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Deposited on: 10 November 2016
LITERARY AND DOCUMENTARY EVIDENCE FOR LAY MEDICAL PRACTICE
IN THE ROMAN REPUBLIC AND EMPIRE

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INTRODUCTION
The majority of ancient medical literature that survives from antiquity seems to have been written by medical practitioners and produced for the purpose of ensuring the effective diagnosis and treatment of their patients, suggesting an audience of medical professionals ranging from instructors to students. This partiality has led scholars of ancient medicine to concentrate on the professional medical practitioner (the physician, the surgeon, the midwife etc.) and their theories, methods and practices, rather than on lay medical practitioners, or even patients themselves. This is despite the fact that the very same literary evidence attests to the co-existence of a thriving tradition of lay medical theory, method and practice, although admittedly the components of this tradition are much more difficult to reconstruct with any certainty.

Arthur Kleinman put forward a model indicating that the health care systems in any society can be said to comprise of three distinct sectors: popular, folk, and professional. In this model, the practitioners of popular medicine have no particular interest or expertise in healthcare beyond the norm; the practitioners of folk medicine are specialists in their fields but lack official or professional standing; and, finally, the practitioners of professional medicine are acknowledged as specialists and often have some sort of official status or institutional affiliation. While this model is certainly useful as a starting point, such definitive distinctions are not necessarily appropriate to healthcare in antiquity, where there was such a wide range of expertise that it was not necessarily possible to draw a firm distinction between the professional and the layman. This holds true for both the upper echelons of society, where members of the social elite were actively encouraged to acquire medical knowledge sufficient to enable them to hire the most appropriate professional medical practitioner, and the lower, where individuals might have had to resort to treating themselves, their family members, friends, and even acquaintances.

Is it possible to reconstruct any aspect of lay medical theory, method and practice with any certainty? While lay medical theories and methods can be provisionally

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2 On medical literature, see Martínez, V. M. and Senseny, M. F. ‘The professional and his books: special libraries in the ancient world’, in König, J., Oikonomopoulou, K., and Woolf, G. (2013). Ancient Libraries, 401-417, esp. 406, 407-410. There are, of course, notable exceptions to the general rule, such as Celsus’ De Medicina or Pliny the Elder’s Historia Naturalis.

3 Efforts are being made to address this. See most recently, for example, Flemming, R. (2007). ‘Women, writing and medicine in the classical world’, CQ 57.1, 257-279, and in response Parker, H. N. (2012). ‘Galen and the girls: sources for women medical writers revisited’, CQ 62.1, 359-386.


reconstructed from works of ancient medical literature that claim to present them, such as
the Hippocratic treatise *Affections*, it has to be born in mind that these were written by
professional medical practitioners for lay medical practitioners, and so are perhaps not
entirely representative of what lay medical practitioners were actually doing.\(^6\) Lay
medical practices can, however, be reconstructed much more satisfactorily—and thus,
one hopes, authentically—if we move the scope of our investigation beyond ancient
medical literature to other genres, and incorporate treatises devoted to horticulture,
agriculture, animal husbandry, and even religion and magic, as many of these do, in fact
include references to lay, even folk, medicine.\(^7\) More significantly, in addition to ancient
literary evidence, something that is often overlooked is documentary evidence in the form
of papyri, ostraca, and wax and wooden tablets that gives voice not only to lay medical
practitioners diagnosing and treating their family members, friends and acquaintances,
but also to the patients who were experiencing these cures alongside their health
problems.\(^8\) This chapter will survey both the literary and the documentary evidence for a
diverse range of lay medical practices in the Italy, Spain, Egypt, and Britain of the
Roman Republic and Empire, and argue that when discussing lay medical practices it is
necessary to move beyond medicine and incorporate healthcare and nursing, horticulture,
agriculture, animal husbandry and veterinary medicine.\(^9\)

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\(^{6}\) On *Affections*, see Cañizares, P. P. ‘The importance of having medical knowledge as a layman. The
*Hippocrates and Medical Education*, 87-99. On the problems of relying on ancient medical literature for
information on non-professional points of view, see Lloyd, G. E. R. (1983). *Science, Folklore and
Ideology*, 215.

