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# Poisoning, Ergotism, Mass Psychosis. Writing a History of Ancient Epidemics Beyond Infectious Diseases

*Nadine Metzger\**

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**Abstract:** »Vergiftung, Ergotismus und Massenpsychose. Antike Seuchengeschichte jenseits von Infektionskrankheiten«. For the last 100 years, the modern concept of epidemics as contagious diseases caused by pathogenic agents or microorganisms entering the body has not only dominated present thinking about epidemics but highly influenced historiographical study of past disease as well. In the case of Greek and Roman antiquity, this led to extensive and thorough scholarly work on epidemics fitting the pattern of infectious diseases while incompatible cases were put aside notwithstanding that by ancient definition they were epidemics of the same quality: illness that affects many individuals of the same community at the same time. This includes cases retrospectively explained as mass poisoning, ergotism, and mass hysteria. This article discusses the methodological problem of disparate definitions of modern and ancient epidemics and argues for broadening the source base in the study of ancient epidemics to include accounts of diseases that do not fit into the modern mould of infectious disease. To demonstrate the benefit of this suggestion, two disregarded later ancient epidemics drawn from relatively unknown patristic sources are introduced, which have been explained as fungal poisoning, ergotism, or mass psychosis in the past.

**Keywords:** Ancient medicine, epidemics, infectious diseases in antiquity, disease etiology, John of Ephesus, Victor of Tunnuna, COVID-19.

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## 1. Introduction

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“For future pandemic historiography, this much can already be stated, a new age has dawned with the spring of 2020,” stated the German ancient historian Mischa Meier in the fall of 2020 (Meier 2020).<sup>1</sup> His words are especially

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<sup>1</sup> Translated by the author. Meier (2020) continues: “No one who has consciously lived through the year 2020 will be able to analyse historical epidemics without having their own experiences in mind. From now on, an entire generation of historians will question the Justinianic plague,

noteworthy because here speaks an eminent scholar of ancient plague (cf., e.g., Meier 2005). Indeed, the COVID-19 pandemic has had a major impact on the scientific study of ancient epidemics: not only did research on the Justinianic plague (541 AD), for which Meier is one of the most internationally renowned specialists, experience an enormous upswing, but research into ancient historical epidemics itself became part of the modern discourse on the nature of COVID-19. Already on 6 February 2020, just 16 days after the first officially recorded COVID infection in the U.S., the *Washington Post* printed an opinion piece in which two ancient historians, Merle Eisenberg and Lee Mordechai, along with film scholar Robert Alpert, discuss the question, “Why treating the coronavirus like the Black Death is so dangerous” and come to the surprising conclusion that the plague of Justinian, as the first pandemic in world history, is at least as good, if not better, a point of comparison for the current pandemic. The best approach was to “evaluate each infectious disease based on what it actually does and not what we assume it should do” (Eisenberg, Mordechai, and Alpert 2020). Our thinking about the present and the past are closely intertwined.

So, is the Corona pandemic really a turning point for the way we historians write epidemic history? Historiography is necessarily always related to interests of the present in the way we ask questions, the epistemological interests we pursue, and the way we position our findings in the public sphere. As historians, we are part of our society and actively shape its cultural memory. At the same time, however, we as historians have a responsibility to do justice to the past and to highlight its intrinsic character. So, while the Corona pandemic has sparked great interest in historical epidemics, we can and should also ask critical methodological questions: What aspects of our own COVID experience can we fruitfully apply to our considerations of the past? Where does our own vivid experience tend to get in the way? How can we use methodological and conceptual considerations to strive for an unbiased view of past epidemics?

In the following essay, I would like to argue that our view of ancient epidemic history should not be narrowed by the viral infectious disease COVID-19, but rather to take the new upswing in the study of ancient epidemics as an opportunity to fundamentally reflect methodologically on the thematic foci of ancient epidemic historiography. Specifically, I want to question the objects of inquiry in ancient epidemic history: COVID-19 favored a strong focus on infectious diseases in historiographical research. Yet antiquity did not know the concept of infectious diseases, tied as it is to the notion of transmissible pathogens. Epidemics in antiquity were diseases that simultaneously affected a large proportion of the population, regardless of the exact cause. This is nothing new to scholars of ancient medicine. Nevertheless, epidemic

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the Black Death and, of course, the Spanish Flu against the background of COVID-19. One will be able to reflect on these facts, but one will not be able to escape them.”

