ejection from Eden and god’s curse upon the pair and their descendants.  

In the case of Syncletica, Crislip states that disease becomes a remedy for the ills of humanity’s fallen existence. Her hagiography depicts a moment when her diseased flesh is directly responsible for healing the souls of the women around her. It takes place when Pseudo-Athanasius declares that “in the longer run benefit was conferred, for the women contemplated her suffering with their own eyes, they were strengthened in their will; the wounds in her body healed their afflicted souls.” As such, the saint’s rotting body becomes the impetus for the spiritual healing of her followers. Crislip discusses the need for healing on a cosmic scale noting:

The popular *Life of Adam and Eve* thus elaborates on the curse [of illness, death and decay] implied in the biblical account. Disease and decrepitude are neither “normal” components of the human body nor diabolical ruses by jealous gods unleashed in humanity (as in Hesiod’s version of the Pandora’s jar myth) but just punishment for humanity’s sins, punishment that must be paid out throughout the generations, forever.

Taking this concept further, I hypothesize that some Christians subscribed to a theology that the saints possessed an ability to suffer in a way that purified their individual souls and the collective souls of all Christians. In contemplation of this role of illness in the lives of saints, an

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151 Ibid.
early twentieth century scholar E. M. Cioran, in *Tears and Saints*, makes plain that the role of the saints’ bodies and of Christian asceticism (which he terms “saintliness”) was to function as the response to humanity’s collective disease. Moreover, he argues that illness is the primary factor connecting this earthly world with the heavens. He writes:

Had there not been any illnesses in the world, there would not have been any saints, for until now there has not been a single healthy one. Saintliness is the cosmic apogee of illness, the transcendental fluorescence of rot. Illnesses have brought heaven close to earth. Without them, heaven and earth would not have known each other. The need for consolation went further than any illness and, at the point of intersection between heaven and earth, it gave birth to sainthood.\(^{154}\)

What is significant here is that Cioran contends that illness and the saint, together, became indicators of a connection between heaven and earth and functioned as a method of communication between God and humanity. Like Christ who suffered and died so that the sins of humanity could be forgiven, the saints demonstrate this theology in their lives re-enacting the same sacrifice on a smaller scale. This socially valuable activity elevated sick saints to a higher level of spirituality and social position in the eyes of other Christians. The more a saint suffered through the rotting and decaying of his or her flesh the more humanity benefited and the more successful his or her fight against the devil was perceived to be. It is for this reason that Anchorites and Coenobites suffered, by making themselves sick through the mastering of ascetic practices. As such, the sickly saint was cleansed of his or her sins through ascetic practice and the resulting illnesses. One of the most extreme and well-known

accounts of a saint cultivating illness and gladly suffering through self-mortifying asceticism is Symeon the Elder, who lived from 387 CE to 459 CE in Syria.

**The Stylites: Symeon the Elder, Daniel and Joshua**

The details of Symeon the Elder’s early years are contradictory and inconsistent throughout the extant Lives of Symeon. However, they all agree that he tended his parents’ flocks as a child, had a powerful urge to devote himself to God, and was the first Christian ascetic to ascend and live atop a stone pillar, also known as a stylite. Moreover, they all attest to three specific events of necrosis and pus which we can refer to as the cord incident, the foot ulcer, and the worm-infested thigh tumour. His extreme lifestyle as a self-mortifying ascetic quickly became an inspiration to many people such as Daniel, Joshua, Symeon the Younger and the other Stylite saints who followed after him. The following sections focus on Symeon’s cultivation of illness and the act of adorning oneself with disease. His first affliction stems from the cord or rope incident that is covered in all three *Vitae*, however, Antonius’ version is the most graphic and therefore it will be used here.

In his version, Antonius explains that Symeon had retrieved a rope from a well on the monastery grounds and secretly bound his waist with it. He remained in that condition for over a year while the flesh of the holy man proceeded to grown around the rope and rot. Subsequently, the massive festering wound began to exude a stench so foul no one could stand near him; still no one discovered his secret. Then, as the wound grew it became

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355 These include *The Life of Saint Simeon Stylites* by Theodoret, Bishop of Cyrrhus in his *Historia Religiosa* (444 CE); *The Life and Daily Mode of Living Blessed Simeon the Stylite* by Antonius (circa 476); and *The Syriac Life of Saint Simeon Stylites of unknown authorship*. Evidence of contradiction and inconsistencies, for instance, is that the *Syriac Life* is the only text that explicitly states that Symeon’s parents were Christian and that they had Symeon baptized but provided him with no further religious training.
Necrotic and Purulent Infections in the Ancient and Early Christian World

infested with worms which would fall out into his bed. When the monks saw Symeon’s writhing bed they were compelled to inform the Abbott of the strange events. Upon inspection of the bed the Abbott ordered the monks to strip Symeon and find the source of the odour emanating from him. Antonius writes:

Then they wanted to strip him, but they could not do it, for his garment was stuck fast because of the putrefied flesh. So for three days they kept soaking him in warm water mixed with oil and in this way, after a great deal of trouble, they were able to strip him: but with the garment they also took off his putrefied flesh. They found the rope wrapped around his body so that nothing of him could be seen, only the ends of the rope. There was no guessing how many worms were on him. Then all the monks were astounded when they saw that terrible wound and they asked themselves how and by what means they could take the rope off him...They finally separated from him the rope with flesh stuck on it. They tended to him for fifty days when the Abbott declare that he was now well enough to leave the monastery and sent him out to the desert.156

At this point all three texts agree that Symeon ventured out alone to continue his mission to devise even greater feats of self-mutilation. After spending many years in the desert, training and strengthening his body and soul, Symeon was visited by an angel who directed him to construct and ascend multiple pillars of increasing height, the tallest being forty cubits high.157

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157 The amount of time Symeon spent in the Teleda monastery, living in the desert, and finally living atop a pillar vary from Life to Life. The following is a table from Doran (pp. 16-17) that highlights significant time periods:

<table>
<thead>
<tr>
<th>Location</th>
<th>HR 26. 5,7,10</th>
<th>Ant. 12. 28</th>
<th>Syriac 110</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teleda</td>
<td>10 years</td>
<td>3 years</td>
<td>9 years</td>
</tr>
<tr>
<td>Telneshe</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dome Hut</td>
<td>3 yrs.</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Open Air</td>
<td>?</td>
<td>4 yrs.</td>
<td>10 yrs.</td>
</tr>
<tr>
<td>Small Columns</td>
<td>?</td>
<td>7 + 15 yrs.</td>
<td>7 yrs.</td>
</tr>
<tr>
<td>Large Columns</td>
<td>?</td>
<td>21 yrs.</td>
<td>30 yrs.</td>
</tr>
</tbody>
</table>

There are discrepancies in the Lives regarding how many pillars were constructed and of what height. The following table is from Doran’s introduction to *The Lives of Simeon Stylites* and demonstrates the differences.

