

A history of our own? Using classics in disability histories

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Abstract

This chapter discusses the uses of the classical world in constructing histories of disability and in considering what disability is. It investigates a range of conditions, including asthma, endometriosis, and conditions of hearing and sight. Some histories focus on key authorities from antiquity, such as Hippocrates, Aristotle or Plato, while others look at inspiring individuals such as Quintus Pedius. The emphasis may be on continuity, or on change and progress. Modern literature and art can also use the classical world as a way of representing disability. In the case of Nydia, the blind flower-girl of Bulwer-Lytton's *Last Days of Pompeii* who leads her companions to safety, nineteenth-century audiences found her so sympathetic that Randolph Rogers produced a sculpture of her, copies of which are still displayed across the world today. The response to her from more recent blind activists is less sympathetic.

Introduction

How do disability histories use the classical world, and in what other ways has the classical legacy been called on for help in constructing responses to disability? In this chapter I want to consider two approaches to these questions: the first using formal histories of particular conditions defined as disabilities, and the second based on more creative literary or artistic responses in which the ancient world is the subject of various types of reception.

Histories of disability may be created by awareness and support groups, or by medical specialists: in the former case, these are currently found in blogs and official sites online, while specialists tend to publish in medical journals. The material used in these histories comes from readings of ancient medicine and philosophy. The focus is often on the achievements of individuals with whichever condition is being discussed, although some such histories provide a less personalised timeline of key contributions (e.g. Bottrell n.d.). The authors of such histories, like other writers of history, need to decide where to start: a decision which can be very significant for the message the history is intended to convey. A history of a disability can be presented as one which extends as far back as possible, thus stressing continuity and a shared experience between us and the past, and invoking the key names of the Western tradition such as Hippocrates, Plato or Aristotle: or, instead, it can concentrate on change, telling the story of a recent moment of breakthrough or enlightenment coming after millennia of darkness. If the first of these options is taken, then authors still need to decide where to position themselves in relation to the ancient world. This entails determining whether classical examples remain 'good to think with', or whether they should be dismissed as merely cautionary tales of a less enlightened time.

But it is not only ancient medicine and philosophy which are used in understanding disability. In the reception of the ancient world, classical myth can also be drawn on to represent disability and responses to it. Here, too, in artistic and literary works which engage with the classics, considerations of whether to concentrate on similarity or on difference are brought into play. In the second part of this chapter I shall look at some

works of fiction created in the modern era which have contributed to views of ancient Greek and Roman approaches to disability as well as helping people to think about disability in their own contexts.

Creating genealogies of disability

Asthma

Histories of asthma provide excellent illustrations of the options available in using history to understand a disability. For example, a section of the *Journal of Asthma* takes the ‘achievements of individuals’ approach, with accounts of ‘the experience of asthma in the life of outstanding persons’ such as Seneca the Younger (Panzani 1988); in one of his letters, Seneca strikingly described an acute attack of ‘shortness of breath’ (Lat. *suspirium*), added that he saw no reason to use the Greek name for it – *asthma* – and observed that doctors called it ‘practising how to die’ (*Ep.* 54.2; Jackson 2009: 17-19). This long history and focus on achievements, with the personal touch of the voice of someone who apparently had the condition, clearly resonate with contemporary people with asthma who note that it was ‘as though I had a special connection with this guy who lived more than 2,000 years before me’ (Bottrell 2015a) and who also find it reassuring to remember that there was a time ‘... when there was no cure and no remedy that really provided any relief. It must have been pure hell to live like that’ (Frea 2011).¹ Another journal, *Allergy and Asthma Proceedings*, includes a parallel series started by Sheldon Cohen on ‘Asthma among the famous’, with the classical individuals featured including Seneca, Pliny the Elder and ‘Augustus Caesar (63 B.C.-A.D. 14) first emperor of Rome’ (King and Cohen 2001).

The asthma sufferer, respiratory therapist and freelance writer John Bottrell included Seneca in his ‘Asthma history’ blog, set up in 2013 to ‘provide a history of lung diseases from the beginning of time to today’ (Bottrell 2015b). Over the blog as a whole, however, his focus is more on providing a long narrative account of the condition by providing brief biographies alongside summaries of texts. In his first post for this blog, he traced ‘The oldest description of asthma (sort of)’ to 2697 BCE, to Chinese medicine and specifically to the *Yellow Emperor’s Classic on Internal Medicine*; the ‘sort of’ is because the description referenced here is to difficulty in breathing rather than to a named disease (Bottrell 2013a; Jackson 2009: 40-1). Bottrell considers that the person ‘who made asthma a household name’ was Hippocrates; and, after medicine took a brief detour into considering that the condition was a nervous disorder, ‘It wouldn’t be until the early 19th century that it was proved that Hippocrates was right all along, at least about asthma being spasmodic in nature’ (Bottrell 2013b).

Because the names of Hippocrates, Aristotle and Galen continue to hold power, writers of disability histories are keen to include them. In most medical narratives which invoke the classical past, the key name remains that of Hippocrates and, in my book *Hippocrates Now: The ‘Father of Medicine’ in the Internet Age* (2019), I demonstrated how Hippocrates today is almost always regarded as being ‘right’. We meet him in many places where the body is

¹ A revised version of this blog post appears as Bottrell 2015b. The connections between Bottrell’s multiple blogs can be difficult to unravel but see <http://hardluckasthma.blogspot.com/2016/06/new-asthma-history-blog.html> for some explanation.

under discussion: from Wikipedia to ‘quotes’, and from news outlets to social media. In contexts ranging from the validity of the Hippocratic Oath to the ideal diet, he is claimed as the father not just of medicine, but of health, of food science and of holism. Histories of disability and of various medical conditions which are aimed at medical practitioners rather than at those with the condition may include Hippocrates not just to create a picture of continuity but also to provide a sense of progress, as in Edmund Keeney’s presidential address to the 1964 annual meeting of the American Society of Allergy, entitled ‘The history of asthma from Hippocrates to Meltzer’. Keeney’s comments on the ancient world repeated what was then the standard textbook picture of movement from darkness to light and from superstition to ‘rationality’, a shift in which Hippocrates was thought to be crucial. Where the focus is on therapy rather than description or identification of a condition, however, Hippocrates may be considered less relevant. In ‘A brief history of asthma and its mechanisms to modern concepts of disease pathogenesis’, for a journal focusing on allergy, asthma and immunology, Stephen Holgate highlighted the changes in understanding of the condition which led to a shift in therapy from bronchodilators to corticosteroids; for this particular story, only a single sentence on the Greek origin of the word ‘asthma’ was considered necessary, with the historical narrative beginning only in the late nineteenth century (Holgate 2010: 165).