\(^{7}\) See for example Hillman, D. C. (2004). *Representations of Pharmacy in Roman Literature from Cato
to Ovid*, 2. Hillman argues that ‘ancient literary sources are replete with information on the use of specific
medicaments, and often shed light on cultural aspects of pharmacy that are absent from the medical
sources’.

Claudianus Ostraca Graeca et Latina I*, 75-110.

\(^{9}\) Hillman, *Pharmacy*, 22-23 argues for the existence of a ‘medical-artisan’, a technical expert who
practiced both human and veterinary medicine, assisting overseers and herdsmen with the care of all living
property found on a farm during the Middle and Late Republic.

\(^{10}\) See Hanson, A. E. ‘Doctors’ literacy and papyri of medical content’ in Horstmanshoff, M. (2010).
*Hippocrates and Medical Education*, 187-204; Hanson, A. E. ‘Greek medical papyri from the Fayum
village of Tebtunis: patient involvement in a local healthcare system?’ in Eijk, Ph. van der (2005).
*Hippocrates in Context*, 387-402.
medical literature meant for non-specialists but written by specialists. Treatises such as Rufus of Ephesus’ *For the Layman* (also known as *For Those Who Have No Doctor To Hand*) set out what professional medical practitioners considered it necessary or desirable for laymen and women to know, but the opinions of laymen and women may well have differed. In any case, the extent to which such works were utilised by those for whom they were written is unknown.

The coexistence of professional and lay medical practice in the Roman Republic and Empire is hinted at throughout Latin literature. For example, when Horace asks “if your body is seized with a chill and racked with pain, or some other mishap has pinned you to your bed, have you got someone to sit by you, to get lotions ready, to call in the doctor so as to raise you up and restore you to your children and dear kinsmen?”, he is clearly differentiating between what was perceived to be the responsibility of a member of the household in this situation, and what was perceived to be the responsibility of a member of the medical profession.

With regard to the responsibilities of the members of a Roman household in matters relating to health, the *Law of the Twelve Tables* states that not only does a father have the power of life and death over a son born within a lawful marriage, but also that a father should immediately put to death a son recently born “who is a monster or has a form different from that of members of the human race”. These laws emblematised the power wielded by the Roman *pater familias* over the subordinate members of his family, whose lives were, quite literally, in his hands from the moment of their births. However, these laws also imply that the *pater familias* not only had a strong interest in the health of the members of his *familia*, but was also the one who was instrumental in making the decisions with regards to ensuring it. Is there any contemporary literary or documentary evidence to support this? The most potentially fruitful source of information regarding what went on in the ancient Roman household are the agricultural treatises of Cato the Elder, Varro, and Columella.

Cato the Elder (234-149 BC) is often presented as the archetypal example of a *pater familias* taking charge of his family members’ health. This results in part from claims made by Pliny the Elder (23-79 AD) in his encyclopaedia *Natural History*:

> For [Cato] adds the medical treatment by which he prolonged his own life and that of his wife to an advanced age, by these very remedies in fact with which I am now dealing, and he claims to have a notebook of recipes, by the aid of which he treated his son, servants, and household.