<table>
<thead>
<tr>
<th>Height</th>
<th>HR 26.12</th>
<th>Ant. 12.17</th>
<th>Syriac 110</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 cubits</td>
<td>9’</td>
<td>4 cubits</td>
<td>6’</td>
</tr>
<tr>
<td>12 cubits</td>
<td>18’</td>
<td>40 cubits</td>
<td>60’</td>
</tr>
<tr>
<td>22 cubits</td>
<td>33’</td>
<td>30 cubits</td>
<td>45’</td>
</tr>
<tr>
<td>36 cubits</td>
<td>54’</td>
<td>40 cubits</td>
<td>60’</td>
</tr>
<tr>
<td>11 cubits</td>
<td>16.5’</td>
<td>17 cubits</td>
<td>25.5’</td>
</tr>
<tr>
<td>22 cubits</td>
<td>33’</td>
<td>22 cubits</td>
<td>33’</td>
</tr>
<tr>
<td>40 cubits</td>
<td>60’</td>
<td>40 cubits</td>
<td>60’</td>
</tr>
</tbody>
</table>
By literally living in the space between Heaven and Earth, Symeon was symbolic of the saints’ ability to function as liaisons between God and humanity. Moreover, Miller, in “Desert Asceticism,” notes that “Ancient interpreters were particularly taken with the performative aspect of Symeon’s standing as a spectacle that enticed the gaze of bystanders.”¹⁵⁸ For those among the crowd below him, the vision of seeing Symeon atop his pillar standing day and night evoked feelings of awe and compelled some to watch him in order to see if he ever moved at all.

As word of Symeon’s extreme standing asceticism and self-mortification spread he drew large crowds, Christian and non-Christian, from various social classes all of whom travelled far and wide to gaze upon the saint. Doran writes, “people throughout the known world of his day flocked to his pillar for all manner of succour- for healing, counsel,

The notion that Symeon was divinely inspired to ascend his pillar has been challenged by David Frankfurter in his article “Stylites and Phallobates: Pillar Religions in Late Antique Syria” in which he argues that there existed continuity between the Phallobate (Proto-Stylites), including Pagan and Islamic traditions, among other pillar-erecting local traditions, prior to Symeon ever climbing his first column. It seems unlikely that these traditions had no influence on Symeon or that he had no knowledge of the ritualistic ascension of other pillar religions.

¹⁵⁸ Miller, “Desert Asceticism,” 145. In a different vein, in regards to the symbolism of Symeon standing prostrate in prayer, Miller contends that Symeon’s standing was not intentionally meant to represent Christ on the cross as many have put forward; instead, she relies on David Frankfurter’s argument, in his article “Stylites and Phallobates: Pillar Religions in Late Antique Syria,” to demonstrate how this interpretation is anachronistic. Frankfurter writes:

[Han] Drijvers’ theory that an imitatio Christi theme runs throughout the iconography and hagiography of Symeon is inspired by several...post-Symeon iconographic representations of stylites with their arms outstretched. As these images, Drijvers assumes, were inspired by the Cross of Christ, so also was Symeon. But whether or not some later sculptors gave such theological reassessment to their local brand of holy man, there is no evidence that Symeon himself was inspired by Jesus’ crucifixion (Frankfurter, “Stylites and Phallobates,” 173-174). Therefore, while later stylites such as Symeon the Younger (521-597 CE) were portrayed by contemporary artists as representing Christ on the Cross, Symeon the Elder (or perhaps Theodoret) was likely not inspired by the crucifixion.
judgments, teachings, inspiration, or simply to see the wonder of this man’s work.” One such visitor is described in Theodoret’s account of Symeon’s malignant foot ulcer.

Theodoret introduces Symeon’s gangrenous foot ulcer as the means by which Symeon was able to prove to a confused yet virtuous man that he was human. The visitor was directed by Symeon to climb a ladder up to his platform and bear witness to the painful ulcer that oozed pus continually, an ulcer Symeon had developed on his foot from prolonged standing. This account is significant because it exemplifies how the saint’s deformed rotting body functioned to draw in audiences desiring to witness his strangeness. Another account of proving one’s humanity can be found in the hagiography of Daniel the Stylite (409-493 CE) when he explains his way of life to a man who is possessed by the Devil. He exclaims:

Believe me, brother, I both eat and drink sufficiently for my needs; for I am not a spirit nor disembodied, but I too am a man and am clothed with flesh. And the business of evacuation I perform like a sheep exceedingly dryly, and if ever I am tempted to partake of more than I require, I punish myself, for I am unable either to walk about or to relieve myself to aid my digestion; therefore in proportion as I struggle to be temperate, to that degree I benefit and the pain in my feet becomes less intense.

In both accounts the saints are required to prove their humanity indicating anxieties around the true physical nature of holy rotting bodies. To this point, the men’s uncertainty of the nature of the saints might be best understood in light of Christological arguments regarding

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160 This relates back to Chrysostom’s eight-point illustration of the role of illness in the lives of saints which assert that illness was used as an indicator of the holy person’s human nature.
161 The “strangeness” of the stylites is also noted in *The Life of St. Daniel the Stylite* when a group of angry men discover Daniel atop his first column and want to remove him from the land. However, the men are “amazed; for the sight was a strange one...After receiving a blessing they left him.” Elizabeth Dawes and Norman H. Baynes, *Three Byzantine Saints: Contemporary Biographies of St. Daniel the Stylite, St Theodore of Sykeon and St John the Almsgiver* (New York: St Vladimir’s Seminary Press, 1977), 22.
162 Dawes and Baynes, *Three Byzantine Saints*, 45.
where Christ ought to be located on a spectrum of “entirely human” to “entirely divine.”

Again, in *The Life of St. Daniel the Stylite*, we have a case of the strangeness of the saint’s body and its liminal location that seems to shock or perhaps inspire the onlooker into seeing the saint in their full radiant glory (or as Miller might suggest from the dazzling perspective). It seems this phenomenon may be helping to define cultural boundaries of what a body should be doing by demonstrating novel and previously unseen ways of being. This is substantiated by Peter Brown’s argument in his article “The Rise and Function of the Holy Man.” In this article, Brown asserts that the holy man, via his liminal existence between the wilderness and society, was both a stranger and a man of power and thus he was in an ideal position to play the role of patron. Brown explains that:

> In Late Roman society, the holy man was deliberately not human. He was the ‘stranger’ *par excellence*. Note it has been observed, in the study of many small communities, that the burden of difficult or of unpopular decisions inevitably comes to rest on the individual who is the ‘stranger’—the churchman in a chapel village in Wales, the dissociated medium in an African tribe.\(^\text{163}\)

More specifically, in regard to Syrian ascetics such as the Stylites, Brown goes on to write:

> The life of the holy man (and especially in Syria) is marked by so many histrionic feats of self-mortification that it is easy, at first sight, to miss the deep social significance of asceticism as a long drawn out, solemn ritual of dissociation—of becoming the total stranger... the holy man drew his powers from outside the human race: by going to live in the desert, in close identification with an animal kingdom that stood, in the imagination of contemporaries, for the opposite pole of all human society. Perched on his column, nearer to the demons of the upper air then to human beings, Symeon was objectivity personified.\(^\text{164}\)

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\(^{164}\) Ibid., 91-92.
By adopting the role of stranger, and living as an outsider the saint positioned himself in a manner that allowed him to serve as patron to nearby villages and travelling visitors seeking resolutions to local disputes, advice, and healing. It was precisely because of his lack of ties to family, economic, and political interests that the ascetic saint cultivated positions of power and authority. Beyond their roles as arbiters, doctors and priests, holy men were also teachers.\textsuperscript{165} While these saints served multiple functions in their community the most impressive aspect of their lives is how they were able to suffer such horrifying injuries and continue to function adequately.

