nowhere'. But perhaps his self-presentation is not truthful and not the best way to understand his views.

All in all, Vlad's presentation suffers from faults that she inherits from her source, Damascius. Regarding specific points, her book provides valuable background on the history of some of Damascius' concepts, such as those of divination and the ineffable. In general, though, the experience of reading Marilena Vlad's book is very much one of going over Damascius again, but at a slow and contemplative pace.

> ANTONIO VARGAS Hebrew University of Jerusalem Email: antoniov@gmail.com

DAS (A.R.) **Galen and the Arabic Reception of Plato's** *Timaeus*. Cambridge: Cambridge University Press, 2020. Pp. xiii + 243, illus. facsimile, map. £75. 9781108499484. doi:10.1017/S0075426922000982

Plato's *Timaeus* exerted a catalysing influence on medical and philosophical thinking well into early modernity. Das' investigation tracks this influence on Galen and four major medical-philosophical figures of the Islamicate tradition, Hunayn b. Ishāq (d. 873), Abū Bakr ar-Rāzī (d. *ca.* 925), Avicenna (d. 1037) and Maimonides (d. 1204). Neither a purely philological project nor a purely theoretical analysis of nuanced philosophical or medical positions, this volume builds on these two approaches to focus in a novel way on the disciplinary 'boundary work' that the Platonic dialogue, and Galen's interpretation of it, inaugurated and sustained in the Islamicate intellectual tradition.

Galen, Das explains, sought to grant medicine greater prestige *vis-à-vis* philosophy, in large part by showing how he could use medicine to assess some of the claims in Plato's *Timaeus* that involved the human body and soul, and even the cosmos; despite the tepid reaction to Galen's initiative in the late ancient Greek world, slightly later Arabic thinkers, especially Hunayn and ar-Rāzī, saw Galen's foray into key philosophical questions as an invitation to expand the proper bounds of medicine for themselves. And since the *Timaeus* itself was not available to medieval Arabic readers, their access to the dialogue was filtered through Galen's interpretation of it.

Das shows how Hunayn used the Galenic-*Timaean* encephalocentric model of the soul to elevate the importance of the eye (an outgrowth of the brain), and with it ophthalmology, in his *Ten Treatises on the Eye.* Though Galen had earlier cast doubt on the self-sufficiency of ophthalmology while championing the comprehensive medical knowledge of generalist doctors, Hunayn made clear that general medicine as well as philosophy are 'ancillary to the acquisition of specialist knowledge' (72). This reconfiguration of the generalist-specialist relationship, Das notes, anticipates modern views on medical specialization.

Turning to ar-Rāzī's *Doubts about Galen*, Das asserts that ar-Rāzī saw himself as the proper interpreter of Plato and set about showing Galen to be inconsistent with himself and blind to the theological implications of his mere medical learning. Ar-Rāzī claimed that Galen overlooked God's goodness as the true (*Timaean*) cause of creation, focussing instead on natural causes. An underestimation of God's omnipotence forces supposedly Galenic views on pleasure and the substance of the soul into conflict with Plato (and with views espoused elsewhere by Galen). Though one may wonder if ar-Rāzī's *Doubts* is a 'medical', as opposed to philosophical, work, Das is right to point out that both ar-Rāzī and Ḥunayn were calling for a broader and more inclusive interaction between medicine and philosophy, following in Galen's footsteps.

In the chapters devoted to Avicenna and Maimonides, Das sees a conscious tightening of the disciplinary borders around medicine; as Das brilliantly exposes, Avicenna and

## PHILOSOPHY

Maimonides both omit and suppress key 'physiological' findings from Galen's inquiries into the source (heart or brain?) of the pneuma responsible for sensation, opting to preserve their adapted Aristotelian cardiocentric theories intact. Instances abound of Avicenna pulling rank as a philosopher to explain how experiments fail to overturn traditional philosophical theories; see for one example his comments to al-Bīrūnī on the inconclusiveness of his experiments to prove the existence of void space (G. Strohmaier, trans., *Al-Bīrūnī: In den Gärten der Wissenschaft* (Leipzig 1988), 63–64). The important work done in this chapter helps to explain the recalcitrance of the system of Galenic humoral pathology, which changed little over the centuries between Galen and Avicenna, and even less in the centuries after the *Canon*.

Das' repeated claim that Avicenna saw medicine as an 'inferior' discipline (142, 146) relative to philosophy is something of an infelicity; the passages adduced repeat the traditional view that medicine is rather genetically dependent upon natural philosophy for its starting points. A more direct engagement with late ancient approaches to dividing and subordinating the sciences, and especially the highly relevant *Classification of the Sciences* (*Aṣnāf al-'ulūm alḥikmīya*, ed. M.-T. Dānešpajūh, in *Taḥqīqāt-e Eslāmī* (Tehran 1991), 211–20) by Avicenna's mentor in medicine Abū Sahl al-Masīḥī (d. after 1015), would have been welcome in this chapter. The more nuanced meta-scientific terminology of universality vs particularity and completeness vs incompleteness in sources such as the *Classification of the Sciences* complicates the misleading superior vs inferior dichotomy of Das' account. A persistent Platonic animus towards all things corporeal may also be operative for Avicenna, but this is to be seen in the context of an evolving attempt to classify the sciences on other and more neutral criteria.

The chapter succeeds in showing how and why Avicenna responded in ostensibly 'medical' works to *Timaean* controversies over the location of various faculties of the soul and the nature of pleasure. Das' treatment of two different accounts of pleasure, in the *Canon* and the more philosophical *Cardiac Drugs*, demonstrates especially well how the same subject can be probed to varying depths of explanation depending on discipline and audience.

In the final chapter, Das draws out critical passages from Maimonides' *Medical Aphorisms* where Galen is rebuked for his erroneous (*Timaean*) stance on the role of matter in creation, essentially labelled a heretic and false prophet (180). She also shows how Maimonides deliberately misread and suppressed certain experimental anecdotes from the Galenic corpus, attempting to protect Aristotelian cardiocentrism while also showcasing his own anatomical skill.

This outstanding and well-researched book will prove informative for many areas of study; those working in Classics, the history of philosophy, history of science and medicine, science and technology studies, and even the medical humanities will find much that is relevant to their own areas of expertise. Concerns about the place of spirituality in medical training and practice are as relevant today as they were in the Islamicate world. While one might soften the edges of the antagonism between medicine and philosophy that Das finds in some of the writers explored, this valuable investigation adds great detail to our picture of the landscape of medieval Islamicate medical knowledge, showing how some of the chief figures that shaped this tradition were in turn shaped by Galen's engagement with the *Timaeus*.

NICHOLAS AUBIN University of Warwick Email: nicholasallanaubin@gmail.com