historiography today is predominantly oriented to the modern concept of infectious disease when dealing with ancient epidemics. Most studies, often carrying “infectious disease” in the title, limit their object of study in this way, employing retrospective modern diagnosis as their lead criterium for source compilation (e.g., Fangerau and Labisch 2020; Schott 2020; Magner 2009; Vasold 2008; Leven 1997). This narrowing is analytically reasonable but does not help to provide an emic view of ancient epidemics as a whole. From the outset, this approach excludes certain collective diseases, for example such which fall into the modern categories of poisoning, ergotism, or mass psychosis. These tend to be discussed only in special investigations of just this modern explanation pattern (e.g., Kilbourne Matossian 1989).

One of the few exceptions is Dionysios Stathakopoulos’s book on famine and epidemics as its research question combines different hardships that befell the Imperial Roman population. The monograph presents a very valuable source collection of famines and epidemics of all sorts (Stathakopoulos 2004). Thus, it also includes both cases of food poisoning apparent to the contemporaries and of unclear phenomena, which are not amenable to any modern diagnosis. Two of the latter will be discussed later in this paper.

To get closer to the ancient thinking about epidemics in its historical distinctiveness, we need to include precisely such accounts in our investigations. They are able to transcend the preconceptions modelled on our modern understanding of infectious diseases and provide a glimpse into the specifics of ancient concepts of and dealings with collective diseases. At the same time, these sources can shed new light on culture-specific aspects of the “great” ancient infectious diseases, serving as a point of comparison.

To illustrate this great opportunity that an expanded source selection offers us for ancient epidemic history, in the following I will first introduce ancient epidemic historiography and its recent dynamics. Then I will characterize the ancient concept of epidemics and use two source examples to demonstrate what an emic epidemic history might look like.

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## 2. Historiography of Ancient Epidemics

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The topics of the classical historiography of ancient epidemics can be roughly divided into three areas. First, the writings of ancient physicians on the subject have traditionally been of interest, starting with the “Epidemics” in the Hippocratic Corpus. These seven books of case histories contain not only individual cases but also descriptions of collective diseases associated with seasons and weather patterns. They thus already point to the early medical concept of epidemics in antiquity, naturally an important theme in the ancient historiography of epidemics (Nutton 2013, 25-7; Leven 2021). Secondly, plagues in literary texts have been studied that fall into the field of religious

interpretation of disease. The most famous example of this is the plague before Troy, which strikes the Greeks at the beginning of the Iliad and thus sets the events of the epic in motion: As punishment for disrespecting his priest and his priest's daughter, Apollo shoots his plague arrows among the Greeks, who try to avert the plague with various religious rites (Leven 1997, 17). For late antiquity, the Christian approach to epidemics has been examined (Frenschkowski 2021; Ferngren 2009). Thirdly, important historical epidemics have always been studied, in particular, the plague of Athens described by Thucydides as the prototypical plague account; the Antonine plague during Galen's lifetime, which is less well attested in sources; and the Justinianic plague in 541 AD and later. All three epidemics are serious infectious diseases in the modern sense with a high mortality. The plague account by Thucydides cannot be overestimated in its impact on all later literary and historiographical work on epidemics like the Justinianic plague; while the recurrent waves of the Justinianic plague generated a multitude of sources in different genres, making differentiated research possible.<sup>2</sup>

How have the topics of historiography of ancient epidemics changed since the outbreak of the COVID-19 pandemic? Regardless of the epoch of investigation, the pandemic has generated an enormous number of overviews and smaller works on the history of epidemics since 2020. In the German-speaking world alone, three monographs on epidemic history were published by renowned medical historians between June 2020 and August 2021 (Fangerau and Labisch 2020; Schott 2020; Thießen 2021).<sup>3</sup> They all focus on historical infectious diseases, which are treated as points of comparison to COVID-19: Heinz Schott describes his approach, stating, "My Panorama of Epidemics considers eight epidemic infectious diseases that play a prominent role in medical and cultural history: Leprosy, plague, syphilis, smallpox, tuberculosis, influenza and AIDS" (2020, 7, translated by author).<sup>4</sup> This selection of "major" epidemics is classic and shared by most authors. However, it must be emphasised that five of the seven diseases mentioned predated the bacteriological era and, accordingly, were not interpreted as infectious diseases by contemporaries. In fact, some of them were not seen as physically contagious at times, and especially historical leprosy and syphilis have little in common with the disease entities so named today. Of course, the experienced

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<sup>2</sup> The rich literature on the subject is best accessed through lexical literature and collective reviews, e.g., the lemmata in Leven 2005; Eisenberg and Mordechai 2019. Important collections on the topic are Little 2007; Meier 2005. For an overview, see Leven 1997, 17-20.