For instance, Daniel suffers from rotting and oozing feet which his hagiographer references on five separate occasions. First, Daniel’s hagiography notes that early on in his career as a stylite sores began to appear on his feet.\textsuperscript{166} His feet are mentioned a second time when a visiting emperor begs to touch Daniel’s feet “but on approaching them and seeing their mortified and swollen state he was amazed and marvelled at the just man’s endurance.”\textsuperscript{167} It is worth highlighting here that the Emperor was not disgusted by the saint’s rotting feet but is instead uplifted and amazed by the strength of the saint, through the glory of God, to endure such suffering. The most graphic account of his rotting flesh occurs when a woman falls at his feet in prayer and notices that “on the one foot the sole had dropped way from the ankle bone and there was nothing left but the shin bone [and] she was amazed at the man’s endurance.”\textsuperscript{168} The last time his feet are mentioned is posthumously and depicts

\begin{flushright}
\textsuperscript{165} Ibid., 98-99.
\textsuperscript{166} Dawes and Baynes, \textit{Three Byzantine Saints}, 23.
\textsuperscript{167} Ibid., 32.
\textsuperscript{168} Ibid., 57.
\end{flushright}
that saint being laid out on his pillar and the monks observing that “he was quite entire except that his feet had been worn away with inflammation and the gnawing of worms.”

This graphic depiction of the saint’s body with chucks of flesh missing from his feet suggests a simultaneous view of the saint’s body as being miraculous yet corruptible.

The most graphic evidence of Symeon’s ability to suffer is Antonius’s reflection on Symeon’s putrid thigh tumour. In this vein, Antonius states that the Devil, out of his hatred of men, smote Symeon with a painful tumour just as he had done to Job; and, Symeon’s rotting body parts were evidence of this battle. Antonius describes the infection, writing:

His thigh grew putrid and accordingly he stood on one foot for two years. Such huge numbers of worms fell from his thigh to the earth that those near him had no other job but to collect them and take them back from where they had fallen, while the saint kept saying, “Eat from what the Lord has given you.”

What is significant here is that the pain from the tumour forces Symeon to stand on one foot, increasing his discomfort, his asceticism, and his visual impact. In this manner Symeon neglected the advice of other saints who suggested illness precludes the need for asceticism and instead he used his afflictions to increase his ascetic regimen and the severity of his suffering. Doran notes the powerful impact watching Symeon suffer had on the people who came to see him. He writes, “Symeon’s labors, however horrifying to watch or to endure, clearly inspired awe rather than revulsion.” The most graphic detail of the tumour is the worms that are spilling out of Symeon’s abscess, along with his desire to have the worms put back into his wound so they may continue to feast on his flesh. This excerpt is significant for

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169 Ibid., 69.
171 Doran, The Lives of Simeon Stylites, 8.
two reasons; first, the shock value of such a wound would likely have drawn in larger crowds increasing his fame; second, his statement “eat from what the Lord has given you” suggests that God has transformed the saint’s flesh into a divine gift for the worms living in his leg.  

The infection itself becomes miraculous when a worm, having fallen from the saint’s gaping tumour to the ground, is picked up by the visiting Arab King and it turns into a beautiful pearl in his hand.  

Miller asserts that Symeon’s performativity and bodily gestures “were seen not merely to have psychological effects but to possess intrinsic meaning and value in their visibility.” Thus, the performative saints and their bodily spectacles represented a method for meaningful and spiritual change in the lives of individual Christians, non-Christians and the Christian community as a whole.

In Joshua’s hagiography, he does not depict any injuries as severe as Symeon’s ulcers or the avulsion of flesh from Daniel’s ankles but one excerpt does provide access to some of his thoughts regarding pustulating, ulcerated and tumour ridden bodies. This account consists of Joshua describing a plague (494-495 CE), where his body, and many others, become covered in painful pustules, due in part to their sinful behaviors. He suggests that the disease was a tool used by God to show people their diseased souls. This conception is intriguing because it presents the sores as a negative physical quality but recognises that they came from God for a positive purpose, that is, to inspire pious purification of the soul. On this matter, Joshua wrote:

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172 In a Eucharistic like manner, eat of the flesh.
At this time our bodies were perfectly sound all over, but the pains and diseases of our souls were many. But God, who finds pleasure in sinners when they repent of their sins and live, made our bodies as it were a mirror for us, and filled our whole bodies with sores, that by means of our exterior He might show us what our interior was like unto, and that, by means of the scars of our bodies, we might learn how hideous were the scars of our souls. And as all the people had sinned, all of them were smitten with this plague. For there were swellings and tumours upon all the people of our city, and the faces of many gathered and became full of matter, and they presented a horrid sight. There were some whose whole bodies were full of boils or pustules, down even to the palms of their hands and the soles of their feet; whilst others had large holes in their limbs. However, by the goodness of God which protected them, the pain did not last long with any one, nor did any defect or injury result in the body; but, though the scars of the sores were quite plain after healing, the limbs were preserved in such a state as to fulfil their functions in the body.\footnote{William Wright, \textit{The Chronicle of Joshua the Stylite} (Amsterdam: Philo Press, 1968), 52.}

In this sense, disease is a negative state and punishment for one’s sins, which is in contrast to Symeon’s approach of cultivating illness as a method of praising God. However, it still demonstrates the underlying ideologies, depicted in all the Lives of the saints discussed in this thesis, that there was a body soul connection making your physical state an indicator of the purity of your soul and the notion that a diseased body can purify the soul. Joshua provides evidence that some people subscribed to a viewpoint that illness could function both positively and negatively, not unlike the ancient concept of laudable pus addressed in the previous chapter. Accordingly, disease was perceived as having come from God and as such there must be good in it. For Symeon and Daniel it allowed them to better praise God and help the many people who came to witness their suffering and receive their blessing. For those suffering from the plague described by Joshua their diseases were reflections of their own sinfulness and offered them a way of purifying their souls. The next section on rotting genitals will further explore the role of disease in hagiographical texts by looking at anxieties.
around sexually transmitted diseases in the lives of holy men. In the case of diseases associated with sexuality and the genitals there seems to be an underlying concern that such illnesses are caused by sinful acts which led to anxieties around holy men contracting such unholy diseases.

**Diseases of the Genitals**

Evidence of anxieties in the Christian community surrounding the sexual activities and desires of holy people and the function of venereal disease in the lives of saints can be found in the hagiographies of Stephen, Judas, and Heron. In reference to Stephen’s illness, Crislip remarks:

Stephen’s story points not only to the difficulty in making meaning out of the illness of ascetics; it furthermore... points to the potential usefulness of illness in or as ascetic practice. Stephen also reflects the transcendent and transformative potential of illness that Cioran hints at, as he rises above any pain in his treatment.\(^{176}\)

Palladius describes how Stephen’s cancer caused an outbreak of purulent ulcers to cover the saint’s penis and testicles. The treatment for this purulent disease required the saint to undergo a spectacular operation that consisted in a physician hacking off chunks of his genitals, like a barber chops off locks of hair.\(^{177}\) Meanwhile, Palladius asserts that Stephen was able to maintain conversations with other monks and was weaving palm leaves throughout the entire procedure. The fact that Stephen is portrayed as engaging in the popular ascetic activity of weaving palm leaves in connection with the saint’s ability to rise above all physical pain is presented to the reader as evidence of Stephen’s superior spirituality. Palladius goes on to remark that the two monks who recounted this incident to him, namely Evagrius and

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\(^{176}\) Crislip, *Thorns in the Flesh*, 18.
\(^{177}\) Ibid.
Ammonius, were themselves bewildered and disgusted by the sight of such a holy man being consumed by an unholy disease, and the resulting mutilation of his genitals.

Negative attitudes toward diseases of the genitals can be attributed in part to early accounts of the life and death of Judas Iscariot that depict Judas as dying from some form of venereal disease as well as from dropsy. In one such account, a second-century Christian theologian called Papias, in his work *Exposition of the Sayings of the Lord*, reports that Judas contracted a horrifying venereal disease as punishment for his betrayal of Jesus. Papias remarks that Judas’ “genitals appeared more loathsome and large than anyone else’s, and when he relieved himself there passed through it pus and worms from every part of his body, much to his shame.”

