présente fait que chaque soignant, quelle que soit son appartenance et son savoir, suit un but commun, celui de venir en aide à la personne atteinte dans sa santé, et a sa place, définie par la loi, dans ce processus. La médicalisation de la société comme l'accès facilité à un très grand nombre d'informations qui se rattachent à la santé tendent à favoriser le recours à plusieurs thérapeutiques en parallèle. L'adaptation des soins populaires, la professionnalisation, l'élargissement de la clientèle et les interconnexions tacites «entre médecines» sont autant d'indicateurs d'une logique actuelle de complémentarité. Par ailleurs, la médecine institutionnalisée évolue également, en intégrant par exemple les sciences humaines dans son cursus de formation afin de s'ouvrir à une approche biopsychosociale plus globale.

En résumé, cet ouvrage se lit avec intérêt et plaisir, ce d'autant qu'il trace le portrait de praticiens et nous permet ainsi d'accéder à un monde encore confidentiel ou communément cible de préjugés.

Véronique Hasler, Lausanne

Ferngren, Gary B.: **Medicine and Health Care in Early Christianity**. Baltimore, The Johns Hopkins University Press, 2009. 246 p. \$ 35.—. ISBN 978-0-8018-9142-7.

“Christianity was never a religion of healing” (p. 85). Ferngren addresses the first 500 years of Christianity and argues that Christians, like other people in the Greco-Roman world, saw disease as primarily due to natural causes, to be treated by natural means. He argues that healing was what cults such as that of Asclepius offered: Christianity, in contrast, offered charitable concern and a fellowship of suffering. He sets his work within wider discussions of the relationship between science and religion in antiquity, and provides a useful summary of the existing literature.

In the first part of the book, pointing to the positive image of the doctor in Christianity, Ferngren argues that Christians were not opposed to the medicine of doctors. He challenges the view that early Christians believed all disease was due to demons. Even in the Gospels one can see a distinction between healing and exorcism, symptoms of demon-possession being very specific, with the healing miracles being “signs” of the Messianic status of Jesus, inviting those who witnessed them not to come up to be healed, but to repent. In *Acts of the Apostles*, there is little on Jesus as healer and few healings. Ferngren points out that Christian apologists of the second century simply retold the stories from the Gospels and from *Acts*; they no longer expected healing would happen. He does not see any single, simple “Christian view” here, showing that there were always some who asked whether Christians should use medicine. While the fourth century did see an increase in both exorcisms and healing miracles, this was due to a number of factors: a new status for Christianity and an influx of new converts bringing with them some pagan magical practices; the rise of the holy man; and a new interest in relics as having the power to heal. However, Ferngren insists, most Christians still had a “rational approach” to medicine (p. 83).

The second part turns to the origin of institutions for health care. Ferngren explores the meaning of *philanthropia* and *humanitas*, from the Hippocratic corpus onwards, suggesting that in Christianity pagan civic philanthropy combined with the Hebrew theme of personal concern for the poor and needy. He dates the development of health care institutions to the plague of Cyprian (mid-third century) as the stimulus leading

the church to develop new structures. Here he suggests that the church not only paid “burial attendants” to deal with the crisis, but also formalised the nursing of the sick, suggesting that the *parabalanoi* of the fifth century had their roots in this plague where they were employed as “ambulance personnel” (p. 120). As for the origin of hospitals, as Ferngren acknowledges it all depends on what we mean by “hospital”; while for him the first one is the Basileias of Basil the Great, completed in c. 372, he notes that we must not neglect the smaller institutions such as almshouses and orphanages that offered care to the needy, especially since curing and caring were not as firmly separated as they are now.

This area of medical history, poised between the disciplines of history and theology, antiquity and the Church, is one with its own particular problems of methodology. Ferngren readily admits that the picture one gets depends to a large extent on which evidence one privileges. The apologists? Or the more sensationalist pseudepigraphical gospels and acts? One way through the minefields has been to use methodology taken from the social sciences. But Ferngren explicitly resists this route. For example, where many scholars now prefer to talk about “healers” rather than “physicians” in the ancient world, he retains the traditional terminology and resists the “medical marketplace” model, suggesting that the naturalistic methods of physicians dominated any market from classical Greece onwards. Some would see the bias of the medical sources in favour of the *iatroi* and *medici* as something to be overcome by speculating about the activities of root-cutters, drug-sellers, and exorcists: Ferngren regards the bias as “largely due to the pre-eminence they enjoyed among healers in the Roman Empire” (p. 39). He suggests that physicians were the first choice of patients who could afford them, using the story of the woman with the haemorrhage who had consulted “many physicians” not “many healers”. Only for the chronically sick poor would healing shrines have been anything but a last resort: “Physicians are likely to have been consulted routinely by Christians” (p. 40). While it is refreshing to see the author’s objections to other methodologies stated so openly, it is still clear that, when uncertainty remains, Ferngren will fall back on his own “reason”; for example, when stating it is acceptable to argue from silence, “it is more reasonable to think that ...” (p. 40). On the question of whether the people of the past were like us, or not like us, Ferngren comes down on the former side; discussing pilgrims travelling to healing shrines, he suggests this was “much as they travel today to Lourdes or Fatima” (p. 137). Some would disagree with the “much” here.

Ferngren’s summary of the Greco-Roman medical ideas shared by Christians and pagans (a word he is happy to use) can sometimes come across as one-sided. There is more to ancient medicine than humours, whatever his assertions that “Most doctors believed that health resulted from a harmonious balance of the humors of the body ... while disease was caused by a disturbance or imbalance of humors” (p. 18). Some statements lack the support that a casual reader may assume is present; for example, “Most physicians received their training by apprenticeship” (p. 19). This controversial and readable account deserves a wide audience, but cannot be the final word on the topic.

Helen King, Whitenights (GB)