<sup>3</sup> Of the three, Fangerau and Labisch (2020) were particularly quick, with an editorial deadline of 16 April 2020. Their monograph, like Schott's (2020), deals with various "major" infectious diseases of the past and provides an outlook on COVID-19. Thießen (2021), on the other hand, works through the first year of the COVID pandemic in terms of contemporary history and knowledgeably places the observed phenomena in the history of epidemics.

<sup>4</sup> Original German: „Mein Panorama der Seuchen berücksichtigt acht epidemische Infektionskrankheiten, die in Medizin- und Kulturgeschichte eine markante Rolle spielen: Lepra, Pest, Syphilis, Pocken, Tuberkulose, Influenza und AIDS.“

colleagues mentioned above are aware of these historical incongruities; their focus on infectious diseases in the contemporary sense is deliberately chosen.

The situation seems to me to be different within the ancient historiography of epidemics, which also received an enormous boost from the COVID pandemic. However, this increase does not apply to all three fields of ancient epidemic history mentioned above but nearly exclusively to the study of the three “major” epidemics. In particular, the study of the Justinianic plague experienced an unparalleled upswing, since the well-documented plague as the “first pandemic in world history” can offer a good point of comparison with COVID-19. Moreover, a previously built controversy between the aforementioned American-Israeli researchers Merle Eisenberg and Lee Mordechai on the one hand and the German ancient historian Mischa Meier on the other revived the scholarly discourse.<sup>5</sup> Since the outbreak of the 2020 pandemic, conferences and symposia, many evening lectures, and other events have already been dedicated to the plague of Justinian.<sup>6</sup> This upswing is very gratifying for all ancient plague historians, moreover, with global history, new exciting approaches are now also being made fruitful for the Justinianic plague while the field of vision is being expanded beyond the Mediterranean region. At the same time, the references to COVID-19 are obvious: “The first pandemic - Transformative Disaster or Footnote in History?” was the title of a conference on the Justinianic plague in Hanover in September 2020 with a global-historical perspective and top-class participants. Caught in the middle of our own pandemic, we would of course like to know exactly that about COVID!

Of course, it is absolutely legitimate and even the task of historiography to combine concerns of the present with investigation of the past. Equally, however, we should strive to control our methods and perspectives in such a way that the modes of thinking of the present do not threaten to stifle an emic view of the past aligned with historical concepts. This is especially true when dealing with the ancient history of epidemics, as the concepts of epidemic in antiquity are quite obviously very different from our modern concept of infectious diseases (Nutton 2013, 25-7; Leven 2021).

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<sup>5</sup> The controversy revolves around the long-term influence of the Justinian plague on the economy, culture, and history of the Byzantine Empire. Keller, Paulus, and Xoplaki (2021, 397-8) give a concise summary of the debate with all relevant literature. A wider scope on current debates provides Sarris (2021).

<sup>6</sup> E.g., the four-day symposium in Hannover “The First Pandemic. Transformative Disaster or Footnote in History?”, 21-24 September 2021; lecture in the series organised by the Leibniz project “Polyphony of Late Antiquity Christianity” at University of Frankfurt; lecture series at University Nuremberg-Erlangen and others.

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### 3. Concepts of Collective Diseases

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While the modern infectious disease is defined by its pathogen, thus fitting perfectly into the aetiologically-oriented disease thinking of modern medicine, the cause of a plague plays a subordinate role in ancient thinking. Epidemics were defined as severe diseases that seize a larger part of the population at the same time (Jouanna 1999, 152; Leven 2021, 375). The Greek term is *loimos* (λοιμός), “plague.” The word “epidemics” used today is derived from the ancient Greek *epidēmia* (ἐπιδημία), whose word field included meanings such as “being at home,” “arrival,” “common,” and “among the people,” and which in medical texts could also be used for diseases that affected a larger number of people at the same time. In this sense, the term was used in the writings of the Corpus Hippocraticum and entered medical terminology. Therefore, the Hippocratic *Epidemics* did not only deal with plagues, but with all kinds of diseases that the physician noticed in the course of a year at his place of work (Baader and Winau 1989; Jouanna 1999, 152, 387-90).