Much hinges on how significant the use of the word *asthma* in the Hippocratic corpus is considered to be. It is certainly used there, since it is just a word meaning ‘panting’ or simply ‘breath’, but this can be blown up out of all proportion. There is no awareness in these histories that, in all instances in which the word features in Hippocratic treatises, it is used in the plural: *asthmata*, rather than as a disease label. While some such histories at least recognise that Hippocratic usage concerns a symptom rather than a named condition, many do not make this distinction. A web page on ‘Who discovered asthma?’ currently offers

The history of the discovery of asthma as an acute respiratory disorder came to light in 400 BC. The term ‘Asthma’ was first used by Hippocrates in his book ‘Corpus Hippocraticum’ where he also provided a definition for the medical term (How to Use Inhalers, 2012).

While the ‘light’ in this story of enlightenment is here firmly associated with Hippocrates, the date of 400 BCE is entirely arbitrary, probably based on taking the traditional dates for Hippocrates – 460-370 BCE – and then picking a round number in between.

While Hippocrates is often credited with making *asthma* into a ‘medical term’, there is a variant which splits the roles of recognition of a symptom and describing a condition. In this version of the history, Hippocrates was aware of it simply as a symptom, and it was only with Aretaeus that it became something more, so that the credit for ‘the first accurate *description* of asthma, as we know it today’ (Karamanou and Androutsos 2011; my italics) goes instead to Aretaeus (Sakula 1988: 35).

The search for medical wisdom in the past is by no means only a modern phenomenon, and other names from ancient medicine may also feature in histories of asthma. In his *Observations on the History and Cure of the Asthma* (1793), Michael Ryan claimed that he had

read most of the modern writers, and hitherto had tried their methods, and hot pectorals and cephalics in vain. I believed by my ill success in their way that they never understood this disease; and therefore turned over some of the old writers, Galen, Aegineta [Paul of Aegina], Aetius, &c. where I found more rational notions, and was directed by them to the use of that medicine which does very much relieve and prevent my fits (Ryan 1793: 65-6).

This picture of a turn towards history in order to help one's own condition feels very modern indeed. As this passage suggests, Ryan believed that the remedies used by classical authors were 'not only rational but successful' (Ryan 1793: 64). Hippocrates featured here too, as another hero of this story: while Hippocrates was 'intimately acquainted' with the nature of asthma (Ryan 1793: 57), Galen had 'pervert[ed] the intention and meaning of this illustrious writer' (Ryan 1793: 58). Ryan's favoured remedy was the cold bath; in the eighteenth century, the healing powers of both hot and cold baths were commonly traced back to Hippocrates (e.g. Floyer 1715: 47).

Not everyone agrees, or has agreed, that effective remedies can be taken from the past. One popular website observes that Aretaeus' 'suggested remedy of drinking a concoction of owl's blood and wine, however, is thankfully no longer a recommended intervention for asthma' (Felman 2018). *Asthma: The ultimate teen guide* attributes this remedy simply to 'The Romans' and contrasts it with Maimonides' 'more appetizing choice' of chicken soup (Paquette 2003: 1). The owl's blood remedy, part of the approach to ancient medicine which focuses on the 'curiosities' rather than making it into the ancestor of modern medicine, is variously attributed across histories of asthma. I have found no evidence that it derives from Aretaeus; while he does indeed describe asthma along with orthopnoea in his treatise *On Chronic Diseases* (1.1), this remedy does not feature in Aretaeus's *Cures for Chronic Diseases*. In histories of asthma produced for a general readership, it may be the better-known Galen, rather than Aretaeus, who is associated with owl's blood: for example, 'Galen the ancient Greek physician treated sufferers with the disgusting concoction of owl's blood in wine' (Thorpe 2015). I have not so far managed to pin this story down, but it may originate in al-Rāzī (Rhazes), *al-Hāwī* (Vol 4, p.39), which records a remedy used in one of the medical treatises which in the Middle Ages was associated with the name of a ninth-century Christian physician, Yūḥannā ibn Māsawayh (known in the West as John Mesue).² According to Rhazes, Mesue

used for asthma and shortness of breath two drachmas of dried and powdered fox lung and decoction of figs added to a drink. In differing with Galen who reported many cured of asthma with owl's blood in a drink or giving owl's flesh with food and

² Most of the pharmacy treatises associated with the name 'Mesue' were probably written in the eleventh century or later, perhaps in thirteenth-century Bologna, and were based on the Arabic pharmacological tradition (De Vos 2013: 683; 685). The earliest manuscripts of 'the divine Mesue' date to 1281 (De Vos 2013: 671).

drinking its blood afterwards - owl's blood is not to be given in any case of asthma having seen it administered and useless (Cserháti 2004: 258).³

In Mesue's reading, just because Galen reported the remedy – and the reference, in the treatise *De simplicium medicamentorum temperamentis ac facultatibus* 10.3 (Kühn 12.257), is to the *noctua*, the night-owl – does not mean that anyone should use it now. In an odd twist on this story, an article on whether Hippocrates or Galen 'discovered' asthma states that Galen's treatment for it was 'owl's wine' (Cotto 2008), the author adding that both authors 'described asthma correctly' in contrast to 'modern day physicians' who until the 1980s thought 'that asthma was purely a psychological condition'.

