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Every man in his humour

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The sages have long told us that we got philosophy, logic, science, drama, epic poetry and the ideal of beauty from the Greeks. When democracy became a positive word, they added that to the list. They often forget the humours, but few ancient Greek concepts have had such pervasive staying power in Western thought. Noga Arikha clearly agrees, and has written a virtual history of medicine via the humours and their ramifications. Many of the big names, from Hippocrates through Vesalius and Harvey to Pasteur and beyond, are represented in *Passions and Tempers* without Arikha straying too far from her brief.

The humours themselves are familiar even today: blood, yellow bile, black bile and phlegm. They make their appearance in some of the Hippocratic writings, a collection elaborated by various hands over a couple of centuries from the late fifth century. They entered mainstream Western thought via Galen (129- c210), who saw himself as completing and extending Hippocratic medicine. The humours were the central constituents of a powerful explanatory system of health, disease and much else besides. They were easily related to the intimate bodily changes in acute disease, wherein patients sweat, vomit, turn yellow, get flushed or pale, and cough up blood or phlegm. These humours seemed much more complex than the bodily fluids that could be observed at the bedside. They were theoretical entities, exactly analogous to the four elements of Greek natural philosophy (air, earth, fire and water) to which they possessed symmetry. For instance, blood, like air, was hot and moist; phlegm, like water, was cold and moist. The actual blood shed in bloodletting or after a wound was not the pure humour; rather, bodies were mixtures, as were all the material things that surround us. We live in a messy world.

These theoretical considerations, especially as applied to medicine, were frequently lost on later doctors, who identified the bedside humours as the rarefied substances of Hippocratic and Galenic writings. The humours were also constitutive of the two concepts of Arikha's main title: passions and temperaments. One of the powerful strengths of Greek humoralism was its integrated vision of bodily functions, mental as well as physical, states of health as well as those of disease. Historical readings of the relationship between body and mind occupy a central theme in Arikha's book.

The third, problematical, humour, black bile, was also known as melancholy. Its presence was elusive in the original Hippocratic formulation of the humours, and it was added later - partly, one suspects, to complete the symmetry of four: four humours, four elements, four seasons, four ages of man. Its presence in the scheme crystallized the unity of humoral mind-body relations. It was discussed in various Greek versions of Hippocratic humoralism, but its heyday was the Renaissance, when doctors, philosophers and artists elaborated several versions of the same conceit: the melancholy genius. Arikha unpacks the musings of Marsilio Ficino, considers the enigmatic engraving of Albrecht Dürer, "Melancholia I", and offers a sensitive reading of Robert Burton's *Anatomy of Melancholy* (1621). She also has cogent things to say about other related Renaissance preoccupations: love sickness, musical therapy, and accidie, the disease of sloth. She is sensitive to the gender dimensions of humoralism, recognizing that the humours were not neutral, universal categories,

but related intimately to cultural issues of patriarchy and disorders of the "weaker vessel".

The humours provided a framework for explaining health and disease, but they also offered an explanation of personality type. The individual humoral balance varied according to life-cycle, sex, diet, occupation. In addition, each person had a tendency to possess a single dominant humour. Hence, there were also four temperaments: sanguine, choleric, melancholic and phlegmatic. Within Hippocratic medicine, the temperaments were part of the individuation of disease that characterized diagnosis and treatment. Hippocratic doctors tended to treat young females differently from old males, even if both were suffering from an acute fever.

The temperaments had to be grafted onto the other variables of humoralism, but these characteristics of personality traits have had great historical resonance, feeding into the systematic medieval marrying of the humours with astrology. In a debased form, temperaments live on in modern astrology, but in the early modern period, astrology had cultural credibility and, for doctors, vital diagnostic and prognostic importance. One of the most complete set of early modern case records, those of a Buckingham physician and clergyman, Richard Napier (1559-1634), are remarkable not simply for the varied complaints that Napier's patients brought to him, but for the fact that he routinely began a consultation with a horoscope. The Elizabethan physician and sexologist Simon Forman also used astrology in his medical practice. Astrology and its accompanying attention to the astral interactions of birth and temperament were central to their medical practices. Yet their range of diagnoses and treatments were pretty standard for the time.

One of the tropes of Arikha's monograph is the contrast between the elasticity of medical theory and the constancy of medical practice. Time and again she points out that doctors who substituted mechanistic or chemical theories for explaining the causes of disease relied on the basic therapeutic modalities sanctified by humoralism: bloodletting, cathartics, emetics and the other manipulations of bodily fluids. They were hallowed by long employment, and their efficacy could be explained from a variety of theoretical perspectives. Many of the doctors who accepted the basic tenets of Hippocratic therapy forgot another central Hippocratic doctrine: the healing power of nature (*vix medicatrix naturae*). Medical practitioners have always been prey to the philosophical fallacy of *post hoc, ergo propter hoc* and taken credit for what in the nineteenth century was expressed as the idea of the self-limited disease.

Even bloodletting eventually faded as a mainstay of the medical armamentarium, and the humours lost their purchase within orthodox medical theory. The temperaments enjoyed an afterlife in the safe harbour of physiognomy, credible during the Romantic period, and transmuted into psychology by Carl Jung's notions of introverts and extraverts, and Hans Eysenck's theory of personality types. Their innateness has meant that the temperaments have appealed to eugenicists, and been wedded to conservative philosophies.

Arikha deals with these issues briefly, but she sees the endpoint of her story in another legacy of Hippocratic humoralism: its mindbody holism. Crudely speaking, the rupture occurred with René Descartes and his strict dualism. Arikha devotes the last chapters of her book to reflecting on post-Cartesian attempts to put the mind and the body together again, beginning with Thomas Willis (1621-1675), and ending with contemporary brain research. Her reading of the modern period is intriguing,

though very selective. She bypasses the implicit holism of evolutionary biology, including Charles Darwin's work on the emotions and passions, concentrating instead on the neurohumoralism of contemporary neuroscience, suggesting repeatedly that much scientific comment on the mind-body issue could, *mutatis mutandis*, be expressed in Hippocratic terms. It is a fair point, but the *mutatis mutandis* is what actually matters. Whether we like it or not, we live in a post-Cartesian world, and longing for the comfortable certainties of humoralism doesn't get us much closer to answering that old question: where exactly, in our bodies, are we located?