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12 For Rufus of Ephesus’ *For the Layman/For Those Who Have No Doctor To Hand*, see Ullmann, M. (1994). ‘Die arabisch Überlieferung der Schriften des Rufus von Ephesos’, *ANRW* II 37.2, 1293-1349. The title neatly illustrates Rufus’ opinion as to under which circumstances lay medical practice was appropriate.
13 Hor. *Sat.* 1.1.80-3: *at si condoluit temptatum frigore corpus aut alius casus lecto te adjixit, habes qui adsideat, fomenta paret, medicum roget, ut te suscitet ac reddat gnatis carisque propinquis?*
14 *Lex duodecim tabularium* 4.2; 4.1; Cic. *Leg.* 3.8.19: *cito necatus tamquam ex XII Tabulis insignis ad deformitatem puer.* See also Gardner, J. (1998). *Family and Familia in Roman Law and Life*, 121-123 on the *pater familias’* apparent power of life and death over those in his *potestas*.
16 Plin. *HN* 29.8.15: *atqui hic Cato sescentesimo quinto anno urbi nostrae obiit, octogesimo quinto suo, ne quis illi defuisse publice temporae aut privatim vitae spatia ad experientium arbitretur. quid ergo?*
A second source for these claims is Plutarch (46-120 AD), as he includes the information in his *Parallel Lives*. In addition, he provides some details as to what exactly Cato’s theories were, and what his methods and practices consisted of:

[Cato] had written a book of recipes, which he followed in the treatment and regimen of any who were sick in his family. He never required his patients to fast, but fed them on greens, or bits of duck, pigeon, or hare. Such a diet, he said, was light and good for sick people, except that it often causes dreams. By following such treatment and regimen he said he had good health himself, and kept his family in good health.  

Both Pliny and Plutarch offer Cato’s longevity as proof of his medical capabilities, at least in respect of himself—unfortunately, his wife and his son were not so fortunate, both predeceasing him. However, this would appear to be something of a literary trope, as Pliny later incorporates it into his discussion of the botanist Antonius Castor. While there is some debate over whether the prescriptions and recipes that Pliny the Elder and Plutarch mention are the same as those found in Cato’s surviving work *On Agriculture*, it is beyond the scope of this paper; here we shall focus on the latter.  

The prescriptions and recipes found in *On Agriculture* indicate that, in addition to acting as a healer for the human members of his *familia*, Cato also acted as a veterinarian for his livestock, and recommended that others do the same. Thus throughout the text the authority of the *dominus*—which, it is made clear, results from a combination of knowledge and experience—is emphasised, as is the importance of drawing upon the resources immediately to hand. Of Cato’s numerous prescriptions and recipes for the treatment of both humans and animals, the ingredients required are all those which he either explicitly states were cultivated within his *hortus*, or were likely to have been. For example, in conjunction with his recommendation that, if an estate is located near a town, the *hortus* should be used to cultivate flowers for garlands, he lists those he considers to be the most suitable: “white and black myrtle, Delphian, Cyprian, and wild laurel, smooth nuts, such as Abellan, Praenestine, and Greek filberts”. Elsewhere in the treatise, laurel leaves appear in a recipe for a tonic for oxen, while black myrtle is a main ingredient in a recipe for indigestion and colic. In a remedy for indigestion and strangury, he includes

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damnatam ab eo rem utilissimam credimus? minime, Hercules. subicit enim qua medicina se et coniugem usque ad longam senectam perduxerit, his ipsis scilicet, quae nunc nos tructamus, profiteturque esse commentarium sibi, quo medeatur filio, servis, familiaribus. quem nos per genera usus sui digerimus.

17 Plut. Vit. Cat. Mai. 23.4: αὐτῷ δὲ γεγραμμένον υπόμνημα εἶναι, καὶ πρὸς τοῦτο θεραπεύειν καὶ διατῆναι τοὺς γυοσύνης οίκοι, νήστεν μὲν οὐδέποτε διατηρῶν οὐδένα, τρέφων δὲ λαχάνοις ἢ σαρκίδοις νήσσης ἢ λαγώ καὶ γὰρ τοῦτο κοῦφον εἶναι καὶ πρόσφορον ἀσθενοῦσι, πλὴν ὅτι πολλὰ συμβαίνει τοῖς φαγοῦσι ἐνυπνιάζεσθαι τοιαύτῃ δὲ θεραπείᾳ καὶ διαιτῇ χρώμενοι ὑγιαίνειν μὲν αὐτός, υγιαίνοντας δὲ τοὺς ἑαυτοῦ διαφυλάττειν.