Implicit is the assumption that seasons and weather influence the prevalence of disease in a population. Other writings in the Hippocratic Corpus attribute the development of epidemics to different factors. For example, the author of “Breaths” writes that in the case of a fever that strikes many people at the same time (*loimos*), the bad air inhaled by all those affected is to blame.<sup>7</sup> Other authors extended this thesis to include great heat, putrid water (e.g., from swamps), stench from unburied corpses, and poisonous exhalations from the body or in the breath of the sick as harmful effects on the respirable air of a population. At least since Galen, this miasma theory provided a coherent medical explanation for epidemic diseases. The exact formulation of the causation processes as well as alternative theories, though, were left to the individual physicians, so that many different ideas circulated in medical writings. Infection, however, played only a subordinate role in medical concepts (Leven 1992, 2021). Although it was observed by various ancient authors, infectiousness was not used as a defining criterion for epidemics, neither by physicians nor by medical laymen.

Beyond medicine, too, the definition of an epidemic was not linked to the exact cause of the plague. For instance, in the case of the plague of Athens described by Thucydides, it is clear that it was a plague (*loimos*), even if some Athenians speculated that it could have been caused by poisoning of the cisterns by the Spartans, with whom they were at war (Thucydides 2.48.2). The

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<sup>7</sup> Corpus Hippocraticum, *Breaths* 6: “There are two kinds of fevers; one is epidemic (*koinos*), called pestilence (*loimos*), the other is sporadic, attacking those who follow a bad regimen. Both of these fevers, however, are caused by air. Now epidemic fever (*koinos pyretos*) has this characteristic because all men inhale the same wind.” Transl. Loeb. Similarly argues *Nature of Man* 15. Cf. Jouanna 1999, 150-2.

primary consideration in naming a disease as a plague was always the scale of the disaster – the mass death and misery (Leven 2021, 378).

Thus, in the course of antiquity, very diverse causes for epidemics were put forward: divine and other superhuman influences, unfavourable astrological constellations, and various philosophical theories such as plague particles by the atomists and *sympatheia* by the peripateticists (Leven 1992). Natural history contributions name the weather and climate conditions (mentioned above), the quality of air and water, and errors in lifestyle and diet (Nutton 2013, 25-6). Following this line of thought, an entire army could be put out of action by an epidemic after enjoying a one-sided diet, as Prokop reports for the Franks in 539.<sup>8</sup> In addition to the air poisoned by environmental influences, deliberate poisoning, especially of the water supply (well poisoning), could also be held responsible, moreover spoiled food (Lieber 1970). Galen explicitly states that putrid grain could cause a pestilential fever (*loimôdês pyretos*).<sup>9</sup> This passage shows once again how closely poisoning was associated with epidemics in the ancient imagination: not only was the inhalation of bad air envisaged as a kind of poisoning, but poisoning could also occur orally, leading to an epidemic. Accordingly, from the Roman Imperial period onwards, epidemics were also treated with the antidote theriac (Leven 2021, 379-81). This convergence between poisoning and epidemics becomes also evident in non-medical sources: Procopius describes how in the year 533 the Byzantine army was severely decimated due to mass poisoning. This was caused by rotten bread bought by the pretorian prefect responsible for provisions at a discount (Procopius, *Vandal Wars* 1.13.14-20; cf. Stathakopoulos 2004, 263-4).

So, if the ancients did not base their definition of epidemics on causes, but solely on the number of people affected and the severity of the disease, why should we impose our modern way of defining infectious diseases on the ancient sources? Admittedly, as in the case of the “great” plagues, it is obvious that many, perhaps even most, ancient accounts of epidemics speak of infectious diseases in the modern sense. At the same time, however, the narrowing down to infectious diseases also excludes many cases whose study could greatly enrich the historiography of ancient epidemics.

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<sup>8</sup> Procopius describes how in the year 539 the army of the Franks was put out of action after the troops succumbed to an epidemic of dysentery and diarrhoea. In his opinion, the illness had been caused by an unvaried diet of only water and meat. Procopius, *Gothic Wars* 2.25.16-18. Cf. Stathakopoulos 2004, 275-6.

