TIMOTHY S. MILLER, *The birth of the hospital in the Byzantine Empire*, Baltimore, Md., Johns Hopkins University Press, 1985, 8vo, pp. xvi, 288, $19.95.

Dr Miller is a learned and enterprising historian with a fascinating theme. He shows beyond any doubt that the Western hospital tradition goes back to the early Byzantine Empire in the fourth century AD; that, even in its earliest form, the hospital provided far more than just the treatment of the sick; that by the seventh century, wards in some large metropolitan hospitals were not only divided up between male and female, but even according to specialities, notably surgery and ophthalmology. By 1136, the date of the foundation charter of the Pantokrator hospital at Constantinople, formal teaching was envisaged within the hospital, and three centuries later, students flocked to the hospital lectures of a distinguished doctor and littérateur. The facilities planned for the Pantokrator and a later women’s hospital, the Lips, both founded by the ruling family, were lavish and far superior to those of late-medieval hospitals in the West. Even if this were all that could be told about the Byzantine hospital, it would merit the serious attention of all medical historians.

But Dr Miller goes further in his reconstruction of the rise and fall of the Byzantine hospital and, still more, in his claims for its significance. On his schema, the hospital, as an institution in which medical treatment was given to the sick by doctors attached to it, first appeared as a result of the Arian theological controversy of the 340s. Basil’s hospital of Caesarea (c. 370) was modelled on that of Eustathius of Pontus, which in turn may have been created to rival the healing institutions of another Christian movement, the Anomoians. Orthodox bishops and laymen followed Basil’s example in order to win or regain souls for Christ, and by 400, the hospital was commonplace. The next (and most momentous) change was made by Justinian, who c. 532 abolished the traditional civic physicians and instead appointed them to the staffs of the ecclesiastical hospitals. From then on, the hospital was at the very centre of the provision of health care to the Byzantine community. Its chief physicians— for there was a considerable hierarchy, with promotion based on examination and on experience—were the ablest in the land; they were engaged in teaching their art at the bedside and even in research, for their discoveries of new treatments and drugs can be compared to those of the Paris school of the early 1800s. When economic and military crises rocked the Byzantine Empire, the hospital stayed firm as a bastion of culture and of lay and religious co-operation against disease. Its presence helped recall mystical monks to the advantages of practical service. Only with the Latin conquest of Constantinople in 1204 did the hospital system collapse, and when the Byzantines regained Constantinople in 1261, their restored hospitals were neither as numerous nor as effective as those of their predecessors.

All this sounds too good to be true—and it is. Hypotheses turn into facts; arguments from silence are liberally employed; diverse snippets of information over the centuries are juxtaposed without comment; the Pantokrator charter of 1136 is used to confirm the pre-existence of all its features six centuries earlier; legal prescriptions are taken as actual events; and since the protean word “hospital” is never clearly defined, differences between institutions become blurred. Finally, if the evidence for the late Empire, which is more extensive and more factual than for the years before 1204, shows a rather murky side to hospitals, this is dismissed as an inevitable decline following on the Latin conquest. In short, what this book offers is an account of the glory that was Byzantium, which differs only from similar inflated claims for the Arabic hospital in the greater breadth of reading in primary sources that underlies it. Yet even here, evidence that might cause problems for the thesis is either neglected or omitted.

Such a strong condemnation of a book published under a respected imprint demands substantial justification, not least because this book is likely to be the first that English-speaking readers without Greek will turn to for information about early hospitals. To concentrate on quibbles if Dr Miller’s general thesis were sound would then perhaps give a misleading impression of its value. My criticisms go far deeper, and I shall concentrate only on four major points on which Dr Miller seems to me to force his evidence unduly.