18 Plin. HN 25.5.


21 Cato, Agr. 8.2: murtum coniugulum et album et nigrum, loream Delphicam et Cypriam et silvaticam, nuces calvas, Abellanias, Praenestinas, Graecas.

pomegranates, instructing his reader to “gather pomegranate blossoms when they open”, thus implying that these plants were within easy reach. Pomegranates also appear in a recipe for “gripes, for loose bowels, for tapeworms and stomach-worms, if troublesome”.

While Cato emphasises the importance of knowledge and experience acquired by oneself, Varro (116-27 BC) defers to the knowledge and experience of others. He not only provides references to the works that he has utilised in the research and writing of his treatise On Agriculture, he also inserts real historical figures known to be authorities on these subjects as characters and allows them to present their theories and methods. He does, nonetheless, use them to praise himself and his own theories, methods, and practices:

“Did not our friend Varro here, when the army and fleet were at Corcyra, and all the houses were crowded with the sick and the dead, by cutting new windows to admit the north wind, and shutting out the infected winds, by changing the position of doors, and other precautions of the same kind, bring back his comrades and his servants in good health?”

Unlike Cato, Varro is not necessarily averse to physicians. Rather, he does not believe that they need to be present on an estate at all times, as not every medical situation requires their services. As far as he is concerned, “there are two divisions of such knowledge, as there are in the treatment of human beings: in the one case the physician should be called in, while in the other even an attentive herdsman is competent to give the treatment”. Thus, “all directions for caring for the health of human beings and cattle, and all the sickness which can be treated without the aid of a physician, the head-herdsman should keep in writing”. He repeatedly emphasises the importance of having handbooks to refer to, while concurrently he promotes literacy in his staff. This is perhaps an offshoot of his opinion that nothing should be bought, if it can be grown or made on the farm.

Columella (circa 4-70 AD), like Cato, emphasises the authority of the dominus, an authority acquired through knowledge and experience:

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24 Cato, Agr. 126: ad tormina, et si alvus non consistet, et si taeniae et lumbrici molesti erunt.
26 Varro, Rust. 1.4.5: non hic Varro noster, cum Corcyrae esset exercitus ac classis et omnes domus repletarum aegrotis ac funeribus, inmisso fenestris novis aquilonum et obstructis pestilentibus inuanaque permutata et ceteraque eius generis diligentia suorum comites ac familia comitibus reduxit?
27 On Cato’s aversion to physicians, see Nutton, V. (2013). Ancient Medicine, 165.
28 Varro, Rust. 1.16.4.
29 Varro, Rust. 2.1.21: cuieus scientiae genera duo, ut in homine, unum ad quae adhibendi medici, alterum quae ipse etiam pastor diligentem mederi posse.
30 Varro, Rust. 2.10.10: quae ad valitudinem pertinent hominem ac pecoris et sine medico curari possunt, magistrum scripta habere aporter. See for example 1.69.3, in which a man is stabbed and the physician called to deal with the situation.
31 Varro, Rust. 2.2.20; 2.3.8; 2.5.18; 2.7.16; 2.10.10.
32 Varro, Rust. 1.22.1. See also Rosen, R. M. ‘Spaces of sickness in Graeco-Roman medicine’, in Baker, P. A., Nijdam, H. and van ’t Land, K. (2012). Medicine and Space: Body, Surroundings and Borders in Antiquity and the Middle Ages, 227-243 for discussion of a lost work of Varro’s in which his opinions on the presence of physicians at the bedsides of patients are much more explicit, even moralising.
But whoever is destined for this business must be very learned in it and very robust, so that he may both teach those under his orders and himself adequately carry out the instructions he gives; for indeed nothing can be taught or learned correctly without an example, and it is better that a bailiff should be the master, not the pupil, of his labourers. Cato, a model of old-time morals, speaking as head of a family, said: “Things go ill with the master when his bailiff has to teach him”.

