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Summary in English

The physician Rufus of Ephesus lived during the reign of Trajan (98-117) in Ephesus. Although exact data on his life are lacking, a sojourn in Alexandria during which he studied medicine, is considered certain. He recorded his practical experience and views in over ninety books, only a few of which came down to us. Medical authorities have appreciated his extant work throughout the ages. During the last two centuries these treatises have been studied by classicists and arabists.

It is Rufus’ misfortune that he is retrospectively compared with Galen, who lived about two generations later. The latter produced works on clinical medicine, anatomy, pharmacology, but also on philosophy and philology. These amount to over two hundred treatises, most of which have survived the Middle Ages. Galen’s impact on medicine has been overwhelming for centuries.

In the extant works of Rufus no explicit philosophical argument is found. This has lead classical scholars to depict him as a pragmatic ‘hands on’ physician without affinity to philosophy.

From my point of view this picture of Rufus is too limited and one-sided. It pays no attention to the theoretical considerations in the case reports and his anatomical and clinical teachings, showing extensive knowledge of classical medical and general literature. It is highly improbable that Rufus’ practical acumen would be the only explanation for the consistent and general appreciation of his works for many centuries. The purpose of this thesis is to supplement and correct the existing image of Rufus from the position of a physician.

The thesis is composed of 14 chapters. Eight of Rufus’ selected works are paraphrased in appendices. The treatise *Medical Questions* is translated in full as part of the main text.

Chapter I
Following a historiographical survey of the reception of Rufus’ works, the various medical schools, temple medicine and the
medical market during the Early Roman Empire are introduced as background.

Chapter II

*Medical Questions* (*Quaestiones Medicinales*) is a unique treatise on the value of taking the patient’s medical history. First of all, Rufus points out that the physician can observe the physical and mental strength by observing non-verbal signs, e.g. stammering, lisping, the power and the pitch of the patient’s voice.

My analysis leads to the conclusion that it was written as an emphatic plea for the physician to ask patients extensive questions after their way of life before and during their illness. In Rufus’ time this kind of questions was not commonly asked; this practice was not considered part of the art of medicine by both doctors and patients. Rufus was well aware of the eccentricity of his view. He defended his position by pointing out ‘we are not naturally all the same; we differ very greatly from one another.’ One of the means to assess the individual nature is asking after the patient’s habits and lifestyle. In this questioning he includes family members and friends who are present during the interview. In the context of his time he considered dreams reported by the patient helpful in prognosis. In his final argument Rufus seems to suggest that his method might be considered unsuitable for a follower of Hippocrates’ art. However, he insists that the questioning of the patient by the physician is indispensible.

This intriguing work has not received any attention until the *editio princeps* was published by Daremberg in 1879.

Chapter III

*The Names of Bodily Parts* is the principal treatise of Rufus’ works on anatomy. Three centuries after Herophilus and Erasistratus, Rufus is one of the first to resume writing on anatomy. This treatise is a magnificent lecture linking anatomical features with well-known historical characters, myths and stories. In discussing the anatomy of the liver, he mentions briefly the way the *haruspices* use to name significant features. Rufus’ description of the female and male sexual organs was unsurpassed until the sixteenth and
seventeenth century. In contrast to Galen, Rufus does not describe
the interior of organs such as the brain or the heart. His remark that
the spleen is ‘useless and without function’ is puzzling and
disagrees with his other statements on the removal of black bile by
this organ. This work was among the first of Rufus that was printed
in 1554.
In this chapter The Names of Bodily Parts is compared with
OnAnatomy from the Hippocratic Corpus, On the Anatomy of
Bodily Parts and On Bones ascribed to Rufus himself and On
Anatomical Procedures by Galen.

Chapter IV
On Diseases of the Bladder and the Kidney is one of Rufus’ works
on specific clinical problems. It remained the best textbook on the
subject until the Renaissance. It is structured around a classi-
fication of processes that we still recognise e.g. bleeding, in-
flammation and the formation of stones in the kidney and bladder.
Rufus advocates the filtering of drinking water to prevent the latter.
An operation to remove stones from the bladder is meticulously
described. Rufus also mentions a rare disease that we recognise
today as diabetes mellitus, he ascribes it to malfunction of the
bladder.

Chapter V
In On Satyriasis and Gonorrhoea, Rufus depicts ailments that are
troublesome, shameful and sometimes fatal. They cannot be
recognised as venereal diseases in the modern sense. In this work
Rufus describes the testis as the source of sperm, which was not
generally accepted at that time. In addition he observes that the
spermatic cord has peristaltic movements, indicating that he
possibly performed vivisection (on animals).