He goes on to detail how Judas’ body was so severely swollen from dropsy that he could no longer fit through the narrow alleys of Jerusalem causing him further humiliation and shame. He describes Judas’ condition in the following manner:

Judas was a terrible, walking example of ungodliness in this world, his flesh so bloated that he was not able to pass through a place where a wagon passes easily, not even his bloated head by itself. After much agony and punishment, they say, he finally died in his own place, and because of the stench the area is deserted and uninhabitable even now.

By presenting Judas’ death as coming after “much agony and pain,” this account emphasizes the themes of shame, humiliation, and punishment, associated with these particular types of illnesses. Thus, venereal diseases came to evoke mixed feelings amongst Christians as some believed Judas’ disease was an indication of his sinful deeds, while the causes of similar cases,

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178 Ibid., 17.
179 Ibid.
such as Stephen’s cancer, were less clear. This confusion regarding the association of sinful sexual behaviors, venereal disease, and sainthood is demonstrated in the *Lausiac History*, in the case of Heron, who contracted a carbuncle on his penis which then proceeded to rot and fall off due to his sinful sexual behavior. With his cursed penis gone the saint was able to confess his sins and promptly died with a pure soul. Analysis of these accounts makes a clear connection between sexuality, sexual desires, and sinfulness. The anxiety comes from holy people committing forbidden acts or even simply desiring to in the case of Heron as this is counter-cultural behavior. However, in the case of Stephen there is redemption through ascetic palm weaving and the removal of portions of his diseased penis. Heron too was liberated from his filthy desires and found forgiveness once his penis was gone. As such, it can be concluded that diseases of the genitals in early Christianity were generally viewed negatively, with anxiety and as markers of sin but there was always the possibility of redemption through extreme actions of physical mutilation.

**Syncretica and the Devil**

Unlike the sinful association of sexual disease in the lives of saints the disease that tormented Syncretica was caused by the Devil and was a testament to her faith and resolve to suffer for Christ. In *The Life and Regimen of the Blessed Syncretica*, written by Pseudo-Athanasius in the 5th century CE, Syncretica’s body is depicted as a battle ground, a vehicle through which she battles the Devil and an earthly conduit for God and the holy spirit further reinforcing the early Christian concept that holy bodies were imbued with the power of the

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holy spirit. *The Life of the Blessed Syncletica* portrays multiple hagiographical tropes including the understanding by those around her that her disease is caused by the Devil and that Syncletica is battling the Devil through her body, a battle which is expressed via her physical suffering.

The text describes her torment as having begun in her eightieth year following an otherwise healthy life. The author states that Syncletica’s illness is clearly the transference of the trials of Job onto her, explaining how the Devil “used the same scourges, although in the present case he cut down the time by making the pain more severe.”\(^{181}\) Her trials began internally and affected her organs. On account of her illness affecting her externally and internally Pseudo-Athanasius asserts that the Devil “allotted to her more severe and arduous suffering [than others]. [And] that the noblest martyrs [did not] suffered as bravely as the celebrated Syncletica, for the Avenger attacked them externally.”\(^{182}\) None of this suffering deterred Syncletica’s belief in God or her mission. She continued to teach the word of God and performed healings in spite of her deteriorating and agonizing health.

Having witnessed Syncletica’s great spiritual resolve the Devil’s next attack against her body caused her tongue to become incapable of speech in an effort to prevent her from preaching to the women in her monastery. However, Pseudo-Athanasius declares that “even if he had stripped [the women’s] hearing of her helpful words, in the longer run benefit was conferred, for the women contemplated her suffering with their own eyes, they were


\(^{182}\) Ibid. These two statements function to put Syncletica in a place spiritually equal to Job and above the martyrs by depicting her suffering as having been equivalent to Job’s and greater than the martyrs’.
strengthened in their will; the wounds in her body healed their afflicted souls.”

As such, the saint’s diseased and rotting body becomes the impetus for the spiritual healing of the women around her. It is the contemplation of Syncletica’s suffering by these women and their witnessing of her afflicted body that heals their incorporeal souls. The statement, “the wounds in her body healed their afflicted souls,” leaves little room to doubt the saint’s disease is of primary importance in this miraculous healing event. Pseudo-Athanasius goes on to detail how the Devil, enraged by Syncletica’s ability to suffer with grace and patience, attacked her in a most gruesome manner, namely:

[He] Inflicted pain in one molar, he caused the gums to become infected immediately. The bone deteriorated; the sore spread through the whole jaw and became the source of infection for the adjacent body parts. Within forty days the bone decayed, and after a period of two months a hole appeared. All the areas round about, then, were blackened, and the bone, its substance perished, was destroyed little by little. Putrefaction and a very foul-smelling stench overpowered her body throughout so that those women who tended her suffered more than she did.

This recounting of Syncletica’s illness invites readers not only to visualize the saint with her face blackened, gangrenous, and rotting away; the author also engages his readers’ olfactory senses by highlighting the horrible odour of decaying flesh. Following these most agonizing descriptions of Syncletica’s abscessed, cancerous jaw, Pseudo-Athanasius focuses on Syncletica’s courage and her ability to withstand this trial with grace while the blessed women around her admit they cannot stand the overwhelming stench of decaying flesh. The women request that Syncletica might use incense to cover up the smell and eventually they fetched a

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183 Ibid., 110.
184 Ibid., 111.
doctor who convinced Syncletica to perform a funeral rite for the dead tissue.\textsuperscript{185} Pseudo-Athanasius writes:

In answer to her the doctor who was there said: “We are not offering medication in the expectation of any healing or relief, but so that we may bury according to custom the flesh that is already dead and decayed, lest those present be infected at the same time. For what people offer to the dead, this we also are now doing. I have mixed myrrh and myrtle wine with aloes and am now applying it.” She accepted his counsel and tolerated the treatment, more in pity for her companions than anything else, for the indescribable stench was ameliorated by this measure.\textsuperscript{186}

This portion of Syncletica’s hagiography is significant because, based on Elizabeth Bongie’s translation, we are left with an image of the saint, with a dead mandible entombed inside her flesh, which I would argue transformed the saint into a living reliquary. To elaborate, based on the theology that the dead bodies of saints are relics and imbued with superior powers, then Syncletica’s jaw bone, once declared dead via the funeral rite, would qualify as a relic. Therefore, if the relic is encased inside the living body of a saint, that saint’s body would be functioning as a living reliquary, attributing to her living body the same powers which are associated with relics. This event is additionally significant for two reasons. First, because it buttresses the previously made argument that, while non-Christians generally sought medical treatment for necrotic infections and considered them negative physical conditions, Christians, like those reading Syncletica’s hagiography, saw the saint’s condition in a more positive light. For example, her disease was interpreted as means for healing the women’s souls and as a method for Syncletica to prove her devotion to her faith. Additionally, when a

\textsuperscript{185} This may be significant for determining how normative society would have treated a person with a ghastly and malodorous abscess; specifically, the reaction of disgust on the part of the women around her by her rancid odour.

\textsuperscript{186} Pseudo-Athanasius, \textit{The Blessed Life of Syncletica}, 111.
doctor is called in it is only to ameliorate the rancid smell and it is quite clear the saint should
expect no healing or relief. The refusal of medical treatment is also touched on in The Syriac
Life of Saint Simeon Stylites when the bishop wants Symeon to come down and have a doctor
look at his fetid foot. Symeon responds “I have no need of herbs and medicines nor the help
of any mortal men.”187 The second reason why the rotting of Syncletica’s face is significant is
that the author (like the authors of the previously discussed hagiographies) puts emphasis on
Syncletica’s overwhelming ability to suffer with grace through increasingly unbearable levels
of despair.