Although it is the bailiff and the bailiff’s wife that are responsible for healthcare, presumably they have been instructed by the *dominus* and the *domina*. However, like Varro he emphasises the pedigree of his resources. Thus, the treatises of Cato, Varro, and Columella set out a framework for lay medical practice within the Roman household, requiring a combination of personal knowledge and expertise supplemented—perhaps even reinforced—by relevant medical literature. Both Cato and Varro were drawing on their personal experiences of owning agricultural estates in Italy, while Columella was drawing on his uncle’s experiences of owning agricultural estates in Spain. However, it is important to remember that just because Cato, Varro, and Columella recommended that lay medical practice be undertaken and provided guidance as to how individuals should go about doing it, it does not necessarily follow that anyone did as they suggested, either in Roman Italy or Spain, or anywhere else in the Roman Empire. It is important to remember that neither professional nor lay medical theories, methods and practices were standardised throughout the Roman world. Yet, it is entirely possible, if not probable, that entirely independent traditions of lay medical practice developed simultaneously in different territories. For the remainder of this paper, I will examine the documentary evidence for lay medical practice from the provinces of Egypt and Britain.

**LAY MEDICAL PRACTICE IN ROMAN EGYPT**

In the case of Roman Egypt, there is a significant amount of evidence to suggest that the physician was not necessarily the first person from whom an individual sought to obtain medicine, ingredients for medicine or other medicinal apparatus, let alone medical diagnosis and treatment. On the contrary, the supply and demand of such items are frequently mentioned in documentary papyri and ostraca exchanged between family members and friends, that have been recovered from sites all over the province.

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33 Columella, *Rust.* 11.1.4: *quisquis autem destinabitur huic negotio, sit oportet idem scientissimus robustissimusque, ut et doceat subiectos et ipse commode faciat, quae praecipit. Siquidem nihil recte sine exemplò docetur aut discitur præestatque villicum magistrum esse operariorum, non discipulum, cum etiam de patre familiariae prisci moris exemplum Cato dixerit: “Male agitur cum domino, quem villicus docet”.

34 Columella, *Rust.* 11.1.22; 12 pref. 10.

35 Columella, *Rust.* 5.1.1.


During the first half of the second century AD, a number of the residents of Mons Claudianus, the pre-eminent quarry settlement in the Eastern Desert, wrote letters to members of their families living elsewhere in the hope of obtaining medicine, ingredients for medicine or other medicinal apparatus from them, despite the fact that there were a number of physicians in residence there. Isidorus wrote to his sons requesting two sticks of eye salve and a cushion to rest his sore arm on, while Menelaus wrote to a friend, requesting a second flask of rose oil because his own had been stolen. Meanwhile, Bekis wrote to his son requesting that he send a bandage suitable for a head injury, and an unnamed individual wrote to his brother claiming that his life was in danger and he needed a remedy for an inflammation of the tonsils. With regard to Isidorus and Menelaus, they themselves specified that the reason they were asking for these things was that they had not been able to obtain them where they were, and presumably the same rationale applied to Bekis and the unnamed individual; after all, why go to all the trouble of getting something sent out into the Eastern Desert, perhaps from as far away as the Nile Valley, if it was available right there at Mons Claudianus?

However, it seems strange that a physician practising at a quarry settlement out in the desert would lack remedies such as eye salve for eye infections, rose oil for headaches and sunstroke, and something as basic as a bandage. This suggests that individuals living there sought to obtain medicine, ingredients for medicine and other medicinal apparatus from members of their family, most frequently their sons and brothers, as opposed to soliciting a medical practitioner. Conversely, this apparent preference for receiving healthcare at home could be explained by the remote location of Mons Claudianus or even the restriction of medical treatment to military personnel. So let us turn our attention to areas of Roman Egypt where such explanations do not apply: the Fayum and Oxyrhynchus.