Chapter VI
Rufus analyses in the treatise On Abscesses the remarkable
phenomenon that some disorders are alleviated or even cured by
the advent of another disease. This phenomenon is generally
understood as the substitution of a serious disease (e.g. epilepsy)
by a lesser ailment (e.g. quartan fever). Rufus urges that the physician should be aware of such developments and not stand in the way.

Chapter VII
Another treatise on a specific medical problem is Rufus' *On Gout*. This chronic, often extremely painful disorder must have been a medical *crux*. Rufus' compassion with these patients transpires from his description. Often magical components from the 'Dreckapotheke' or amulets are called in.

Chapter VIII
Galen praises Rufus' book *On Melancholy*, that is now lost. The ideas of Rufus on this matter can be illustrated in six case histories from the *Krankenjournale*, a series of case reports that survives in Arabic. He sees a connection of certain abdominal complaints and 'psychological' features such as fears and misanthropy. Both can be explained by a surplus of black bile with its cold and dry properties. Often correction of the disturbed temperament by improving the lifestyle is sufficient; but sometimes black bile is turned into 'disease-matter' and then drastic purging or even bloodletting is required. The six cases were obtained from a recent reconstruction of Rufus' book *On Melancholy* by Pormann (2008).

Chapter IX
This chapter summarises the remaining fifteen case reports from the *Krankenjournale* illustrating Rufus' emphasis on the individual nature of the patient. These cases can be read as superb bedside teaching of diagnostic and therapeutic considerations in the Hippocratic tradition. In contrast, Galen had a poor opinion on individual cases for teaching. This might be an explanation for the fact that from the third century on, case reports virtually disappeared from existing Greek medical literature, following Galen's view. However, Arabic and Persian authors continued to use and study them.
Chapter X
*Summary on the Pulsesis* a highly remarkable treatise on pulse-lore. The authorship by Rufus is disputed by some modern scholars, but confirmed by others. As for the mechanism of pulsation, the author adopts the view of Erasistratus that during the contraction of the heart the arteries distend, as is clearly seen during vivisection. He is aware that this view is not generally accepted. In contrast, Galen follows Herophilus in his claim that heart and arteries contract and distend simultaneously. This view lead to an impressive theoretical argument that has dominated medicine until the sixteenth century, when Rufus’ findings were confirmed. As for the terminology and significance of the variations of pulsation in various diseases, Rufus follows contemporary customs.

Chapter XI
The short work *On Jaundice* has survived in Arabic translation. Rufus distinguishes jaundice due to problems in the liver and gall-duct from a much rarer jaundice due to a diseased spleen. Both forms are chronic and usually not fatal. His treatment consists of elaborate dietary rules.

Chapter XII
Summarizing the previous treatises an attempt is made to reconstruct the way Rufus arrives at a diagnosis. In particular the physical examination and the analysis of urine and other material is described. As before, we find that Rufus follows the Hippocratic tradition.

Chapter XIII
In this chapter, Rufus’ opinions are summarised on subjects as diverse as the lifestyle of young ladies, sexual intercourse, the sensible way to use wine and the education of children. Several of his views were not shared by his contemporaries; e.g. he supports the drinking of wine by children. In *On Purgatives* Rufus shows his expertise in this field and his prudence in using such aggressive
drugs as hellebore. He characteristically remarks that it is impossible to suggest a fixed dose because it is highly individual.

Chapter XVI
The significance of Rufus as person, physician and investigator is outlined. Rufus is shown to have a thorough knowledge of the Hippocratic writings, the great poets and classical theatre. At the bedside he is a respectful, alert and resolute doctor. His full attention is focused on the individual patient. Rufus’ style of writing is remarkably clear and concise. If he disagrees with other views and opinions he expresses himself politely, in contrast to Galen. In his theoretical considerations Rufus does not mention any teleological speculation, in stark contrast to Galen. This might explain the fact that his fame lasted during the waning of Galen’s influence from the sixteenth century on.

Conclusion
Rufus appears to have been an independent person and a judicious follower of the Hippocratic tradition. He trusted his own observations and judgment, even if the results were in conflict with general opinion. Rufus’ medicine is founded on thorough understanding of nature in general, logical reasoning and ethical conduct. The starting point of his way to diagnose and attend to patients is their individual nature. The unique treatise *Medical Questions* is a plea for the doctor to ask a multitude of questions. It suggests that most physicians confined themselves to careful observation. His textbook on renal and bladder diseases and his anatomical writings have been used for centuries, underscoring his didactic talent, already demonstrated in the case reports. The epithet *medicus gratiosus* seems to be well deserved.