

that—as a measure of objective knowledge. It does not consider the narrative construction of such texts, nor the relationship of medical discourses to those found elsewhere, such as theological and philosophical treatises. This lack is illustrated by the uncontextualized (over)use of Wright’s *Passions of the minde* to demonstrate the construction of emotion beliefs and performances in the self-consciously literary sphere. This aside, the volume will be of benefit for scholars from the sciences and the humanities. It is a well-crafted and welcome addition to the early modern history of emotion and subjectivity.

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Gary Leiser and Noury Al-Khaledy (eds and transl.), *Questions and answers for physicians: a medieval Arabic study manual by ‘Abd al-‘Aziz al-Sulamī*, Sir Henry Wellcome Asian Studies, vol. 3, Leiden and Boston, Brill, 2004, pp. xii, 250, €59.00, US\$74.00 (hardback 90-04-13671-1).

Gary Leiser presents in *Questions and answers for physicians* an edition of the Arabic text of the *Imtiḥān al-alibbā’ li-kāffat al-aṭibbā’* (‘The Experts’ Examination for all Physicians’) by ‘Abd al-‘Azīz al-Sulamī (ca. 1155–1208) together with an English translation, a preface and an introduction. The latter is based on an earlier article by Leiser and the late Noury al-Khaledy published in 1987.

Sulamī’s text is divided into ten chapters, each containing twenty questions about a particular field of medicine (i.e. “On the pulse”, “On simple drugs”, “On what a surgeon should be asked”). In the corresponding answers the author usually quotes from one of the well-known sources of Arabic medicine like Galen, Ibn Sīnā and ‘Alī ibn ‘Abbās al-Majūsī. In his introduction Leiser mentions the most important of these sources (p. 10) and gives additional information in the footnotes to the translation. The quotations are usually not literal, but paraphrases, and it is regrettable that Leiser does not explore the relation between the

sources and the *Imtiḥān* in detail. How Sulamī proceeded in selecting and using them remains therefore unclear.

One of the most crucial questions concerning the *Imtiḥān* is its purpose. Leiser explains at the beginning of his introduction, that “examinations were sometimes given to determine a physician’s qualifications” and that the *Imtiḥān* was such an examination (p. 1), yet at a later point he doubts that it was a real examination (p. 10). Leiser argues that it clearly falls into the genre of “questions and answers” (*masā’il wa-ajwiba*), a popular form for Arabic treatises on various subjects for didactical purposes. This conflicts with Leiser’s earlier statement in the preface that he “had discovered no other work quite like” the *Imtiḥān* (p. ix). Moreover, he refers to Hans Daiber’s article on the genre in the *Encyclopaedia of Islam*, yet fails to take into consideration a more recent publication by the same author which deals with Ibn al-‘Amīd’s answers to the Buyid king ‘Aḍudaddawla (*Die Naturwissenschaft bei den Arabern im 10. Jahrhundert n. Chr.*, Leiden, 1993) and would have provided a good opportunity to contextualize the *Imtiḥān* within the “questions and answers” genre. Leiser narrows the various possibilities of a didactic purpose of such texts somewhat unconvincingly down to two alternatives: self-taught physicians and physicians who studied with a master (p. 11). There is, however, at least a third option: that a student revises knowledge acquired from a teacher.

Another interesting aspect which Leiser raises in his introduction is Sulamī’s involvement in Ayyubid politics. Sulamī was appointed *ra’īs al-ṭibb* (literally “chief of medicine”) for Egypt by the Ayyubid Sultan al-‘Ādil and dedicated the *Imtiḥān* to al-‘Ādil’s vizier, al-ṣāḥib. Unfortunately, Leiser does not expound on the potential duties of this office and what they might imply for the *Imtiḥān* and its purpose. If Leiser is right in suggesting that al-Ṣāḥib encouraged Sulamī to write the *Imtiḥān*, and that the latter endeavoured to improve the medical standard in Egypt, one should reconsider the question of a practical use of this text. Leiser’s rather brief remarks on Sulamī’s relation with the Ayyubids

reveal another flaw of the book: the relative disregard of studies published after Leiser's and al-Khaleedy's article of 1987. For generations, members of Sulamī's family were appointed as *madrasa* professors in Damascus, yet Leiser fails to refer to the thorough studies by Louis Pouzet ('Les *madrasas* de Damas et leurs professeurs durant le VII/XIII^{ème} siècle', *Mélanges de l'Université Saint-Joseph* [1991/2], 52: 121–96, and *Damas au VIIe/XIIIe siècle*, Beirut, 1988).

These problems of the introduction notwithstanding, Leiser has presented a text which allows important insights into diverse aspects of medicine in Ayyubid Egypt.

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Victoria Thompson, *Death and dying in later Anglo-Saxon England*, Anglo-Saxon Studies 4, Woodbridge, Boydell Press, 2004, pp. x, 236, £50.00, \$85.00 (hardback 1-84383-070-1).

Historians of medicine might think there was little for them in this book after reading, in the author's initial case-study of the remarkable Æthelflæd of Mercia (d. 918), that "We do not know . . . how she died or what kind of medical treatment she may have had". But interesting ideas about the body appear as one reads on, for instance that the mind was "understood as part of the body" and not of "the *sawl* or *gast*, which leaves the body at death", so that death, and the activities which follow it, could be experienced by the individual as the illness that preceded it was. Unfortunately the sources do not specify when this non-soul consciousness ceased (burial? judgement?), but this is one of a group of ideas which emerges strongly from this study, making a close and inevitable connection between illness and death. A "good death" was one in which the dying person, having lived out their allotted span, was able not only to receive the sacraments, but to say farewell to the grieving friends and relations around the bed. Thus the sickbed turned almost imperceptibly into the deathbed, as part of an ordered series of events, and, as Thompson points

out, even the grave could be called "bed" (*legerē*).

Because of this intimate connection between illness and death, Thompson has a good deal to say about the former in her examination of the latter. In doing so, she subjects the Old English medical texts to an examination rather different from that they usually get from scholars specializing in medicine. For instance, she draws attention to parallel Anglo-Saxon ideas about external causal agents of illness (flying venom, elfshot), decomposition (worms), and eternal punishment (serpents, demons). As she says in one of her chapter-headings, the body was "under siege in life and death". This understanding is a useful counterweight to M L Cameron's emphasis on the "rational" and (sub-)classical in Anglo-Saxon medicine, which led him to overestimate the degree to which humoral theory was current and understood in early medieval England (*Anglo-Saxon medicine*, 1993). Nevertheless, as Thompson points out, the medical texts themselves have little to say about death, no doubt at least partly because of their need to claim success for their prescriptions ("he will be well at once" etc.).

The "medical" texts that do concern themselves with death are the prognostics (notably the sphere of Apuleius, but including several others), but these are rarely found in medical manuscripts. They tend rather to travel with texts on the calculation of Easter, with which they share an interest in knowledge of the future. These obviously belong to an ecclesiastical, as well as a learned, milieu, whereas Old English medicine arguably occupied a different part of society. Thompson shows that the Anglo-Saxon church drew very little on medical thinking, either local or sub-classical, in developing its ideas about the flesh, despite the fact that its writers could elaborate an extended metaphor of the confessor as physician of the soul. The influence was rather in the opposite direction, with snatches of liturgy and quasi-liturgy occurring frequently in medical charms. Interestingly, however, the association of sin with leprosy seems not to have been current yet in England.