<sup>9</sup> Galen, *De differentiis febrium* 1.4, Ed. Kühn 7.285: “Barley and wheat and all the other cereals [...] have a tendency to become putrid after a long period of time or have become filled with putridity because they have been wrongly stored, or have been attacked by rust in the course of their growth. Thus, of the many people who are forced to eat such food in times of famine, some die from a putrid or a pestilential fever (*loimôdês pyretos*), others are seized by a scabby [itching] and leprosy-like skin condition.” Transl. Lieber 1970, 334.



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## 4. Outside of the Box: Two Examples

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Two examples will demonstrate how epidemic history can be expanded to be more inclusive. Both come (coincidentally) from late antiquity, were written by little-known authors, and have never been read from the perspective of a history of epidemics.

The first passage is by Victor of Tunnuna, a Christian chronicler from North Africa who died around 560 AD (Placanica 1997, xi-xxxi; Cardelle de Hartmann 2001, 95-110). Victor reports for the year 507:

Venantius and Celer were consuls. Impure spirits took hold of the people of Alexandria and of all of Egypt, the poor and the great simultaneously, free men and slaves and clergy and monks, except for foreigners. And deprived of human speech, they began to bark all the days and nights like dogs, so much so that afterwards they were bound with iron chains and dragged to the Churches to recover their sanity. This was because they were all eating at the same time their own hands and their arms. With these things happening, an angel in the guise of a man appeared to some of the people, saying that this had come upon them as they had anathematized the Synod of Chalcedon, warning them not to presume anything of the sort thereafter.<sup>10</sup> (Victor of Tunnuna, *Chronicle* 88; Transl. Martyn 2008, 148)

In the ancient sense, the phenomenon described has all the characteristics of an epidemic: the disease is extremely serious and many people in a region are affected, regardless of their class. The religious vocabulary (“impure spirits took hold”) as well as the religious interpretation as punishment fits the source genre. It is not surprising, however, that this account by a rather obscure chronicler was never part of epidemics historiography, since the psychiatric, exaggerated, and nearly legendary symptoms do not correspond at all to the concept of a modern infectious disease.

Much better known is the second example, the description of a collective madness by John of Ephesus in his Syriac-language chronicle of miaphysite Mesopotamia (Leppin 2019, esp. 116-8; van Ginkel 1995, 27-37; Ashbrook Harvey 1990, 61-3, 68-75). John describes how, in 560 AD, a particularly severe evil afflicts his native city of Amida (now Diyarbakır in Southern Turkey), situated on the banks of the Tigris in the frontier zone between the Byzantine and Persian empires. After a rumour of an attacking enemy army makes the rounds, those affected, mainly young people, behaved in an abominably insane manner:

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<sup>10</sup> “Venantio et Celere Conss. Populos Alexandrinos et totius Aegypti omnes simul pusillos et magnos, liberos ac servos, clericos atque monachos praeter peregrinos, immundi spiritus occupant, et humana locutione privati latrare cunctis diebus ac noctibus ut canes coeperunt, ita ut vinculis ferreis vincti ad ecclesias postea, ut sanitatem perciperent, traherentur. Comedebant enim suas manus simulque et brachia pariter omnes. His evenientibus, engelus in viri scepie quibusdam ex populo apparuit, dicens hoc eis pro eo quod anathema synodo Chalcedonensi dederint, evenisse, comminatus deinceps nihil eos tale aliquid praesumere.” Ed. Placanica 1997.

They jumped, clung to the walls, hung themselves head downwards, fell, wallowed naked (on the earth) and (did) other things of the kind, so that none of them could even recognise his home or his house. [...] Brought together in the churches they were seen (to act) in various ways, some of them behaving like mad dogs and foaming (at the mouths), others brawling and speaking great words as if demoniacs. (*Chronicle of Zuqnin*, Transl. Witakowski 1996, 105)

The madness could neither be treated spiritually nor medically, indeed a bad diet only made the symptoms worse, and it lasted about a year. After this time, the sufferers came to their senses and went on a penitential pilgrimage. Like Victor, John interprets the event religiously, in this case as a divine ordeal, the last and most severe in a whole series of trials that afflicted the city of Amida and the Syriac-speaking Miaphysites.

