As Ferngren explains in the opening pages: ‘My purpose in this volume is to provide a concise but comprehensive survey that traces the history of the intersection of medicine and healing with religious traditions in the Western world from the earliest civilizations of Mesopotamia and Egypt to our own era’; a sizeable task to say the least. The chronological and geographical scope of work is striking, taking the reader on a journey through eight distinct eras: one, ‘The ancient Near East’; two, ‘Greece’; three, ‘Rome’; four, ‘Early Christianity’; five, ‘The Middle Ages’; six, ‘Islam in the Middle Ages’; seven, ‘The early modern period’; and eight, ‘The nineteenth and twentieth centuries’. Preceding these chapters, the author’s ‘acknowledgements’ provides readers with helpful guidelines about what to expect along the way: ‘I have not written a scholarly monograph but rather an introduction intended for non-specialists who wish to gain an understanding of the place of religion in the Western medical and healing traditions’. He duly explains his decision to avoid arcane language and technical medical terms, keep annotation to a minimum, and confine the notes chiefly to citations rather than to extended discussions. In addition, the author directs readers seeking to pursue subjects of special interest to an extensive bibliography of secondary literature on medicine and religion available at the publisher’s website: [www.press.jhu.edu](http://www.press.jhu.edu) [2] (p. ix-x).

The introduction provides some equally helpful pointers, setting out a useful framework for thinking about illness and healing in the past. ‘Presentism’, ‘essentialism’, ‘Whiggism’, ‘contextualism’ and ‘retrospective diagnosis’ are clearly explained. Approaching the topic in an ‘unhistorical’ manner is advised against, especially the tendency to characterise religious responses to illness as ‘primitive’. Moreover, he introduces the suggestion that ‘Even today the religious beliefs of many Westerners intersect with the culture of healing and health care in surprisingly traditional ways’, and ‘while these beliefs may be ridiculed as hopelessly anachronistic … [f]aith today still offers the hope of some relief to many … [and] a comfort that modern medicine and science do not’ (p. 2). The malleability of words associated with physical disability and dysfunction is explored (‘illness’, ‘sickness’, ‘disease’). That said, I am surprised that the two central terms ‘medicine’ and ‘religion’ do not receive more sustained attention here. While clear definitions are provided, they are brief and modern. It would have been fruitful to comment on how these terms were defined by past generations. A footnote referencing historical debates on definitions of ‘medicine’ and ‘religion’ would also have been useful. In addition to outlining key terms, Ferngren introduces some important historiographical perspectives, particularly the Draper-White ‘conflict’ thesis and its critics (of which he is one). As the author
notes, one ‘historiographic perspective that underlies this book is the rejection of the notion that there has existed throughout history an essential conflict between religion and science’ (p. 3). Indeed, the introductory section on historiography focuses largely on matters concerning ‘religion and science’. It would have been useful to reference some more specific works on ‘religion and medicine’, and to note that while ‘religion and science’ is a recognised field within the history of science, ‘religion and medicine’ is not such a widely used phrase, nor has it been taken as an umbrella under which such clear models of history have been delineated.

Chapter one, ‘The ancient Near East’, introduces the cuneiform writings of Mesopotamians, the first recorded references to medicine and the medical art. A detailed description of the source base is provided: some 800 tablets on medical matters including disease, diagnosis, prescriptions of drugs and magical spells for treatments. The chapter outlines how sin was considered to be a root cause of sickness, therefore confessions were an important feature of therapy. Moreover, some 6,000 evil spirits were also thought capable of causing disease. Mesopotamian healers are introduced – the asīpu (magician/exorcist/priest) and the asû (‘closer to what we would call a physician’). The asû often provided incantations together with physical remedies, and occasionally the same person would fulfil both roles. These examples are then carefully compared with Egyptian civilization c.3000 BCE – c.500 BCE. Again, the author provides a rich description of the source base: ancient scrolls and medical papyri. He notes that while both Egyptian and Mesopotamian religions were polytheistic, the link between moral failing and retributive disease was not present in Egypt to the same degree. Egyptian healers are introduced: the wabw (priest), the sa.u (sorcerer or exorcist) and the swnw (‘a physician similar to the asû’). Like the asû, the swnw mingled prayers and incantations together with physical remedies. Similarly, the three roles – wabw, sa.u and swnw – would often be practised by the same person. The third section of the chapter deals with Hebrew and Jewish medicine. Again, important comparisons are drawn, notably that Israel’s religion was normatively monotheistic, and that a preoccupation with the moral character of Yaweh engendered a focus on justice, compassion and loving kindness. Using extracts from Job, Kings and Leviticus, Ferngren outlines concepts of divine retribution, purity/impurity, dietary laws, leprosy and contagion.

The second chapter, ‘Greece’, focuses largely on the period c.750 BCE – c.380 BCE. Homer’s Iliad and Odyssey and Hesiod’s Work and Days are used to shed light on concepts of suffering and sickness, particularly notions of divine causation. The presence of healers, notably iatromantis (shamans) and demiourgoi (physicians), is also explored. A lengthy section on Hippocrates is provided, including biographical details and information on the Hippocratic Corpus, the Hippocratic Oath and Hippocratic humoral medicine. Here, Ferngren offers what I think are some of the richest examples to help combat assumptions about supposed conflicts between medicine and religion in the past. The fact that physicians who took the Hippocratic Oath swore by Apollo, Asclepius and other gods and goddesses of healing to guard their life and art ‘in purity and holiness’ is one such case. Hippocrates’ conviction that ‘There is no need to put the disease [madness] in a special class and consider it more divine that the others, as they are all divine and all human’ is another (pp. 43-7).