In spite of her immense suffering Syncletica saw a more positive use for illness as she
believed that sickness and disease had the ability to cultivate spiritual power and purify the
soul. Crislip reports that “ultimately she accepts medical treatment, although the
hagiographer betrays his ambivalence about such a holy ascetic resorting to medical care. He
even has the physician describe his application not as curing or treating but as anointing the
dead part of her body for burial.”188 In this vein, Syncletica taught her followers that the sick
do not need to engage in other ascetic practices because illness in and of itself is a powerful
form of asceticism. Her mission was to establish a productive use for illness and a positive
meaning within ascetic practice, asserting that illness precludes the need for asceticism as it

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187 Doran, The Lives of Simeon Stylites, 35.
188 Crislip, Thorns in the Flesh, 102. The appearance of a physician in a hagiography is not unique. There
seems to be a relationship between the saint and the physician where by denying their aid the saint
demonstrates his or her ability to suffer. Both Symeon and Daniel were offered medical attention and denied it.
Yet, Stephen accepts the physician’s assistance in treating his penis, which indicates the ambiguous nature of
venereal disease in early Christianity. Moreover, Syncletica also accepts the physician’s aid but it is only as a form
of funeral rite and for the alleviation of the suffering of others, not hers.
attains the same goal of removing the body from the sensual world. In the *Apophthegmata Patrum* she is recorded as having said “If illness weighs us down, let us not be sorrowful as though, because of the illness, and the prostration of our bodies, we could not sing, for all these things are for our good, for the purification of our desires.” She goes on to critique the efficacy of solitary asceticism explaining that:

> There are many who live in the mountains and behave as if they were in the town, and they are wasting their time. It is possible to be a solitary in one’s mind while living in a crowd, and it is possible for one who is solitary to live in the crowd of his own thoughts.

This critique of solitary mountain dwelling saints suggests a competitive undercurrent among saints who practiced unique or alternative methods of ascetic lifestyles. Regardless, the cultivation of illness as asceticism by early Christian saints created an innovative and positive social role for sick and disabled people. In a world where deformity and disability from necrotic infections often led to poverty and abuse, deformed and rotting saints were spiritual leaders, pillars of the community (some more literally than others) and evidence of God’s continued presence on earth.

In summation, this chapter has explored the meaning and function of rotting flesh in the lives of saints from the third to sixth century to demonstrate how early Christianity offered a novel and more positive perspective on what it meant to be living with a necrotic

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189 I suggest that in some instances illness functioned as a form of medicine. Syncletica talks about illness’ ability to preclude the need for asceticism by weakening one’s desire to participate in sinful or excessive activity. It would stand to reason then, that any intervention to end the illness would in fact be detrimental to the physical and spiritual wellbeing on the saint. This logic is supported by the numerous accounts of doctors appearing in hagiographies only to be sent away, or in some instances the doctor performs a ritual with no anticipated relief from pain or cessation of illness.

190 *Apophthegmata Patrum*, Syncletica 8,19.

191 Ibid.
infection in the ancient world. It should be noted here that while both Christian and non-Christian societies developed “more positive” social roles for disabled and disfigured people, the social roles addressed in Chapter One still often came with abuses, whereas, the rotting saints truly formed a new category where necrosis was seen as beautiful and suffering with such diseases was awe inspiring. Christians revered their rotting saints for their ability to suffer like Jesus did for the sins of humanity. Thus, the mangled and festering bodies of ascetic saints were symbols of this act. This chapter argued that these fetid, purulent bodies covered in worms and open sores, as they are described in hagiographies, are visual evidence of the ability humans had to transfigure their bodies into new states of being. Moreover, necrotic infection sped up the process of transformation and became positive evidence of the saints’ divine strength. More to the point, necrosis, in the lives of the saints, came to mean to some Christians that those saints were spiritually superior and dwelt in a realm of existence above humanity but below Heaven. Moreover, rotting flesh came to function as a teaching tool for espousing new models of Christianity through hagiography.

These claims are bolstered by this chapter’s analysis of ulcers, abscesses, and necrotic infections in the lives of Saint Symeon the Elder, stylites saints Daniel and Joshua, Saint Stephen, Judas Iscariot, Saint Heron, and Saint Syncletica. The Lives of Symeon and Daniel are representational of saints who eagerly subjected themselves to extreme conditions, self-mortifications and disabling infections demonstrating a willingness and a desire to suffer and transform oneself by cultivating illness. Stephen, Judas, Heron and their diseased penises are indicative of anxieties surrounding the cultivation of illness, venereal disease and the mutilation of men’s genitals. These anxieties demark the blurred line between Christians who
believed illness was an indicator of sin and those who saw illness as a positive force. Finally, Syncletica’s hagiography draws on the early Christian belief that the Devil can inflict illness upon the most devout, as he did with Job. This narrative technique placed Syncletica in a position of spiritual authority by making her sanctity and her suffering equal to Job’s. Her hagiography also depicts her as being able to suffer greatly with grace, which indicates her superior strength and fortitude.

Ultimately, because of the positive role of illness in the lives of saints, the popularity of the literary genre of hagiography and the narrative techniques authors employed to entice readers, early Christianity created a new, positive social role for people with necrotic infections. The following chapter will continue to explore early Christian hagiographies focusing on the reasons why early Christians enjoyed engaging with the necrotic and suppurative bodies of holy people.
Chapter Three: Voyeurism, Visceral Seeing, Horror and the Brain

This chapter explores four reasons why some early Christians enjoyed looking at or hearing about the exposed rotting bodies of saints. First, it accomplishes this via analysis of the role of voyeurism and the desire to gaze upon the bodies of holy people in hagiographical texts which it compares to David Frankfurter’s argument in, “Martyrology and the Prurient Gaze,” about sado-erotic violence in martyrologies. In this article Frankfurter remarks that martyrdoms provided Christians with an opportunity to witness unpious sights such as the exposed bodies of martyrs under the guise of the righteous act of witness their deaths. Similarly, Christians who traveled to see the grotesque bodies of diseased saints could hide their voyeuristic desires under a pious devotion to the saint and bearing witness to their suffering. Second, Patricia Cox Miller suggests early Christians enjoyed reading, seeing, and hearing about the lives of rotting saints because it allowed them to engage in visceral seeing, a psychological act that made it possible for some people to visualize the saints’ fetid flesh in a real and tangible manner. Third, it also asserts that some early Christians found suppurative saints exciting while simultaneously evoking feelings of fear and anxiety. It compares these responses to similar reactions of excitement, fear, and anxiety elicited by modern horror films by drawing on James B. Twitchell’s arguments in his book, Dreadful Pleasures: An Anatomy of Modern Horror. Twitchell contends that horror movies are popular because people enjoy being scared and excited in a situation where they know they are not in any real danger. In this same manner, this chapter argues that early Christians enjoyed reading, seeing, and hearing about necrotic, pustulating bodies of saints because they elicited feelings of fear and
excitement without putting the observer in physical danger. Fourth, this chapter suggests early Christians enjoyed looking at the rotting bodies of saints due to inherited and acquired behaviors resulting from changes in brain activity and chemical stimuli that train the brain to react positively to a given stimuli, such as ulcers that ooze pus.