Although Soranus recommended the use of midwives in his Gynaecology it seems that in Roman Egypt, pregnancy and childbirth were family affairs that involved not only the female members of the family, but the male ones as well. In the late second or early third century AD, Thaisarion wrote to her sister and brothers, requesting two jars of radish oil which she specifically stated she needed for when she gave birth, as well as a jar of salve. In the early third century AD, Serapias, a soon-to-be grandmother, wrote to her son-in-law requesting that he brings her daughter to her so that she could assist

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40 O. Claud. 221—for initial translation and commentary, see Cuvigny, ‘Morts II’, 39; O. Claud. 222—for initial translation and commentary, see Cuvigny, ‘Morts II’, 40.


with the birth of her grandchild. In the late third or early fourth century AD, an unnamed son wrote to his parents, requesting that they take care of his wife (who was also his sister, and thus their daughter) during the late stages of her pregnancy and labour:

I repeatedly pleaded with them by letters to furnish the same concern for her and to make all the customary preparations for her delivery. For god knows that I wanted to send unguents and all the other things to be used for the delivery.

It appears that individuals frequently preferred to be taken care of by members of their own family, even if it was inconvenient for all involved. In the third century AD, Titianos wrote to his sister (who was perhaps also his wife) to explain his long absence, “My father, on whose account I have stayed on till now in spite of illness, is also ill; and it is for his sake that I am still here”. He goes on to say that everyone in the household was ill, and they all had to take care of each other. In the fourth century AD, Judas, while staying at Babylon, wrote to his brother and sister back home in Oxyrhynchus:

Make every effort, my lady sister, send me your brother, since I have fallen into sickness as a result of a riding accident. For when I want to turn on to my other side, I cannot do it by myself, unless two other persons turn me over ... Please come yourself as well and help me, since I am truly in a strange place and sick.

The evidence suggests that these family members not only obtained medicine for each other, but they also took care of each other, without recourse to a medical practitioner, when necessary, often at great personal inconvenience. Was this because the head of the family ordered them to, in his capacity as family healer, as Cato advised? Did he personally direct and oversee their treatment? Did the mother of the family? None of the examples discussed so far indicate any such thing. In fact, it seems it was frequently the parent that requested medical aid from their offspring, as in the case of Isidorus and Bekis. When Aurelia Techosis petitioned the prefect Aurelius Ammonius in 295 AD, she explained that she had nursed and tended her mother because such a thing was “what is owed from children to parents”. This indicates that when it came to healthcare, pietas or perhaps the repayment of a moral debt accrued were important considerations.