Other versions of the asthma origin story which focus on ancient Greece correctly note that the term *asthma* existed before the Hippocratic texts, so that the Hippocratic contribution is to transform it from an everyday word to a 'medical term' (e.g. Marketos and Ballas 1982). Such a claim raises the contentious issue of whether there was such a thing as a technical medical vocabulary in classical Greece. Does the terminology of the Hippocratic corpus simply repeat what was already in common use, or was the process the reverse, with non-medical writers picking up words from medical texts? For example, Thucydides, Euripides and Aeschylus use terms which sound 'technical' to us, but does this mean that they took them from medical writing? These are important questions because of what they imply about the relationship between medicine and its wider cultural context. It is now nearly seventy years since Page (1953) noted what he considered to be 'technical' medical terminology in Thucydides' description of the Plague of Athens, with Lichtenthaler subsequently arguing that 'il est donc établi comme une *certitude* que l'Historien athénien a écrit la peste à l'aide de la terminologie scientifique contemporaine' (1965: 33; author's italics). Another example would be Euripides' application to Philoctetes' disease of the word *phagedaina* (fr. 792 Nauck). This word is otherwise found only in the Hippocratic corpus, Democritus, Demosthenes and in one of the Epidaurus *iamata* (Jouanna 2012b: 90-1, n. 22). As Jacques Jouanna has pointed out, in its use in Euripides the word seems to be taken from Aeschylus' play on the same theme, and Aeschylus died at around the time Hippocrates was probably born. But is that enough to make it a 'technical term' borrowed by tragedy from medicine? Not necessarily; examples such as this one may instead preserve Ionian words which had gone out of usage except in medicine and drama (Jouanna 2012a: 74-5).

We can therefore see that the various versions of the history of asthma raise several questions applicable to disability history more widely. Is the story being told one of continuity, or of change and progress? Is a classical reference being used to provide a 'landmark in medical history', whether that is the origin of the name or of the first clinically-recognisable description? Is it reassuring to know that a condition which you have goes back a long way in time, and to encounter the 'achievements' of those who share it? Those who want to present a condition as having a long history often feel the need to include Hippocrates in this, even though they may find it difficult to go beyond stating that the word is used in the Hippocratic corpus. Where the diagnosis is presented as an old one, then the length of the history constructed for it becomes significant. If this is a long history, does it

³ The author cites Dols, *Medieval Islamic Medicine* (1984), here, but I have not found this passage in that book.

matter whether we go back to Hippocrates in the fifth and fourth centuries BCE, or only to Aretaeus in the second century CE, so long as there is a 'classic' somewhere in the story? Do we foreground the Greek and Roman classics, or look to non-Western cultures; for example, to China in 2697 BCE? Is it age we want, or a Western classical pedigree? What about the Ebers Papyrus or the Code of Hammurabi (e.g. Sakula 1988; Cannizzaro 2017)? While ancient texts may be praised for recognising or describing a condition, or for finding a remedy which science subsequently forgot, there is also the tendency to dismiss older remedies for it as 'disgusting' or, in internet parlance, 'weird' (Saxena 2019). Perhaps what is most important is whether the story being told produces confidence in where we are now.

Endometriosis

These points can be illustrated further by looking briefly at the debilitating condition of endometriosis, a condition which in the UK is currently regarded as disabling but not a disability, not least because the pressure groups working to support those with it consider that it would increase discrimination against women in the workplace if it were to be so labelled. Nevertheless, women with endometriosis can apply for disability benefits (Endometriosis, 2017). Histories of endometriosis written for a general audience claim a Hippocratic origin which does not exist; for example:

As with many medical conditions, there were a couple of blokes squabbling over who was the first to describe in [sic] around the 19th century, but there is even mention of the condition and its symptoms in the Hippocratic corpus which contains works from the 4th and 5th centuries BC (Mitra 2017).

In an article published by three US medical doctors in 2012, 'Endometriosis: ancient disease, ancient treatments', endometriosis was identified with 'hysteria' – in itself, hardly a secure diagnosis (King 1993) – and a lengthy pedigree going back to the Hippocratic corpus was offered, along with the claim that the symptoms in the ancient Greek texts 'remarkably ... correspond nearly seamlessly to the set of symptoms identified today as emblems of endometriosis' (Nezhat et al. 2012: 3). Even leaving aside the many factual errors made in this 2012 article, which include attributing to the Hippocratic treatise *On Virgins* a passage which does not feature in it, presenting an image of the Delphic oracle as an example of the medical treatment of fumigation (Nezhat et al. 2012: 4 and Fig.4), and colluding in the now-discredited myth of 'Trotula' as the name of 'one of the most celebrated female physicians of ancient times' (Nezhat et al. 2012: 13; ignoring, *inter alia*, Green 2001), this picture of continuity is remarkably strained. 'Nearly seamlessly'? On my own experience of severe endometriosis, I would certainly challenge identification with hysteria; it is nothing like the various symptoms from the 'hysteria' tradition which this article confidently presents, such as 'lying as if dead for seven days' (Nezhat et al. 2012: 6). This phrase, unattributed in Nezhat, comes from Pliny, *Natural History* (7.52.175), and is entirely serious about 'as if dead'; in the 'hysteria' tradition, this doesn't mean just feeling a bit rough, but suggests that there is a risk of premature burial (King 1993: 6 and 34).

The alternative to this 'longue durée' approach is to deny that any ancient references to endometriosis exist (e.g. Sutton 2006: 3) and instead to present this debilitating condition as having a far shorter history, and as 'new' or 'modern', as for example in the title of an article

arguing for its discovery only in the 1920s which was published in a medical journal in 2011: 'Endometriosis, a modern syndrome' (Brosens and Benagiano 2011). Like asthma, endometriosis has been linked to industrialisation, although even that claim is disputed (Jackson 2006: 148). But calling it 'a modern syndrome' and deciding that the length of its history is very short is also a political move because, from the 1940s, it was linked with women who were delaying having children because of their careers. As late as 1991, US natural health magazine *Total Health* ran a story which included: 'It is called the "Career Woman's Disease" because it is predominantly found in women in their thirties, and occasionally twenties, who have not yet had children' (Binder 1991). This causation story, which suggests putting the blame on women for seeking fulfilment – or just an income – from something other than motherhood, is no longer as common as it was in the 1980s and 1990s (incidentally, the time when I was diagnosed). While one may assume that the 'it's about career women' story militates against a search for a Hippocratic pedigree, that is not always the case; the 2012 'Ancient disease, ancient treatments' article bizarrely suggested that Hippocratic claims that pregnancy releases a woman from menstrual disorders – 'if she conceives, she is healthy' (King 2005) – are 'a near conceptual equivalent to the 20th-century notion of endometriosis as a "career woman's disease"' (Nezhat et al. 2012: 3).