This collective disease also has all the characteristics of an ancient plague as mentioned above. What is particularly interesting about John's very detailed account is that the city dwellers who remained healthy pursued both a spiritual treatment of the afflicted through their relocation to churches, a common practice also mentioned by Victor (see Horden 1993), and also attempted dietary therapy. The combination of these two methods of intervention makes it clear that the people of late antiquity did not know any mutual exclusivity between religious and medical interpretations of illness, but that one and the same illness was simultaneously accessible to religious and medical mitigation (Metzger 2018).

Both authors describe collective diseases that quite obviously do not correspond to any modern infectious diseases. Victor's events were retrospectively classified predominantly as ergotism or other symptoms of poisoning (for examples see Stathakopoulos 2004, 258-9), while John's collective madness was explained as mass psychosis (Toner 2013, 472), collective psychotrauma reaction (Ashbrook Harvey 1990, 65), or also as ergotism (Patlagean 1977, 83; cf. Stathakopoulos 2004, 307).<sup>11</sup> With these retrospective judgements, both sources fell out of a historiography of epidemics from the outset and could no longer be made fruitful for it. In the 6th century AD, however, historical contemporaries made no distinction between mental and physical illnesses (Metzger 2022). Furthermore, they did not exclude mass poisonings from the category of epidemics, since not only poisoning by unhealthy air, putrid vapours, or cadaveric poison but even a faulty diet was considered established causes of epidemics, closely converging the idea of poisoning with epidemic outbreaks (see above). Late antiquity demarcated epidemics differently and this has to be acknowledged.

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<sup>11</sup> On different scholarly interpretations of John's account, see Metzger 2022: In addition to the mentioned attempts at retrospective diagnosis, there are valuable interpretations with a more cultural historian approach, e.g., Meier 2003, 424-6; Rohmann 2013, 323-9.

If, on the other hand, the two accounts of Victor and John are included in the history of epidemics, exciting perspectives arise that can also enrich the interpretation of the classical “great” ancient epidemics. In particular, they offer a variety of possibilities for the investigation of historical mentalities, conceptions of the world and of disease, as well as literary renditions of overwhelming epidemic events: How did people think about these collective afflictions, how did they frame them and how did they explain them? How did they try to make the unfathomable plagues comprehensible in texts? In addition, these sources reveal a great deal about the contemporaneous imaginary worlds beyond the history of epidemics. I would like to demonstrate some of these points in the following using the two examples given above.

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## 5. Building Epidemic Realities

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At first glance, the two sources are very similar: both Victor and John wrote in the 6th century in the time of Justinian, both wrote chronicles with a strong religious impetus that places everything that happens in a great story of divine salvation. The conduct-related symptoms of the two diseases are also similar: in both descriptions, the sufferers “bark like dogs,” a behaviour with strong symbolic connotations that is very significant for late antique depictions of deviation from the norm (Metzger 2015). They share other elements of the description, too, such as the all-encompassing reach of the disease regardless of social status and during any time of day. Both authors explain the illness in religious terms and embed it in their respective basic concerns: The strengthening of their own persecuted Christian minority in the Christological controversy sparked by the Council of Chalcedon in 451 AD.

Despite these common features, the two sources have a very different context of origin, which must be included in their interpretation. John of Ephesus is writing only a few years after the event for a reading audience that potentially witnessed the collective madness of Amida. It is therefore plausible to assume a fairly high degree of authenticity in the account. By reading his text, the Miaphysites of Syria remember the terrible trials they had been subjected to over the past decades.

Victor, on the other hand, not only writes 60 years after the events described, but also relies on an older chronicle as a source. This chronicle by Theodorus Lector gives a much shorter account of the Egyptian illness and also presents the facts somewhat differently:

A bad misfortune came upon the Alexandrians through unclean spirits who chastised them. Both in the city and in all the surrounding countryside, men and women and children were possessed, innumerable in number, and they talked in an insolent manner (barked). In this situation, some apparition said that they were atoning in such a way because of sacrilege to the

Synod. Some said that they were punished in such a manner because of unlawful oaths sworn as impudence against God. Others claimed that God in anger sent these [demons] to the Alexandrians and the Egyptians because they were prevented from going to Jerusalem for the Feast of the Exaltation of the Cross.<sup>12</sup> (Theodorus Lector 516 P, ed. Hansen 1971, 148-9, translated by author)

It is striking that Victor greatly expanded the symptoms mentioned in his source. Whereas Theodoros speaks only of possession while the Greek word *hylaktein* (ὕλακτεῖν) can mean both “to speak insolently” and “to bark,” Victor settled on “barking like dogs” and added the eating of one’s own limbs as a particularly gruesome behaviour. We have no way of knowing whether Victor had other sources at his disposal or whether he freely elaborated on the event, but it is certain that his account made use of certain catchwords and *topoi* that recur regularly in such descriptions. Among these are the dog-like behaviour and the emphasis on how indiscriminately the disease struck all sections of the population. Victor’s account thus has a more drastic and all-encompassing effect.