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43 P. Oxf. 19.
45 PSI 299.9-11/Sel.Pap. 1.158: ὁ δὲ πατήρ μου [μέχρι] {τ[ο]ύτου}, δι’ ὃν καὶ νοσεῖ· καὶ δι’ αὐτὸν ἔτι ἐνταῦθα εἰμι. See also P. Oxy 1121.8:
46 P. Oxy 3314.5-17: πᾶν οὖν ποῆσαι, κυρία μου ἄδελφη, πέμψον μοι τὸν ἀδελφόν σου, ἐπιδή εἰς νόσων περιέπεσα ἀπὸ πτώματος ἵππου. μέλλοντος μοι γὰρ στραφῆναι εἰς ἄλλο μέρος, οὐ δύναμαι ἄρ’ ἐμαυτού, εἰ μὴ ἄλλοι δύο ἀνθρώποι ἀντιστρέψωσιν με καὶ μέχρις ποτηρίου ἄδεη[σ]ος ὡς ἔχω τὸν ἐπιδίδοντά μοι. βοήθησον οὖν, κυρία μου ἄδελφη, σπουδαίον σοι γενέσθαι ὅπως τὸ τάρχος πέμψη μοι, ἵνα προεῖπον, τὸν ἄδελφον σου. εἰς τὰς τοιαύτας γὰρ ἀνάγκας εὑρίσκονται οἱ ἵδιοι τοῦ ἀνθρώπου. ἵνα οὖν καὶ σοὶ παραβοηθήσῃς μοι τῷ ὄντι ἐπὶ ξένης καὶ ὑπὸ τῶν νόσων ὄντι.
Brother-sister marriage seems to have been practiced by several of the individuals discussed above, such as Thaisarion, Theonilla, Titianos and Judas. Is it then any wonder that the family members were close to the point of providing each other with medical treatment? In the cases where children were taking care of their parents, it is important to remember that these parents were also the parents of the individual’s husband or wife, as well as grandparents of any offspring twice over, which brings us back to the issue of pietas and the repayment of debt. Likewise, in the cases where siblings were taking care of each other, these siblings were both blood relations and siblings-in-law. If one of the reasons families practiced brother-sister marriage was to safeguard the family circle against potentially hostile outsiders, it makes sense that when members of the family were at their most vulnerable, they turned to their relations for help. The provision of healthcare for family members, no matter which individual family member was responsible for instigating or providing it, also enabled the consolidation and preservation of family traditions and transmission of knowledge about domestic medicine.

One last papyrus letter, recovered from Oxyrhynchus and dating to the fourth century AD, provides an interesting counterpoint to the recipes for oxen medicine in Cato’s On Agriculture, despite its having been written around five hundred years later. Yet another Isidorus wrote to his son and made a request: “Give your brother Ammonianus the colt to be brought to me and the salt of ammonia, both the pounded and un-pounded, and the basil-seed, in order that I may doctor him away here”.

Unlike the other papyri we have seen, this letter provides clear evidence of a father behaving as Cato advised (although whether this was done so deliberately is, of course, unknown), exercising his paternal authority by instructing his sons and acting as family healer or veterinarian, but in addition to this, it also provides explicit proof of the transmission of knowledge about lay medical practice.

Lay Medical Practice in Roman Britain

So far, I have presented a significant amount of evidence for the thriving tradition of lay medical practice in the Roman Republic and Empire, and suggested that in Roman Egypt, a medical practitioner—whether physician, surgeon or midwife—was not necessarily the first person from whom an individual sought to obtain a diagnosis, medicine, ingredients for medicine, other medicinal apparatus or even medical treatment, arguing in favour of the widespread dissemination of lay medical knowledge within that province. Although I have focussed my attention on Egypt due to the vast quantities of documentary papyri that have been recovered, it does not necessarily follow that it was the only province of the Roman Empire where this occurred. Having said that, one needs to bear in mind that nowhere near as many wax, wooden or lead tablets which deal with matters relating to health and healthcare have been recovered from Roman Britain as papyri and ostraca have been from Roman Egypt.

48 P. Oxy 1222.1-3: δὸς τῷ Ἀμωνιανῷ τὸν πῶλον εἵνα ἐνεχθῇ μοι καὶ τὸ ἅλας τὸ ἀμωνιακὸν τὸ τετριμένον καὶ τὸ ἄτριπτον καὶ τὸ σπέρμα τοῦ ὠκίμου εἵνα. This papyrus is overlooked by Adams, Pelagonius. A similar, roughly contemporary example has been recovered from Antinoopolis, see P. Harr. 109.