Hearing disabilities

Asthma and endometriosis are very much hidden disabilities. Disabilities of hearing, while also being invisible, are more likely to become apparent in social interaction. In a culture such as that of the Greco-Roman world, a person who could not hear – whether this was permanent or temporary, total or partial – could follow practical instructions well enough to do many jobs (Adams 2020: 87-8), but this would not be the case for some elite roles based on orality, using persuasion and the skills of formal rhetoric. Christian Laes has already explored the complexities of classical terminology in *Disabilities and the Disabled in the Roman World: A Social and Cultural History* (2018), and I shall not revisit his arguments in any detail here. The link between hearing and speech does seem to be one recognised in antiquity. The Hippocratic *Fleshes* 18 mentions those who are deaf (*hoi kôloi*) from birth who can utter 'mere sounds' (*monophôna*) but cannot speak. The deaf-mute is in Greek *eneos* (Laes 2018: 122, citing Galen's definition of the term). The terminology can however sometimes make it difficult to distinguish those who are deaf-mutes from those who appear closer to our category of selective mutism, such as Pliny's Maecenas Melissus who 'decided' to stay silent for three years after bringing up blood during a convulsion (Pliny, *NH* 28.62), or to autism (Laes 2018: 118-9). Are such modern diagnoses also appropriate to those healing miracles in which someone is unable to speak but then gives an answer in response to a question from the god, such as the mute boy who, during a sacrifice, spoke in answer to a slave who was helping with the firewood (IG IV² 121.41-48; LiDonnici 1995, A5)?

As with asthma, and to a lesser extent endometriosis, Hippocrates features in the history of hearing and its disabilities. Here is a claim from 'A brief history of otorhinolaryngology' published in a Brazilian journal of the specialism in 2007:

With merely empirical treatments, Hippocrates, was also interested in otology, however himself and his disciples were more concerned with the relations ear infections had with other organs, especially the brain and tonsils (Nogueira et al. 2007: 694).

So, even if Hippocrates is acknowledged as having little to contribute, he must at least be mentioned, even if only as 'interested in'. The wording here is taken almost verbatim from this article's stated source, an article by Joseph Hawkins, who co-wrote a series of 'historical sketches' of otology for the journal *Audiology and Neurotology* in 2004 and 2006, some of which were then published as a book in 2008. Hawkins mentioned

The acute observations of Hippocrates ... about the symptoms, diagnosis, course and treatment of diseases, including those of the ear ... His methods of treatment were almost entirely empirical, and he had scant knowledge of anatomy of the ear. He was mainly concerned with its infections and with their relations to other organs, including the tonsils and the brain (Hawkins 2004: 66).

The point about Hippocrates' main interest lying in the relationship between ear infections and the rest of the body is in turn based on a 1907 history of the discipline (Politzer 1907), widely repeated in medical literature on the 'giants of otology' (e.g. Traynor 2015), and is presumably what medical students were supposed to answer in response to a question in a Philadelphia 1941 exam on the history of otology: 'Write on the otological knowledge of Hippocrates' (Robinson 1941: 316). As for the tonsils, Hippocrates is also credited with the first tonsillectomy: 'The first operation on the tonsils has been attributed to Hippocrates (460-375 AD)' (Richardson 1999: 75; Vlayen et al. 2005: 49). The text that is the origin of this claim seems to be *On Glands 7* and is a matter of 'interpreting' how to map the *paraisthmia* glands in the throat on to modern notions of anatomy; discussing this, the medical authors of a 2007 article – who, commendably, drew on the Loeb Hippocrates rather than relying on earlier pieces by their own peers – concluded that the author of *On Glands* 'should be recognized as a far-seeing pioneer in haematology and medical sciences' (Crivellato et al. 2007: 591-2).

This message that the pioneering Hippocrates 'was right' remains a strong one for many disabilities. For example, on the website for Epilepsy Canada, Hippocrates comes out as the hero, contrasted with the (alleged) Babylonian view that the condition was 'supernatural':

Hippocrates believed that epilepsy was not sacred, but a disorder of the brain - a revolutionary view. He did not believe 'that a human could be invaded by a god, the basest by the most pure.' He recommended physical treatments and stated that if the disease became chronic, it was incurable' (Epilepsy Canada 2016).

The material here is taken from a World Health Organization publication (Reynolds 2005). Nor is this pattern unique to epilepsy. Along with statements about his empiricism, claims that Hippocrates moved perception of the condition being discussed from the result of divine intervention to having a natural cause are common on disability history sites; for example, on a history of developmental disabilities developed by a US group, 'For Hippocrates, care of the body was in the hands of man rather than the gods' (Minnesota Governor's Council on Developmental Disabilities 2019). Other websites go rather further in their claims for Hippocrates' work on epilepsy; for example, a student project website arguing that 'Hippocrates also develops a diet for epileptics, possibly similar to the modern

Ketogenic diet, which treats epilepsy' (Tuinstra 2001). This appears to be assuming that the effects of fasting and of a ketogenic diet are the same.

Many histories are the product of disabled communities themselves, and because of this the history may be presented as that of a group rather than of a disability. The main example of this can be found in Deaf culture, which can present as a minority language group rather than as a disability group. In its histories, as elsewhere, the story can be created out of a series of individuals; significant here is Quintus Pedius, often described as 'the first deaf person in recorded history known by name'. 'Dumb from his birth', in the translation of John Bostock, this grandson of a former consul of the same name was taught to paint and 'made great progress in the art, but died ... in his youth' (Pliny *NH*, 35.7; Bostock 1857: 231; Harrington 2006; Laes 2018: 118-9). 'Dumb from his birth' could of course point to conditions other than deafness (Adams 2020: 98).

Alternatively, in these histories the focus can be on the development of sign language rather than on deaf people. To prove the antiquity of this mode of communication, the key text cited is Plato's *Cratylus*, and the key individual Socrates, although in this story he does not come off very well. On an Estonian website for the history of deaf people, based on a now-deleted page from Gallaudet University (which educates the Deaf and those with hearing disabilities), we read: '360 BC. Socrates mentions the use of signs by the deaf, Plato's *Cratylus*. Socrates discusses innate intelligence, and claims that Deaf people are incapable of language and ideas' (Estonian Association of the Deaf 2010). This statement merges two ancient sources. First, in the *Cratylus* passage to which this refers, Socrates asks Hermogenes, 'Answer me this question: If we had no voice or tongue, and wished to make things clear to one another, should we not try, as dumb people actually do, to make signs with our hands and head and person generally?' (422e-423b, tr. H.N. Fowler 1921). This passage, and this translation, is widely quoted, despite using the term 'dumb' which is no longer in current usage; for example, in a *History Today* article examining what the osteoarchaeological evidence of deafness can contribute to our knowledge of the past, although this glosses the translation to give 'as dumb [mute] people actually do' (Atkin 2015). Socrates goes on to describe how these people – the Greek is *hoi eneoï*, whatever that means here – use gestures, showing things which are light or higher up, or heavy or lower down, by raising or lowering their hands, or imitating the movement of a horse to say 'horse'. This passage may sound like a positive valuation of what non-verbal people do but in what he entitled 'a deaf reading' of *Cratylus*, Bauman noted the political implications of Socrates talking about gestures as preceding words (Bauman 2008: 134); the claim for 'preceding' is significant here, as it suggests that communicating by words is more 'advanced'. Drawing on the signs for 'heavy', 'light' and 'horse galloping' in American Sign Language, Bauman thus reads the key passage as denigrating sign languages, making signing into a primitive stage or an aberration rather than acknowledging that a fully grammatical language does not have to be based on speech, and can instead consist of gestures.