Victor also settled on the right explanation for the phenomenon. While Theodoros offered three different theories circulating among the Egyptians to explain the affliction, Victor chose the one that best suited his religious programme, the violation of the Council of Chalcedon.

Both of Victor’s decisions in dealing with his source follow mechanisms that are independent of the exact epidemiological content of his source and can play just as much a role in the creation of accounts of “great” epidemics. Victor’s Egyptian disease can thus serve as a small but valuable point of comparison within the historiography of ancient epidemics.<sup>13</sup>

Since John of Ephesus’s account is much longer and more detailed, it lends itself to deeper interpretations with different questions: John also makes use of certain *topoi*, but in addition addresses many details that go far beyond the topical. It is informative for studies on the practical treatment of the insane in late antiquity, on the mental worlds in which norm-violating insanity took place, on the relationship between a persecuted Christian minority and the central power of the state, on the religious self-interpretation of such a minority, and on psychological reaction patterns within the Christian cosmology of late antiquity – for all these questions the text has already been called upon (Ashbrook Harvey 1990; Meier 2003; Rohmann 2013; Leppin 2019; Metzger 2022). But the text can also be made fruitful for the history of epidemics:

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<sup>12</sup> Theodorus wrote in the first half of the 6th century AD, his chronicle reaches the year 518. For Theodoros Lector, see Hansen 1971, ix-xxiv.

<sup>13</sup> The episode is also taken up and reshaped in a third chronicle: Isidore of Seville gives a brief summary in the *Chronica maiora*; for him, it is about a canine possession. For this he uses the term *rabies*, which is clearly defined medically at this time, but is not used here in the medical sense: “Alexandria et Aegyptus errore Dioscori haeretici languens in mundo repleta spiritu canina rabie latrat.” Isidor of Sevilla, *Chronica Maiora* 384 (Ed. Mommsen).

How does the population react to the collective disease? How do religious and medical treatment interact? What is the relationship between physical and psychological symptoms? What modes of thought and argumentation are used in the narrative of its causes? How does the author situate the disease in the Christian salvation narrative and employ biblical references? How does the author write about an epidemic event that his readers have witnessed, how does he deal with topoi and narrative patterns in this context? With these questions it clearly emerges that there is little difference here between the descriptions of “real” epidemics nowadays classified as infectious diseases and the phenomena presented here. Rather, an account such as that of John of Ephesus can excellently expand the source base of epidemic history.

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## 6. Conclusion

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The two passages by Victor of Tunnuna and John of Ephesus do belong to the history of epidemics. The very fact that the phenomena described do not fit the pattern of a modern infectious disease sharpens the eye for the peculiarity of the ancient concept of epidemics and prevents us from transferring too many hallmarks of the modern infectious disease to the ancient sources. These include, in particular, the focus on the defining agent of the disease, i.e., its aetiology, and a dominance of the idea of contagion, which all too often shape the questions asked by scholars. If, however, the source corpus of the ancient history of epidemics is expanded to include accounts such as those of Victor and John – of which there are countless others – different research questions arise. It is precisely the strangeness of the phenomena depicted, e.g., canine behaviour or eating one’s own limbs, that should provoke our scholarly creativity to ask new questions even of widely discussed ancient epidemics.

Instead of giving in to a research perspective determined by our personal and modern epidemic experiences with COVID-19, we should actively adjust our outlook on ancient epidemic history. Let us broaden the perspective instead of narrowing it! Accordingly, Mischa Meier, quoted at the beginning of this article, calls for the utmost self-reflection in order to escape this dilemma – immediately after his pessimistic words on the stamp that COVID will leave on epidemic history: Theoretical models and methodological approaches helped historians to transcend their own experience and strived for the highest possible historical objectivity (Meier 2020). In this sense, I hope that my contribution will enrich the debate on writing a history of ancient epidemics.

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