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First, origins. To attend the birth of the hospital depends ultimately on a question of verbal definition. The Western hospital tradition stretches back at least to the fourth century, but, depending on one's definition of a hospital, one might include the earlier pagan healing shrines or the slave and army valetudinarium (cf. also Lindgren, *Historia Hospitalium* 1977–78). What is clear is that before the 370s, medical assistance that involved overnight treatment was not provided outside the home except in special circumstances. Doctors' surgeries were small (although a new inscription from Metapontum in S. Italy, describing a "workshop" manned by over twenty healers should give pause for thought), and human medical assistance at the great shrines was provided only for the major festivals. But these shrines often had hostels attached or nearby, and, as S.W. Baron has emphasized, the Jewish pilgrims who came to the hostel of Vettenus at Jerusalem and to similar Jewish hostels elsewhere needed shelter and rest, if not much more. Julian the Apostate may not have been far wrong when in 362 he spoke of Jewish and Christian provision for the needy in the same breath, and Jewish physicians are by no means unknown (cf. Kudlien, *Medizinhistorisches Journal* 1985). The failure of our sources to mention Christian hospices before Constantine is hardly surprising, for until that emperor's conversion, Christianity was an illicit and persecuted religion, unlikely to put its money into buildings. But with Constantine things changed, and hence the late writer Theophanes may well be right when he mentions hostels already in existence in Antioch c. 332, that is, before the Arian controversies. What needs explanation above all—and Dr Miller goes some way to providing one—is why the authorities, both lay and religious, were eager in the fourth century to create institutions for the treatment of the sick in numbers together, when they had not done this earlier, even though the situation of the poor in the larger cities of Greece and Rome was always desperate and even though they were prepared to create hospitals for the army and for their estate slaves. Cornelius Celsus, it should be recalled, rejected slave hospitals on medical as well as on social grounds.

Even after Basil's hospital, which looked after the sick as well as the poor, the elderly, and the homeless, these institutions of public charity did not always accept the sick. The two laws cited on p. 240, n. 89, to prove that in discussing charitable organizations Justinian was "often thinking of hospitals first" (i.e. places for treating the sick) in fact refer to hostels (xenones), hospitals (nosokomeia), and poorhouses, in that order. The Justinianic reforms of c. 532 (so p. 48) are crucial to the whole of Dr Miller's reconstruction, for by the transfer of resources and personnel to the hospital and the abolition of civic physicians, the hospital was set above all other sources of medical assistance. Henceforth the *archiatros* is in the service of the hospital, not the town, and the whole focus of healing shifts to the hospital.

Even if one accepts that, at least by the tenth century, the word *archiatros* signified a hospital doctor, this fact by itself does not prove that this was its only meaning or that its assumption as a title required imperial legislation. Nor do the half dozen or so hospitals said by Procopius c. 554 to have been founded, repaired, or enlarged by the great emperor imply as a necessary corollary the abolition of civic physicians throughout the empire and the formal transfer of municipal funds. If there is a change of such magnitude, it is remarkable that it is not mentioned directly by any historians or by any lawyers, whose advice and decision about hospital organization fill several pages in the *Code* and the *Novels*. All that Dr Miller can adduce is a section from Procopius' *Secret history* of c. 550, which alleges that doctors and teachers were reduced to poverty after the emperor's abolition of their long-standing allowances of annonae. Furthermore, all local civic revenues to pay for games and spectacles were transferred to the imperial purse. Medicine and education fell into disgrace; the theatres were closed, and the street lamps went out because the cities could no longer pay for them to be lit. This is splendid rhetoric, bearing an uncertain relation to the facts. If Procopius is indeed describing an earlier massive transfer of civic funds and civic physicians to ecclesiastical hospitals, why drag in teachers and street lamps, and why make no mention of hospitals at all in this context? The bitter historian's complaint is rather that the emperor has taken over for himself the privileges of the city fathers. Confirmation of this alternative hypothesis is easy to find. In a law of 552, Justinian granted to the doctors and teachers of the newly reconquered Rome the same allowances of annonae that he himself had given them in the early years of his reign. Such a privilege, given in perpetuity, can hardly have applied to Rome alone, and its
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presence in the law texts suggests a wider application, to Constantinople, if not the whole empire. Even if we allow Dr Miller’s hypothetical reform of c. 532, it must have been bungled, for in the Justinianic code of 534 and, much later still, in the Basilica of Leo VI, the earlier provisions for the appointment and employment of civic physicians are reiterated. Legal conservatism or a non-existent reform?