Chapter three covers Rome c.509 BCE – c.280 CE. Beliefs in divine retribution are introduced, as are appeals to gods such as Mars and Carna for protection and healing. The author’s discussion of healing cults associated with specific gods and goddesses is particularly interesting, detailing pilgrimages to some 732 temples and shrines. Readers are introduced to historiographical debates about demons and demonism in Late Antiquity. The chapter also contains a large section on Galen, covering biographical information, Galen’s writings, and the spread of Galenic ideas to Jews, Muslims and Christians. Chapter four on ‘Early Christianity’ examines healing in the New Testament and the Early Church, Christian healing in Late Antiquity, medical philanthropy in the Early Church, and the origin of the hospital. The Christian sanctification of sickness is discussed in depth, and compared with other theodicies of the ancient world. Distinctions between Christian and pagan philanthropy are also discussed. The concept of a ‘medical marketplace’ is introduced in order to highlight that a broad spectrum of healers existed in the classical world. However, there is no clear explanation of the ‘marketplace’ model, nor a footnote to secondary literature on the topic, which seems a conspicuous omission.
The fifth chapter on ‘The Middle Ages’ examines types of healing, hospitals, leprosy, the black death and pilgrimages. Medical training and education is examined in depth, with a marked focus on monasteries as centres of learning, universities in Europe, and the Alexandrian school in Egypt. Distinctions between hospitals in the Latin West and the Byzantine Empire are also drawn. The sixth chapter: ‘Islam in the Middle Ages’, co-authored with Mahdieh Tavakol, focuses on concepts of health and illness. The link between divine and natural causation is clearly formulated: ‘God is seen as the first cause of healing … it was he who bestowed powers on medical substances [so] therapeutic measures are only the means through which God’s healing takes place’ (p. 122). Various healers, including the prominent physician Avicenna, are discussed. The development of hospitals and Islamic medical ethics are briefly outlined. Historiographical debates about the nature of Islamic prophetic medicine are also covered. A final section on ‘Persisting Themes’ seeks to remind the reader that ‘Even today many people view medical concepts and treatments from a religious perspective’ (p. 135).

Chapter seven, on ‘The early modern period’, opens with a discussion of Luther, Calvin and Zwingli. Focusing on the history of ideas, Ferngren notes that ‘The Protestant Reformation provided an intellectual and structural framework that encouraged transitions in a variety of fields, including medicine’ (p. 136). Following Protestant reformers we encounter ‘reformers in medicine’ (p. 141), such as Paracelsus and William Harvey. The argument that the Protestant Reformation precipitated shifts in the treatment of the sick poor is also covered. A section on ‘women in medicine’ provides some welcome examples of lay medical practice, before swiftly returning to topics such as ‘professional medical ethics’, ‘Protestant moral theology’ and ‘Tridentine Catholicism’. A section on ‘Enlightenment medicine’ works to dismantle the assumption that the period was marked by intellectual and antireligious homogeneity. Indeed, the author points out that there were efforts to revive clerical medicine across Europe at the time. However, Ferngren remains tied to the still influential assumption that ‘because of the secularizing tendencies of the new science, it is probable that the use of religious healing had decreased by the seventeenth century’ (p. 162). An important final section titled ‘The Doctor at the Bedside’ notes that while knowledge of the body, especially in anatomy and physiology, increased, conventional healing made little use of it and Galenic therapeutics continued to be widely used until the early nineteenth century.

The final chapter, ‘The nineteenth and twentieth centuries’ focuses largely on American developments as ‘this volume is directed to a largely North American readership’ (p. x). The origins of nursing, asylums and medical missions are discussed in depth. Faith healing in pietistic circles in both European and American Protestantism is covered, as well as temperance movements associated with the influence of Methodism and Adventism. Short sections on Mormonism, Jehovah’s Witnesses, Pentecostalism and Judaism are included. Biblical criticism, evolutionary theory and eugenics are explored. Discussions of Protestant and Catholic medical ethics, particularly in relation to birth control, abortion and euthanasia are analysed. New Age spirituality and CAM (complimentary and alternative medicine) are also outlined briefly. A closing section on ‘The Hospice Movement’ provides another excellent case study for rethinking notions of a perennial conflict between matters religious and matters medical. As Ferngren notes, the qualified nurse Cicely Saunders (1918–2005) conceived of the movement following an evangelical conversion to Christianity.

A short epilogue notes that ‘religion has complimented medicine in similar ways in many cultures and in nearly every age’ (p. 202), though also includes a section on ‘tensions in religion and medicine’, which focuses primarily on sectarian movements. The volume closes with a provocative note on compassion. For Ferngren, compassion is a quality rooted in religious values, and lacks sustenance without a transcendent spiritual basis. Thus, ‘while compassion is a quality fully compatible with scientific medicine and with progress in medical technology, it is not one that grows naturally out of either’ (p. 213).

Designed for the non-specialist, this book would be a good addition to student reading lists in a number of disciplines including history, theology and medicine. More generally, the work merits readership from any non-expert seeking a historical perspective on religious attitudes to sickness and healing.