**Voyeurism and the Bodies of Saints**

In his article, “Martyrology and the Prurient Gaze,” Frankfurter argues that martyrrological narratives from 100-400 CE demonstrated an early Christian interest in sado-erotic violence and the bodies of holy people. Frankfurter explains that:

The spectacle of sado-erotic violence allows the enjoyment of erotic display at the same time as disavowal of that enjoyment, which is projected onto the violently punitive actions of Roman authorities, heathen mobs, of (in eschatology) angels of hell. It also allows masochistic identification with the victims’ eroticized brutalization and dissolution.\(^\text{192}\)

Frankfurter’s insight regarding the significance of the act of disavowal is key because it is a means by which Christians could piously bear witness to the brutal deaths of the martyrs while discretely enjoying the sexualized torture and eroticism of exposed holy bodies being viciously torn apart. In other instances, saint Augustine informs his readers that the Christian “interest in one and the same spectacle is quite different from that of the persecutor. He was enjoying the martyr’s punishment, we its cause; he was taking pleasure in what he was suffering, we in why he was suffering.”\(^\text{193}\) Frankfurter notes, however, that behind this statement of devotion to the sacrifice of the saints that Augustine is expressing, there also

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 existed a more lurid interest on the part of Christians to witness the violence and sexuality of these events and to read about them. As a result, although Augustine’s statement paints a picture of heathens and Christians alike enjoying the sado-erotic execution of the Martyrs for different reasons, Frankfurter suggests there may have, in some cases, been very little difference. Frankfurter explains that Christianity should be understood as:

A religious movement that had, by the third century, long revolved around transvaluation and inversion of spectacles of punishment and pain in order to signify transcendence, mediation, and the supercharged body: spectacles that range from Jesus’ crucifixion...to the earliest legends of martyrdom. Inversion of pain, torment, and death becomes a principal theme of Christian narrative culture. This is not to say there is a correlation between sado-erotic violence and rotting saints; instead, I contend that Frankfurt’s analysis can be helpful in interpreting why some Christians took pleasure in viewing the grotesque bodies of diseased saints.

Miller also describes a voyeuristic component in her analysis of hagiographical accounts of transvestite saints in the fourth through sixth centuries. First, she notes that in the Life of Pelagia of Antioch, the monks find her dead body and upon washing it they realize she is a woman. The monks then desire to keep her true identity a secret but they are swarmed by crowds of people who want to see her exposed body. Her hagiography reads:

They wanted to keep such a wonder hidden but they could not, because of the crowds of people thronging around, who cried out with a loud voice, “Glory to you, Lord Jesus

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194 This ties back to Octavius’ statement that God used disease to “explore and test” humanity, ultimately enjoying the spectacle of suffering Christians. This voyeuristic spectator role Octavius ascribes God is significant for two reasons; first, it is remarkably similar to the way in which Christian and non-Christian audiences alike are depicted as voyeuristic by-standers in martyrologies and hagiographies; second, his statement highlights Augustine’s view that the proper behavior of a pious Christian is to watch and enjoy the suffering of the saint as it is done in the Lord’s name and pleases him.

195 If we apply Miller’s Dim/Dazzling holy bodies to Frankfurter’s argument that some Christians were viewing the Martyrs’ bodies from a pious perspective while others had a more lurid interest one could argue that the pious Christians Augustine speaks of were viewing the dazzling bodies of the martyrs versus others who were perceiving the dim body which focused on corporeal nature, not the divine radiant soul.

Christ, for you have hidden away on earth such great treasures, women as well as men.” So it was known to all the people, and monks came in from all the monasteries and also nuns, from Jericho and from the Jordan where the Lord was baptized, bearing candles and lamps and singing hymns; and the holy fathers bore her body to its burial.\(^{197}\)

Next, Miller presents the *Life of Mary Who Changed Her Name to Macrinos*, in which, again, it is not until her dead body is being prepared that anyone realizes she is a woman. The monks who were preparing her body then tell their superior who also wants to see the body. Then, they tell the father of the girl who accused Macrinos of impregnating her and he goes to have a look. Lastly, Miller mentions the *Life of Eugenia*, in which Eugenia, living as the monk Eugenius, is accused of seducing a woman whom he healed. Upon his arrest and in front of a large crowd of people the heroine rips open her clothing exposing her breasts for all to see. Miller concludes that “the visceral poetics of the body in these hagiographies aids in changing habituated modes of perception so that the transfigured eye needed to ‘see’ the saints can be realized.”\(^{198}\) These accounts are of note here because they establish that voyeurism and the desire to gaze upon otherwise hidden bodies was common in early Christianity and repeated throughout different genres of ancient literature, be it martyrologies or hagiographies. Based on Frankfurter’s representation of martyrologies and Miller’s assertions about transvestite saints described in hagiographies, in conversation with the aforementioned hagiographical accounts it becomes apparent that, beyond voyeurism, the *performative spectacle* and the *act of seeing* are also represented in both literary genres. This element is best understood in tandem with Miller’s analysis of visceral seeing.


\(^{198}\) Ibid., 109.
Visceral Seeing

Miller summarizes visceral seeing, in her article “Visceral Seeing: The Holy Body in Late Ancient Christianity,” as “a peculiar kind of response to depicted bodies that puts in question the traditional distinction between viewer and viewed.” Miller continues with this theme in her book, *The Corporeal Imagination*, writing:

“Visceral seeing” is a way of naming one of the results of the (re)physicalizing of the senses in light of the view that the Incarnation had legitimized the material realm. In particular, it designates the affective appeal of figurative language about saintly bodies, especially in late ancient and early Byzantine hagiography. Hagiographical images of saintly bodies taught the reader how to bring together the “real” and the transcendent, the material and the spiritual, in a single image. Perhaps the most interesting aspect of visceral seeing is how it brings together two important senses, namely, sight and touch. In this manner, a reader is able to visualize the body of the saint and upon hearing the graphic description of festering, putrid bodies the reader physically reacts in sync with the body being described in the text. Another narrative technique that functions with visceral seeing is *Ekphrasis* which employed a descriptive speech that brought a particular thing to be shown vividly before the eyes, “turning listeners into spectators.”

This powerful ability that hagiography had to make the body and life of the saint a realistic experience for the ancient reader makes this an enticing genre of early Christian literature. Miller refers to this phenomenon as “corporeal imagination,” which she defines as: “the technique used by Christian authors to achieve the conjunction of discourse,

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200 Miller, *Corporeal Imagination*, 12.
201 Ibid., 9.
materiality, and meaning that marked their turn toward the material.” In this manner, visceral seeing and *Ekphrasis* are used to produce a particular kind of document that “blurs the distinction between reader and text by appealing to the reader’s sensory imagination.” The hagiographical text, therefore, had the ability to recreate reality for the reader, prompting them with repetitive descriptions and shocking details that produce voyeuristic experiences. Miller, as an example of this technique, uses the *Ekphrasis on Saint Euphemia* by Asterius, in which Asterius describes a painting of Euphemia’s martyrdom. He vividly describes her teeth being knocked out with a hammer and blood trickling down her face which also brings tears to his eyes, which Miller notes as “tears not only of sympathy, but also of mute imitation.” Furthermore, Asterius’ crying is an example of the visceral reaction one might have to a text, and it is at this point, Miller asserts, that the boundaries between viewer and viewed begin to dissipate. In this regard, Miller argues that hagiographical texts enticed Christian readers to engage in a method of reading a text that produced realistic sensory experiences. While Miller has demonstrated how ancient texts were able to create realistic experiences, I suggest that the desire to look at or fantasize about graphic violence and gore, including rotting flesh, is not uniquely Christian, nor is it distinctly ancient.