Second, that claim 'that Deaf people are incapable of language and ideas' is not a direct quotation from Plato, but seems to summarise Socrates saying, in a discussion of 'rational explanation', that anyone can make their thoughts clear by using speech; or, at least, anyone 'can show what he thinks about anything, unless he is deaf or dumb from the first' (*Theaetetus* 206d-e). But it also owes something to Aristotle, who is definitely not the hero of

classical deaf history. Many online histories of the deaf repeat variations of ‘355 BC. Aristotle says “Those who are born deaf all become senseless and incapable of reason”’ (‘Foreign deaf history’ 2010; Shaner 2013). This comes from a widely-repeated sentence in the 1911 edition of the *Encyclopaedia Britannica* (Payne 1911) and, in the Introduction to a history of deaf America by a deaf author, Jack Gannon, Mervin Garretson described it as ‘The most *vicious* pronouncement’ (Garretson 1981; my italics). While in *On Sense and Sensible Objects* (437a15-18) Aristotle claims that ‘of those who have been deprived of one sense or the other from birth, the blind are more intelligent than the deaf and the dumb’ (tr. Hett 1957), as Ellen Adams has noted,

He does not explicitly state that the deaf were incapable of obtaining rational thought, as is often claimed in modern deaf studies (Adams 2020: 89).

In these deaf histories which draw on the classics, Hippocrates may come out relatively well, being seen as superior to Aristotle simply because he did not consider that those who were both deaf and mute were affected by any intellectual defect: in the 1911 *Encyclopaedia Britannica* article, for example, ‘Hippocrates was in advance of Aristotle when he realized that deaf-mutes did not speak simply because they did not know how to’ (Payne 2011). But, in fact, there is very little in the Hippocratic corpus on those born deaf, let alone on their intellect. It is never clear whether those who do not speak are deaf, or have another condition which affects their ability to speak. The Hippocratic treatises are interested not in those who are born deaf, but in deafness as a stage of an acute disease (Adams 2020: 87; 93-4). For example, in *Prorrhetic* 1.29, suddenly becoming deaf is seen as a bad sign, which can be relieved by passing blood in the stools; but that still presages death.

Nor is Hippocrates always presented as superior to Aristotle here. Giulio Ferreri, an oralist teacher of the Deaf – that is, not a supporter of sign language – noted in a paper translated into English in 1906 that the ancients handed down to us the error that being mute is about the tongue not being able to move properly and if it is released then they can speak (hence our ‘tongue-tied’), and argued that Aristotle had a better understanding of how speech happens than Hippocrates did. Ferreri also commented that, in contrast to the ancient habit of defining deaf-mutes by their inability to communicate in speech, the modern term ‘deaf-mute’ puts cause and effect in the correct order (Ferreri 1906). Here, then, it is Aristotle who is seen as having the knowledge.

In modern medical literature there is also the view that Hippocrates was the source for Aristotle’s alleged views on the intellectual capacity of the Deaf. In a 2006 invited review for the *Mediterranean Journal of Otolology* an otologist, Anestis Psifidis, wrote:

Hippocrates believed wrongly that, in deaf-mute patients, both the hearing and speech organs had been affected. His theory that deaf-mute children were developmentally challenged was adapted by such followers as Aristotle and Galen and influenced scientific knowledge and the progress of medicine for about 2000 years. Until the 16th century, deaf-mute children were treated as disabled, invalid, and demonized individuals and were rejected by society. In ancient Sparta, deaf-mute children were thrown down Keada, a precipitous ravine, to be killed (Psifidis 2006: 45-6).

This is unfortunately a typical example of what happens when someone writes the history of his own specialism using only previous work by people in exactly the same position. In this case, Psifidis is using a 1997 book by Panos Apostolides, *Ear, Nose and Throat Diseases in Hippocrates*. There is no evidence for this Spartan slaughter of the children, but the focus here fits another of the themes of disability history, the emphasis on past ill-treatment, which is part of the broader approach to the past as a bad place to be contrasted with modern enlightenment; for example

It is reported that in many of the early great civilizations, blind babies were abandoned and left to die, either from exposure to the elements or to be eaten by wild animals. Later, some blind men were sold into galley slavery and some blind women were sold into prostitution. Others were used for amusement, but most lived their lives as beggars or were simply kept by families (Omvig 2019).

There is plenty of evidence for attitudes to disabled people that demean them. There is one reference in Plutarch to a dedicated market in Rome where they were sold as slaves:

at Rome there are some who take no account of paintings or statues or even, by Heaven, of the beauty of the boys and women for sale, but haunt the monster-market, examining those who have no calves, or are weasel-armed (i.e. short arms), or have three eyes, or ostrich-heads, and searching to learn whether there has been born some 'Commingled shape and misformed prodigy' (*On being a busybody* 10, 520c, tr. Helmbold 1939).

This is supported by, for example, Quintilian who states that physically imperfect slaves cost more than attractive slaves (*Institutions* 2.5.10-12), but it is also clear that Plutarch, as Debbie Felton, observed, 'deplores' the existence of this market and those who use it (Felton 2012: 128-9). The 'bad emperors' are also associated with using individuals with disabilities for entertainment; while we find this disturbing, as Lisa Trentin (2011) points out the idea that you do not treat people in this way is relatively recent.

