FICINO THE PRIEST

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The provision of medical care was an integral part of the ministry to be supplied by a Christian priest. That, I think, is the most challenging thesis formulated by Ficino in the several passages of his works in which he expounds his understanding of the meaning of the priesthood. These passages occur in three different kinds of context. The first are *apologiae pro vita sua*, in particular, for his continuing to exercise the medical profession—usually gratuitously, but occasionally for payment—even after his priestly ordination. The second are appeals to popes, bishops and other ecclesiastical dignitaries in which their priestly duties are recalled in more or less generic language, but usually referring to 'healing', not always in a purely metaphorical sense. Finally, there are letters mainly concerned with the selection criteria to be applied in the case of candidates for the priesthood, assumed to include therapeutic aptitudes.

It is in the first kind of context that the passages of greatest pertinence to the topic of the priest-doctor occur. For instance, in the letter of self-defence (*Apologia*) addressed to the three Peters, Piero del Nero, Piero Guicciardini and Piero Soderini, on 15 September 1489, two years after his installation as canon of the cathedral chapter of Florence, Ficino roundly asserts that:

Christ himself, the giver of life, who commanded his disciples to 'cure the sick' in the whole world, will also enjoin priests to heal at least with herbs and stones, if they are unable to cure with words as those men did before.¹

Ficino has compressed three striking opinions in this one sentence. In the first place, he is not just talking about what Christ told his disciples to do during his historical life in Palestine fifteen hundred years before. He is asserting—in as prophetic a tone as he ever reached—that Christ is enjoining his priests to attend to the sick in

the here-and-now. Secondly, Ficino assumes that the normal way in which the cure was to be effected was by word of mouth. Priests are expected to heal the sick miraculously, presumably in the manner of the Apostles in the Book of Acts as well as of later thaumaturgists, such as Sts Cosmas and Damian and other holy healers. Thirdly, if priests, like the times, are somewhat deficient in the faith needed to produce miraculous cures, then it behaves them to resort to such means as herbs and stones. Perhaps the most interesting point here is that while Ficino appears to be, rather unusually for that time, distinguishing between what one might call ‘logotherapy’, curing through language or the Word, and ‘object-therapy’ as respectively the more properly sacerdotal and the less properly sacerdotal methods of curing, he does not distinguish within the less sacerdotal procedures between what we might call scientific or natural methods on the one hand, and superstitious or intuitive methods on the other.

In the passage just quoted and in other parallel contexts, Ficino proceeds to give three lines of argument in support of his general thesis that the priesthood and medical practice were intimately connected. The first line of argument is that, although a certain division of labour had come about between priest and doctor as a matter of historical cultural practice, yet, in origin and essence, there was an identity of function. Thus, in the Oratio de laudibus medicinae, Ficino says:

Among the Egyptians and the Persians, the same men were both priests and doctors. . . . The priests of the Egyptians, most ancient of races, were without exception outstanding physicians . . . The Persian magi or priests . . . [wrote] countless books to safeguard our health.²

Ficino quotes Egyptians and Persians because he believed they were the recipients of a primitive revelation from God, which was presumably the foundation of what their priest-doctors did, as well as said. But this belief is not absolutely necessary to the point he is making. An anthropologist today might want to give illustrations of a more abundant and different nature, but I doubt if anyone would want to quarrel with Ficino’s genealogical point. The association of disease with death as punishment for some primordial crime, or for some other sinful happening, is too widespread not to have given rise, as far back as the human power of tracing goes, to the coupling