Third, the hospital as a teaching centre. No evidence for the formal provision of teaching within the Byzantine hospital can be found before the Pantokrator statutes of 1136, and most scholars have argued that this feature was imported from the Arabs, where good evidence for the formal institutionalization of medical education in part within the hospital can be found in the ninth century. To decide conclusively between Arabic influence and parallel development or even, as Dr Miller wants, an imitation by the Arabs of sixth-century Byzantium is impossible, given the lack of evidence on the one hand and, on the other, the common tendency, since earliest Greek times, for individual students to attach themselves to a particular physician and accompany him on his visits, thus gaining practical experience. Since doctors saw patients in hospitals, it is likely that their protégés came too, and hence they can be said to have studied medicine in a hospital. But this is far from the formal teaching in a hospital posited by Dr Miller. By contrast, whereas Arabic authors regularly associate hospitals with medical teaching, Byzantine sources imply rather the opposite. Nothing in the lectures that survive from late-antique Alexandria or Ravenna suggests a link with the hospital, far from it, and the best account of Byzantine education, by Nikolaos Mesarites c. 1200, places medical students alongside other would-be intellectuals, discussing Galen and Hippocrates in the court of the church of the Holy Apostles, not in a hospital. That some learned medicine within a hospital (at whatever date) is undeniable; but the institutionalization of medical education within the Byzantine hospital before 1136 is a hypothesis beyond proof; to go further and say that such a training was the only training available is rank exaggeration. To judge from the tiny number of codices (17) that Dr Miller can in any way associate with hospitals—even if they include the important Vienna Dioscorides and the Florence Niketas MS.—hospital libraries appear to have been feeble bastions of intellectual traditions, and their teaching staffs limited. Dr Miller’s desperate attempts to link the famous writers of Antiquity with hospitals and his judicious silence about Alexandria only reveal the weakness of his arguments. Even his best example of a hospital teaching text, the Niketas codex, can be interpreted differently. The three liminary odes (most accessible in Schöne’s edition of Apollonius) tell how Niketas assembled and copied this collection of surgical texts himself for a certain didactic purpose, to instruct “doctors young and old, and those ‘assistants’ who ply the knife”. This is pleasant rhetoric to indicate the whole of the medical profession, within and without the hospital, and the presence of the volume in a hospital library a few generations later tells us nothing about its original home. Indeed, its beautiful state of preservation, when contrasted with the scruffiness of other practical medical texts, shows that this was a book to be treasured, not used, one for the boardroom, not the bench.

Finally, the place of the hospital in the community. Dr Miller makes sweeping claims to give a spurious relevance to his theme, and offers his thoughts on the crisis in modern American hospitals, which he implies may be relieved by looking to the great days of Constantinople, where the hospital stood successfully at the very centre of all medical activity. It is true that in emergencies, as at Edessa in 500–1, hospitals were rapidly erected for the victims of famine and plague, but, equally, the account of Joshua Stylites (available with pertinent commentary in J. B. Segal, Edessa, the Blessed City, 1970) makes it perfectly clear that these ad hoc “sick places” differed from the “hospice”, which was itself only a small institution in a substantial city. Even if the Pantokrator statutes were implemented to the letter, and even if there were many similar institutions in twelfth-century Constantinople, they could have housed only a minute fraction of the sick population of that megalopolis. We are told, p. 111, that the emperors’ support “guaranteed an adequate system of hospitals” in Constantinople and in a number of provincial towns. We may well wonder about the definition of adequacy when, on the same page, we read that in 1185 the second city of the rich Empire, Thessalonica, possessed but a single hospital.
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The hospital was an important institution in Byzantium, of that there can be no doubt, but it took very much a second place to treatment in the home by a privately engaged and self-employed physician. That is what our literary sources emphasize, and to argue otherwise flies in the face of common sense and of all other parallels for societies before this century. It is significant that when faced with clearer evidence for the functioning of the hospital and its problems in the years after 1261, as compared with the founder's aspirations for the Pantokrator, Dr Miller is compelled to talk about "decline". His "golden age" is a myth, a reconstruction cobbled uncritically together from a variety of diverse texts. He has put together a plausible case and, it must be admitted, revealed many new and interesting pieces of evidence to the Greekless. But plausibility is no substitute for truth, and the claims put forward in this book, whatever its other credentials, are greatly exaggerated. Harsh words indeed, but when the evidence available is so scattered and so ambiguous, the historian needs to beware of facile conjunctions and, above all, to respect the limits of ignorance. Hospital historians, be warned!

Vivian Nutton
Wellcome Institute