It is clear that there are different valuations of ancient authorities in the medical and disability communities. In 1993 Edmund P. Fowler of the American Otological Society (founded 1868) wrote on its history 'The second one hundred years: musings and dreams of things to come'. In discussing the number of developments in medical treatment over the first 100 years of the society, he referred to Hippocrates not as an otologist but in terms of 'primum non nocere', 'first do no harm'; the more new things there are on offer, the greater becomes the risk of accidentally doing harm (E.P. Fowler 1993: 88). Here, even where Hippocrates has nothing to say on a particular topic, his ethics at least still need to be referenced, because medicine needs Hippocrates. Fowler also observed that, while more information was needed on the history of the Society, 'we cannot live on truth alone. The writers of history should use their *imagination* and so leave with us not just the words, nor just the tale, but a way of looking at things. They should record the myth as well as the facts' (E.P. Fowler 1993: 88). This is an interesting manifesto, not least because it suggests that there is some pure form of history in which the historian offers 'truth alone'.

Putting yourself in the story: myth and imagination

It is clear from this brief examination of disability histories that some play fast and loose with the available evidence in order to push home their point. In this final section I want to examine two examples of a different use of the imagination, not to select and skew ancient evidence but instead to provide not just 'a way of looking at things' but also a way of enabling those with disabilities to make sense of their bodies and those without disabilities to empathise with others. This involves using the ancient world – and its reception – in a different way. My first example picks up a condition already discussed here, endometriosis. While, as I have shown, attempts have been made either to give this a history going back to Hippocrates or instead to deny that it has any history, ancient myths can also be brought into the endometriosis story. Enovid, advertised as a treatment for endometriosis until 1960, used an advertisement showing Andromeda 'freed from her chains' when they moved to marketing it as a contraceptive (Enovid 1962; Junod and Marks 2002: 126). Here, the chains are 'the cyclic mechanism of her reproductive system' and Andromeda is labelled 'unfettered'. In his 2009 doctoral thesis Ronald E. Batt went further, presenting Andromeda instead as 'the embodiment of every young woman with endometriosis', 'waiting to be rescued from torment' (Batt 2009: 9). He also offered the following unattributed lines:

Look to the Sky and Imagine
Beautiful Andromeda chained to her Rock
Harried by the Twin Vultures of
Pain and Infertility
Now you have a Vivid Image
Of every Young Woman
Tormented by Endometriosis.

This image merges Andromeda with Prometheus, tied to a rock while a vulture comes to him each day to consume his liver. As a former sufferer, I would question how helpful this is supposed to be to a woman with endometriosis, but the recognition of the severity of the pain with the suggestion of a cure may be encouraging.



www.muvs.org ©2013 Vienna

Fig 1: Caption: Enovid image of Andromeda supplied by Museum of Contraception and Abortion, Vienna

I want to end by looking at a different aspect of constructing a history, this time not from a famous ancient medical writer, but from the point of view of a biography of an ancient person with a disability: in this case, blindness. Histories of the blind, like other disability histories, can focus on ‘the blind as objects of charity rather than active agents in history’, or on ill-treatment of those with disabilities, but may also construct their stories as ‘a collection of biographies of “extraordinary” individuals, from Homer to Helen Keller’, as the online *Encyclopaedia Britannica* puts it, pointing out that part of the reason for the focus on individuals is the absence of any ‘sustained organized efforts by the blind to act in concert to achieve collective goals’.

One such extraordinary individual is Nydia, the blind flower girl of Pompeii. While she is not a real historical figure, her life in art, opera and song after she was created by Edward Bulwer-Lytton in *The Last Days of Pompeii* (1834) almost makes her one (Hunnings 2011: 181-2; Moormann 2015). Bulwer’s novel was inspired by visits to Naples in 1833, including the sites of Pompeii itself – and the finds from there displayed in Naples Museum – and Florence, where he saw Karl Bruillov’s painting *The Last Day of Pompeii* (1830-3). Drawing on an existing trope of the volcano disaster, and on a popular interest in staged volcanic eruptions from the 1770s onwards, his novel also reflects a growing tendency to focus on the individuals affected by such disasters rather than on the global picture (Daly 2011: 271). Earlier examples of this shift to the individual included stories in which the earthquake saves a noble virgin from rape or a Christian from being attacked by a lion, as in Lincoln Fairfield’s *The Last Night of Pompeii* (1832) (Daly 2011: 268).

As a woman, a slave and a blind person, Nydia is othered in more than one way. In the novel, she is treated badly by her owner Stratonice, then sold on to Glaucus, whom she loves, and then passed on by him to Ione, whom he loves. Her slave status is particularly significant when we consider that the novel was published one year after the abolition of slavery entered British law, and that Bulwer-Lytton was MP for Lincoln at publication. In 1838, he spoke in the House of Commons against the treatment of former slaves in the proposed Negro Apprenticeship Bill, under which those who had been freed were then expected to work for nothing as apprentices (Hunnings 2011: 185-6; Gross 1981). The only way in which Nydia could be further othered would be to make her of a different race; as Ato Quayson has observed, the language of disability and that of racial difference have been very close in the history of colonialism (Quayson 2007: 10).

One long-lasting trope associated with blindness is that it brings inner vision (Quayson 2007: 92-3); we may think here of Tiresias, blinded but given the gift of prophecy, or the idea that Homer was blind. Nydia's blindness does not give her insight or foresight, but it means that she can lead Glaucus and Ione to safety when darkness descends on the city after Vesuvius erupts. However, she then kills herself. Bulwer explicitly included among his inspirations the idea that the darkness after the eruption of Vesuvius would favour someone already blind (Daly 2011: 273; Schiller 1993: 40), and this remains a trope of fiction, as in the 1960s thriller (both a play and a film) 'Wait Until Dark' where darkness gives the trapped blind heroine her chance to turn the tables on the villains. The lead role in a stage production was not given to a blind actress until 2017, in a touring production in the UK; the actress, Karina Jones, said in an interview, 'I've totally got an advantage because I've got a lot of shorthand. I've got a head start because I have real insight into the character' (Finke 2017). As blind heroine, Nydia has her own 'head start' in the darkness; Jessica L. Langworthy mentions a real example of blind girls leading their sighted teachers to safety through the smoke of a fire (Langworthy 1930: 276).