Several hundred wooden tablets have been recovered from the Roman fort of Vindolanda on Hadrian’s Wall. These attest that a variety of medical practitioners were present at the fort: Marcus the medical orderly (medicus); Vitalis the pharmacist (seplastarius); Alio the veterinarian (ueterinarus); Virilis the veterinarian (ueterinarus). Additionally, one tablet mentions an infirmary or hospital (ualetudinarium) and another comprises a military strength report which divides the members of the First Cohort of Tungrians in the period 92-7 AD into four categories: those sick (aeger); those wounded (uiolnero); those suffering from inflammation of the eyes (lippo); and those fit for service (ualo). However, there is also a tantalising reference to what could be lay medical practice taking place at Vindolanda. In a tablet which dates from 97-102/3 AD, Paterna writes to Sulpicia Lepidina, the wife of Flavius Cerialis, the prefect of the Ninth Cohort of Batavians, and offers to bring her two remedies, one of which is for fever. Had Paterna prepared these remedies herself, or had she acquired them from one of the fort’s military medical practitioners such as Vitalis the pharmacist? This begs a further question: were the family members of soldiers treated by the military medical practitioners, or were they left to treat themselves? High ranking Roman officials such as provincial governors or prefects frequently embarked upon sojourns abroad with an entire household at their disposal, and this household could (and frequently did) include a personal physician, but was this something that minor officials could (or did) do? Certainly Flavius Cerialis presided over an extensive household containing numerous slaves, but there is no evidence that one of them was his personal physician, or even someone with a basic level of medical knowledge and experience—the fact that Paterna is offering to bring Sulpicia Lepidina two remedies suggests that there was no one in the household capable of preparing their own. This does, however, indicate that, like the inhabitants of Roman Egypt, the inhabitants of Roman Britain might have looked to family members and friends to support them through periods of illness and infirmity.


51 Infirmary: T. Vindol. 155; military strength report: T. Vindol. 154. For the epitaph of Anicius Ingenuus, medicus ordinarius of the First Cohort of Tungrians, found at Housesteads, see RIB 1618.

52 T. Vindol. 294.

53 A wax tablet from Carlisle attests to the activities of Albanus the pharmacist (seplasarius), while an inscription from Mainz attests to a military seplasarius, CIL XIII 3778.

54 On evidence for the family members of soldiers experiencing ill health, see Allason-Jones, ‘Healthcare’, 143.

55 Nutton, Medicine, 164-65. See for example Cic. Verr. 2.3.28: Verres took his physician Artimedorus with him to Sicily in 80 BC; Cic. Fam. 13.20: Cicero recommended the physician Asclapo to Servius Sulpicius Rufus when he was about to depart for Achaea.
CONCLUSION

The majority of the ancient medical literature that survives from antiquity was written by medical practitioners for their peers, produced for the purpose of ensuring the effective diagnosis and treatment of their patients. However, this same literary evidence attests to the co-existence of a thriving tradition of lay medical practice, an attestation which is confirmed by documentary evidence in the form of papyri, ostraca and tablets. This literary and documentary evidence indicates that this alternative tradition could be accessed not only through particular works of ancient medical literature that were composed by professional medical practitioners with laymen in mind, but also through works of ancient literature that were composed by and for laymen themselves. These latter works demonstrate the process by which both knowledge and experience were accumulated via a long process of trial and error. According to the Roman agricultural writers Cato, Varro, and Columella, once composed, these treatises were kept on hand and referred to as and when necessary by not only the dominus or domina, but also the villicus or villica, or even the members of the household in charge of various different species of livestock.

This paper has surveyed both literary and documentary evidence for lay medical practices in the Roman Republic and Empire using not the medical treatises of professional medical practitioners such as Galen, but rather the agricultural treatises of Cato, Varro, and Columella, and the encyclopaedia of Pliny the Elder in conjunction with documentary evidence from two very different communities, primarily the Fayum in Egypt and to a lesser extent Vindolanda in Britain, that demonstrate how lay medical practice was undertaken in ancient every-day life. This allows us to witness first-hand examples not only of lay medical practitioners diagnosing and treating their family members, friends and acquaintances, but also the patients who were experiencing all of this alongside their health problems.

TEXTS AND TRANSLATIONS USED

REFERENCES