The desire to look at or fantasize about graphic violence and gore can be found in most, if not all societies, just as a similar phenomenon can be found in the modern popularity of graphic violence, sado-eroticism, and the mutilation of bodies in horror films. In this modern comparison, the audience is invited to become the voyeur, enticed yet safe from harm, while they watch the enactment of violence and gore.

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202 Ibid., 7.
Excitement, Fear, Anxiety and the Modern Horror Genre

James B. Twitchell in his book, *Dreadful Pleasures: An Anatomy of Modern Horror*, compares horror to riding a rollercoaster; it is pleasurable because it frightens you while ensuring you won’t actually get hurt. This association is substantiated by Frankfurter’s claim that martyrologies “allowed their audiences to contemplate in safe form scenes that were so fascinating, even titillating, that they could not legitimately be enjoyed otherwise.”

Imagine for a moment the graphic torture in the Saw movies series or the scene in Silence of the Lambs when Clarice is stumbling through Buffalo Bill’s pitch black house and the audience watches through night-vision as he stalks her room to room. The vivid and repetitive images of monsters, gore, violence and other anxiety inducing images excite viewers and can cause physiological responses such as fear, disgust or concern about contamination, even though the viewer knows the images are mere representations of these sorts of dangers. These movies are examples of how a spectator, knowing they are safe, might enjoy watching acts of violence and suffering. Twitchell argues that the attraction to horror can be understood in three ways:

(1) as counterphobia or the satisfaction of overcoming objects of fear; (2) as ‘the return of the repressed’ or the compulsive projection of objects of sublimated desire; and (3) as part of a more complicated rite of passage from onanism to reproductive sexuality.

The first and second points apply to the lives of rotting saints in the sense that it defuses the repressed urge to look upon otherwise hidden and forbidden bodies. The hagiographical

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accounts provide access to forbidden spaces such as Syncletica’s cloister and the women hidden away within it, while it also allowed Christians to envision the oozing genitals of saints such as Stephan, or Heron. The third point highlights how social anxieties toward sexual activity and which members of society ought to be having sex is just as common in modern society as it was in early Christian accounts of saints. This claim is substantiated by Virginia Burrus in her book, *The Sex Lives of Saints: An Erotics of Ancient Hagiography*, in which she asserts that early accounts of the lives of saints are not anti-erotic but are instead representative of a counter-eroticism that resisted restrictive cultural narratives.205

A further similarity between the hagiographical texts and the horror genre is that they offer the viewer a prescriptive outlook on the do’s and don’ts of “proper” living in a broad variety of ways. Horror accomplishes this by juxtaposing the ideal behavior of the survivors against the counter-cultural actions of the victims and the monster.206 Hagiographies present the saint’s life as the ideal way of being in the world; something superior to the rest of society, a superhuman being. Moreover, horror art and hagiographies both offer a counterphobic desensitization to fear by helping the viewer confront and overcome the fear of death, pain and deformity. The Lives of saints demonstrate how the soul, via its strengthening through asceticism, can overcome great suffering and support the body through disease, death, and pain. The horror genre allows the viewer to safely expose themselves to violence, gore, and death ultimately desensitizing them to the negative effects of such phobias through repeated exposure. Finally, they both offer social stability through

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206 Twitchell, *Dreadful Pleasures*, 85.
their pedagogical functions and their slaying of the monster, restoring balance in the cosmos.

In the case of horror films the monster is quite literally the creature or creatures who are committed to causing the suffering of others. In hagiographical texts “the monster” may be represented as the Devil or demons who attack the saints causing physical injuries and disease. In this vein, modern horror fans are stimulated by images of rotting, decaying, mangled bodies similar to how hagiographies of rotting saints fed into a human compulsion to look at grotesque, necrotic saints. This fascination with being frightened and excited by horror films and the voyeuristic human compulsion to look at mangled bodies is explained by Daniel Lord Smail in, On Deep History and the Brain, as a combination of human evolution, brain chemistry, genetic makeup and cultural imprinting.

**Brain Chemistry and Counter-Cultural Response to Rotting Bodies**

In order to make his argument, Smail looks at brain activity and hormones that are triggered by the performance of specific actions and suggests that behaviors are inherited both via the passing on of genes throughout human history and the evolution of culture. He asserts that the neurological elements of behavior and body function, such as the chemicals that influence brain function, are not universal and therefore trigger different behaviors in different people. Moreover, human behavior, can override genetic predispositions and chemical triggers to program the brain to react positively or negatively to a given stimulus. Smail, uses the example of people enjoying rock climbing who also enjoy being exposed to the generally negative universal emotions and experiences of vertigo, fear and stress. He also

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remarks that many people regularly expose themselves to the pan-human emotion of fear when they willing watch horror films.\textsuperscript{208} This is significant for understanding early Christian fascination with necrotic saints because it demonstrates how a person might respond counter-culturally to the sight of a rotting body and avoid the universal emotion of disgust. By repeatedly reading, seeing, and hearing about the festering bodies of saints some people were able to retrain their brain and body to find pleasure in these activities. Following Smail’s logic, some were just born that way, while others remained appalled by such ghastly sights. Smail explains that following exposure to a given stimulus, in this case the image of a rotting body, a “thrill is provided by a wash of epinephrine, dopamine, serotonin, endorphins, and other neurochemicals that flood the brain.”\textsuperscript{209} These chemicals wash over the body causing feelings of pleasure and excitement that are then reproduced again and again. Smail elaborates that all animals engage in mood-altering behaviors and that throughout history, humans have continued to incorporate additional mood-altering activities, for example, dance and music. He terms these behaviors \textit{psychotropic mechanisms}, which are mechanism that “have neurochemical effects that are not all that dissimilar from those produced by the drugs normally called psychotropic or psychoactive,” in other words, behaviors that create feelings of pleasure, euphoria, excitement.\textsuperscript{210} Manufactured psychotropic mechanisms present in modern society, according to Smail, are commodities such as easy access to online pornography, horror movies, and shopping, among others. He also notes that all epochs have

\begin{quote}
\textsuperscript{208} Smail, \textit{On Deep History and the Brain}, 116-117.
\textsuperscript{209} Ibid., 117.
\textsuperscript{210} Ibid., 161.
\end{quote}
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psychotropic activities which evolve along side biology, culture, and society. Over time some psychotropic mechanisms shift into something new or at times die out. Smail writes, “The evolution of psychotropic mechanisms had a big impact on the shape and nature of human cultural evolution. And because this evolution was and is undirected, many aspects of history itself can be seen as random and undirected.” It is via the undirected path that some Christians evolved this particular cultural norm of viewing necrotic bodies. As a result, I argue that some early Christians, through repetitive acts of reading, seeing, or hearing about the rotting bodies of saints, trained their brains to enjoy the universal feelings of disgust and fear in a way that triggered the brain to release a wash of pleasure producing chemicals including serotonin, dopamine, epinephrine, etc. that reinforced the initial behavior. Over time, it is possible that this particular behavior evolved alongside culture and was passed down genetically and is still present in modern society’s addiction to horror films, graphic novel, and gory video games. It should be noted, though, that this phenomenon did not start with Christians but this was their contribution.

Consequently, in the same way that Frankfurter argues that some Christians had a lurid interest in the sado-erotic violence perpetrated against martyrs, this chapter has argued that some Christians wanted to witness the gore and horror associated with reading, seeing, or hearing about rotting saints. These accounts were enticing to their readers because they provided a realistic sensory experience that blurred the line between viewer and viewed, Miller refers to this phenomenon as visceral seeing, a particular kind of seeing that causes a vivid image to be evoked in the mind of the reader which stimulates a physical, visceral

211 Ibid., 189.
response. This works in conjunction with narrative tools such as Ekphrasis, and voyeuristic scenes, to “manifest realism and bridge the divide between reader and text.”212 These voyeuristic compulsions and desires to look at rotting bodies are still present in contemporary society in association with the popularity of the modern horror genre. To this effect, this chapter argued that horror art also provides access to otherwise hidden bodies and fulfills a common human compulsion to look at grotesque, monstrous bodies from the engaged yet safe perspective of voyeur.