Nydia is very much an idealized nineteenth-century blind person, who in the words of Leanne Hunnings 'sits on the boundary between passivity and activity, objectivity and subjectivity, victimhood and agency' (Hunnings 2011: 182). The visual, in many forms, plays an important role in the book – witnessing a murder, witnessing the crucifixion – but Nydia is by definition always the Viewed, never the Viewer (Hunnings 2011: 199). Her previous owner, Stratonice, bought her at the slave market without realising she was blind but resigned herself to the purchase, especially when she found out that Nydia could sing (although her songs are always sad ones). In her ability to perform, Nydia reflects the nineteenth-century attitude that it is better to be blind than deaf, as described in this 1846 article in the *Westminster Review*:

One of the most striking differences between the blind and the deaf is the tendency shown by the blind, in all ages, to poetry and poetical composition,-- a taste which the deaf have never exhibited. The great command of language acquired by the blind, the excellence of their ear, and the absence of excitement and distraction from the sensations of sight, will go far to account for this peculiarity ... The deaf, on the contrary, have no command of language, no ear, and a sad deficiency of ideas and emotions, while their possession of that admirable organ, the eye, tends to

overpower their inner feelings, and to throw them upon visual sensations for a great part of their enjoyment (cited in Sharman 1999).

Throughout, she is presented as someone to be pitied but, as Stratonice found, there is an economic advantage to pity because people will pay more for the flowers she picks than they will to any other flower girl.

‘I am often ailing,’ said the blind girl, touchingly; ‘and as I grow up I grieve more that I am blind. But now to the flowers!’ So saying, she made a slight reverence with her head, and passing into the viridarium, busied herself with watering the flowers. ‘Poor Nydia,’ thought Glaucus, gazing on her; ‘thine is a hard doom!’ (Bulwer-Lytton 1834: 42).

The switch to the upbeat ‘Now to the flowers!’ may reflect a nineteenth-century view that the blind were ‘the most habitually cheerful of humankind’ (Holmes 2004: 105).

I have found it useful to compare Nydia with the characterisation of another blind flower girl in the 1868 novel *Elsie, the Blind Flower Girl; A story of the Sheltering Arms*. This was one of several improving novels written to support an Episcopal foundation, The Sheltering Arms, in New York City, which from 1864 took in young children, including orphans, and those with disabilities (Higginbotham, n.d.). There is no evidence of direct influence of the Nydia story on this one, and the many similarities are likely simply to echo prevailing notions. We are told that God gave Elsie ‘cheerfulness of spirit ... seemingly in compensation for her loss’ (Anon. 1868: 57) and that ‘We only know that the blind from birth seem gifted with a particular serenity of spirit and cheerful sense of enjoyment’ (Anon. 1868: 61). When we first meet Elsie, it is when Sister Phebe has gone out to buy some flowers to decorate the church for Easter; before she can enter the shop on Broadway ‘an engaging-looking child, between eleven and twelve years of age, carrying in her hand a basket of small, tastefully arranged bouquets’ (Anon. 1868: 11) gains her attention. She has ‘a strange vagueness of expression’ in her eyes and uses a small dog, Gyp, as her guide. She is currently looked after by Margaret, but Sister Phebe is sure that the Sheltering Arms will be better for her. Blind from birth, like Nydia, she too not only has a way with flowers but can also sing beautifully; ‘a melody fresh and clear as a young bird’s’ (Anon. 1868: 21). An enhanced sense of touch helps her to learn to knit (Anon. 1868: 58-9). The modern reader may be desperate for a fire from which Elsie can save the nuns, but the novel instead goes through the stages of the liturgical and secular year, outlining how those at the Sheltering Arms occupy their time. Like Nydia, Elsie dies at the end of her story, but of consumption, and not – of course – until she has been confirmed.

Nobody has to my knowledge suggested that *Elsie, the Blind Flower Girl* has any literary merit, but the immediate reception of Nydia was highly positive. The reviewer of *Last Days* for a women’s magazine, *The Court Magazine and Belle assemblée* (November 1834, 217), wrote that she ‘is a beautiful conception, and quite original. She wins our love by her artlessness and her generosity’. For *The Athenaeum*’s reviewer, she was ‘the sweet blind girl’, ‘beautifully conceived’ (362, Sept 1834, 707). In an appreciation of Bulwer’s novels in *The Quarterly Review* (134, issue 268, April 1873: 487-515) it was observed that ‘Schoolboys read it with avidity, and German scholars quote it’ (496). As for Nydia, she ‘stands out in

bold relief' and 'her blindness gives her an individuality of her own', even if sometimes 'the sentiment is too refined, too modern' (497).

Nydia's most famous afterlife is in a statue by American sculptor Randolph Rogers. The original model is from 1855, the eve of the Civil War, and there are both near-life-size 55-inch versions and smaller, 36-inch ones (Harris 2007: 197; Kovacs 2013: 37-8). It was a very popular sculpture; Rogers made around 100 copies, and a block on lower Fifth Avenue apparently had seven of the 55-inch statues (Kovacs 2013: 38-9). The rendition of the story 'as' ancient sculpture may confuse viewers who assume that there is a classical origin for it. Nydia's eyes are closed and her hand is to her ear: she is listening, but the posture also emphasises that she can't see. She has a cane to help her move about. It is left open here whether she is separated from Glaucus and Ione or is leading them to safety; her isolation as a figure may suggest the former. The broken piece of a Corinthian column stands in for the destruction of Pompeii.

Elsie dies young, but Nydia's more mature sexuality is clear from her right breast escaping from her dress, and Jon Seydl has suggested that we should also see her clothing in terms of what he calls 'the labial folds of the clinging drapery' (Seydl 2011: 219). Displayed at the 1876 Centennial Exhibition in Philadelphia alongside Rogers' *Ruth Gleaning* (1853), according to one critic 'The Ruth ... did not attract a tithe of the attention that the Nydia did, and did not awaken a tithe of the admiration' (Lessing 2011: 44 citing Clark 1978: 75). In 1865, however, when the rich plantation owner Adelia Acklen was selecting sculptures for her home, she took Rogers' Ruth rather than his Nydia; Lauren Lessing suggest that perhaps this was because Nydia is presented as having too much of an active role here, rather than offering 'a pleasing, passive, feminine ideal' that fitted with cultural ideas of what a woman should be like and which would thus help Acklen's own reputation (Lessing 2011: 4).