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Conclusion

This thesis has focused on the ways in which necrotic and purulent infections were treated and interpreted in the ancient world in the context of ancient medicine and the lives of early Christian saints. Chapter One examined pus and necrosis in the ancient Graeco-Roman world from 500 BCE to 200 CE drawing significantly from the Hippocratic and Galenic Corpuses. It explored a variety of case studies noting causes, diagnoses, treatments and prognoses of suppurative and necrotic infections and demonstrated how these aspects of medicine evolved over time from Hippocrates to Galen. This chapter highlighted the importance of the humoural system and humoural balance in the ancient art of medicine based on key concepts such as the belief that anything that caused humoural imbalance was viewed as a disease requiring treatment. The significance of maintaining proper balance of bodily fluids led both Hippocrates and Galen to write about the possible benefits of using suppuration to drain bad humours, referred to by Galen as laudable pus. A return to health was often associated with adequate expulsion of fetid humours via draining abscesses and oozing ulcers demonstrating the fascinating ancient concept that some diseases could be both beneficial and harmful to a patient.

Beyond textual evidence this chapter also presented osteological data of pyogenic bacteria dating back to the Permian period to substantiate the existence of necrotic and suppurative infections prior to and throughout the ancient world. It further employed accounts of such infections in ancient medical literature to show that these infections not only existed in the ancient world but were common. As such, most people would have been
familiar with these conditions in everyday life as even the most minor of wounds could succumb to severe necrosis and suppurative infection. This familiarity may have reduced some of the negative stigma associated with these unpleasant conditions. On this matter, this chapter argued that, due to social stigmatization, many people living with necrotic infections or the deformities that often resulted from them had limited social roles available to them. While some may have found meaningful employment and social value, many were abused and forced to the margins of society. This is contradictory to the positive social role rotting Christian saints would create for themselves by redefining the possible meanings and functions of necrotic and suppurative infections.

As such, Chapter Two examined pus and necrosis in the lives of Christian saints based primarily on an analysis of hagiographical texts from the third to sixth century CE. It argued that early Christianity re-valenced rot and pus in positive socio-cultural terms by representing rotting saints as spiritually superior and inline with God’s heroes. This chapter began by looking at early Christian ideologies pertaining to illness and decay addressing the significance of suffering in the Christian community. In doing so, this chapter argued that illness and disease were embraced by some saints as a means by which they could suffer in this life in hopes of attaining a paradisal afterlife. Additionally, this chapter explored the concept that saints could physically transform their bodies via disease to become spiritually superior to the human realm and closer to the divine. Miller contends that the rotting bodies of saints could function as symbols that they were in the process of transforming themselves into the image
of God.\textsuperscript{213} From there, Chapter Two turned to hagiographical texts to evince further concepts of the meaning and function of necrotic and purulent infections in the lives of saints.

Moreover, the Lives of the stylites demonstrated how some saints cultivated illness as a form of extreme asceticism and that their diseases became visual indicators of the strength and purity of their souls. Conversely, the Lives of saints like Stephen and Heron indicated anxiety around inappropriate sexual desires and behaviors of holy men. While these cases of venereal disease were indicators of sin and lust, the saints’ ascetic practices were evidence of their sanctity and once the infected genitals were removed so was the sin. Thus, these diseases functioned to draw attention to the saints’ sin and provided a way to atone for those sins. In Syncletica’s hagiography her disease came as a test of her faith from the Devil and served as evidence of her spiritual fortitude. During the three years she suffered her illness allowed her to perform miracles and inspire those around. In this vein, early Christians viewed Syncletica’s necrotic infection as a source of power and a testament to her faith. As Chapter Two explored the role of necrotic and suppurative infections in the lives of saints, Chapter Three presented reasons why early Christians enjoyed look at and hearing about the rotting bodies of saints.

Chapter Three nuanced the theological understanding of pus and necrosis presented in Chapter Two by focusing on the possible role voyeurism played in the lurid interests some Christians had in seeing the grotesque and decaying bodies of saints. To this point, Chapter Three investigated the social phenomenon of the acts of saints and the voyeuristic desire to look at exposed bodies. Drawing from works by David Frankfurter, Patricia Cox Miller, James

\textsuperscript{213} Miller, \textit{The Corporeal Imagination}, 5.
B. Twitchell and Daniel Lord Smail this chapter made four major arguments. First, some Christians desired to see the exposed bodies of saints for lurid purposes under the guise of pious behavior. Frankfurter made this argument in relation to sado-erotic violence and martyr deaths. This thesis used Frankfurter’s argument about voyeurism and martyr deaths suggesting the same phenomenon is present when people viewed the rotting and exposed bodies of saints. In this manner, the viewer can engage in inappropriate looking while simultaneously disavowing their behavior. Second, this chapter suggested that the ancient act of “seeing” engaged with specific narrative tools and techniques authors employed in their hagiographical work. In order to define this process, this chapter recalled Miller’s concept of visceral seeing that argued that, through the use of ancient literary tactics, hagiographers created realistic sensory experiences for their audiences. This is significant because it demonstrates how ancient texts were purposefully designed to engage the reader with gory details in an effort to shock and excite them. Based on the popularity of these kinds of hagiographies, this intentional manipulation of texts is indicative of a desire on the part of early Christians to read and hear about rotting, decaying, monstrous bodies. Third, this chapter suggested that this desire to look at or imagine rotting and decaying bodies was not only ancient, nor was it strictly a Christian phenomenon. Rather, Chapter Three argued that the voyeuristic desires of some Christians are not unlike modern interests in watching graphic horror movies and slasher films. Both mediums allow the audience member to voyeuristically look at grotesque and monstrous bodies safely. Hagiographical texts and horror art both serve as examples of visceral seeing as they both elicit physical reactions through the use of graphic descriptions and vivid images. As such, in the same way early Christians flocked to see the
grotesque bodies and oozing wounds of rotting saints people today also enjoy seeing mangled, deformed, and monstrous bodies in horror art. Fourth, drawing from Smail’s insights on neurophysiology, biology, culture, and history this thesis argued that some Christians were engaging in actions that caused physical and chemical reactions in the brain in response to emotional triggers that stimulated the brain to produce hormones such as serotine, dopamine, oxytocin, and other “feel good” chemicals. The release of these chemicals would then prompt the viewer to recreate the experience in the hopes of additional positive chemical feedback. As such, by performing and re-performing the act of seeing rotting flesh some Christians eventually reconditioned this once disgusting experience to prompt pleasurable neurochemical responses instead.

In summation, early Christianity’s fascination with rotting saints demonstrates that the ancient world was far from simple when it came to the meaning and function of necrotic and purulent infections. While the non-Christian world was evolving new ways to remove dead tissue and restore the natural order of the body, rotting saints were eagerly cultivating illness as a method of transforming their bodies into something sacred and divine. Based on well-rooted ideologies of Christians identifying themselves as a community of sufferers, the importance of imitating Christ and a desire to transform their bodies, saints eagerly embraced necrotic infections, worm infested ulcers and foul smelling abscesses; furthermore, many Christians were equally eager to witness their holy rotting bodies.
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