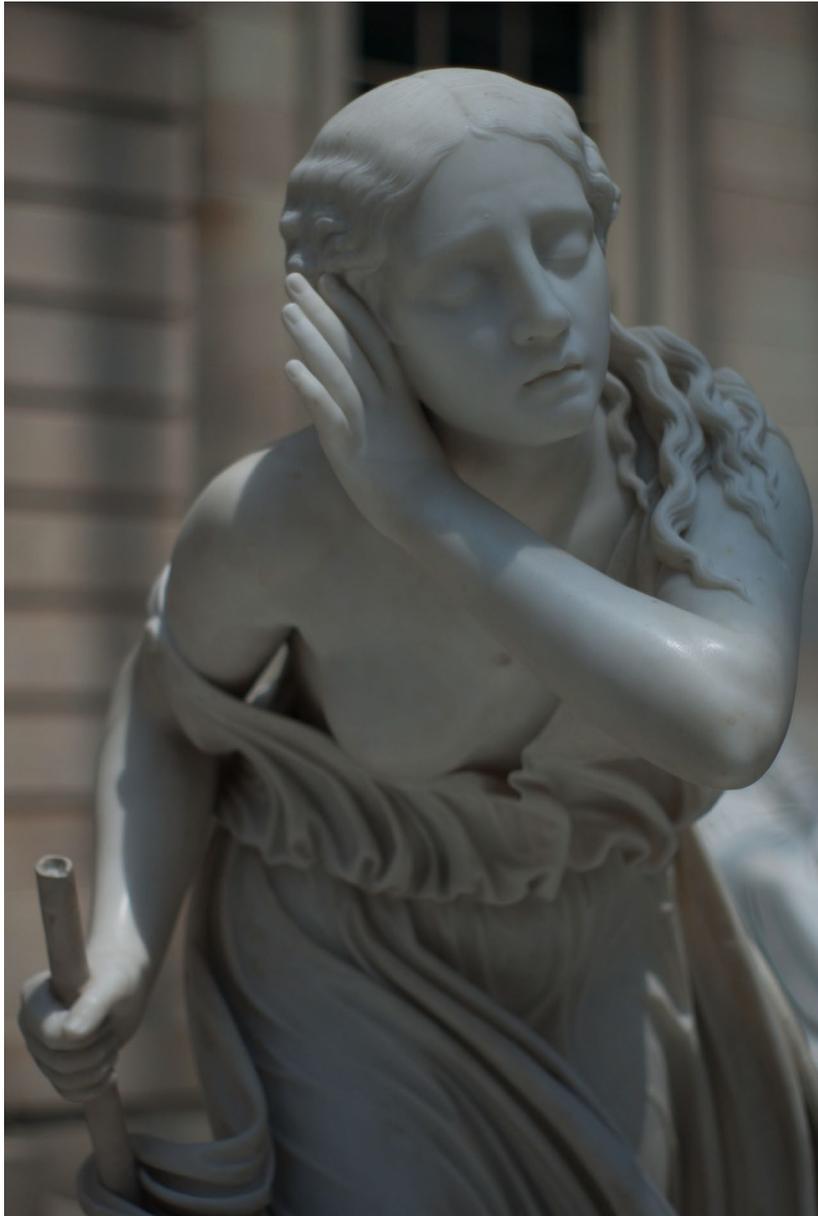


Fig 2: Caption: Randolph Rogers, *Nydia*. Image from Wikimedia commons, cphoffman42 [CC BY-SA (<https://creativecommons.org/licenses/by-sa/2.0>)]

It is clear even from the websites of the various museums which house a copy of this statue that it can be read in different ways. The Chicago Art Institute website states that ‘Randolph Rogers captured Nydia as she gropes her way through the burning city’ (Chicago Art Institute, n.d.). That ‘gropes her way’, implying blindness as disability, contrasts strongly with Bulwer-Lytton’s text in which she uses her staff ‘with great dexterity’ (Bulwer-Lytton 1834: 44) and also misses the whole point of the story: in the destruction of Pompeii, she is no longer at a disadvantage – the reverse, in fact, as her sense of hearing is superior to that of her companions. Bulwer-Lytton described her ‘incredible dexterity’ as she moved through the streets, ‘so blessed now was that accustomed darkness, so afflicting in ordinary life’ (Bulwer-Lytton 1834: 404). If we are supposed to imagine her separated from Glaucus and Ione, and listening for their voices, then her isolation is not a sign of

her weakness, as she remains the one on whom they must rely for their safety. This point is made in the online description from another American university holding one of the sculptures, the University of Michigan: although the city is darkened by the ash blocking out the sun, 'Since Nydia is blind, she is still able to navigate the streets' (University of Michigan Museum of Art 2018).

Not everyone loved Nydia, especially in the later twentieth century. In 1974, as Leanne Hunnings noted, 'Kenneth Jernigan of The National Federation of the Blind ... railed against this portrayal of the sightless Nydia as a literary character. He argues that she contributes to the perpetuation of the myth of the blind as "dehumanized", and the manipulation of blindness for an aesthetic and commercialized aim' (Hunnings 2011: 201). Jernigan, a blind activist, gave addresses to the 1973 and 1974 Annual Conventions of the US National Federation of the Blind on the themes of history and literature respectively, attacking 'the image of blindness as dehumanization, a kind of banishment from the world of normal life and relationships'. He held up for particular attention 'the saccharine sweet that has robbed us of humanity and made the legend and hurt our cause' (Jernigan 1974). He referred to a range of characters including '... Caleb, the 'little blind seer' of James Ludlow's awful novel, 'Deborah'. There is Bertha, Dickens' ineffably sweet and noble blind heroine of 'The Cricket on the Hearth', who comes off almost as an imbecile.' And there he named 'the self-sacrificing Nydia, in 'The Last Days of Pompeii'" calling such characters 'sweetness without light, and literature without enlightenment'. Blindness in literature, for Jernigan, is 'dehumanization, a kind of banishment from the world of normal life and relationships. Neither Dickens' blind Bertha, nor Bulwer-Lytton's Nydia, when they find themselves in love, have the slightest idea that anybody could ever love them back - nor does the reader.' It is true that Nydia, despite her depth of emotion, is unable to believe in herself as the object of love. A more recent analysis by Martha Stoddard Holmes suggests instead that Nydia is 'too feeling, too expressive and potentially too sexual for matrimony' (Holmes 2004: 39).

Leanne Hunnings noted that, from the Victorian period onwards, some women were turning Nydia's passivity into their own action. Nydia's song 'The Wind and the Beam loved the Rose' (Bulwer-Lytton 1834: 159) formed the basis of various musical compositions to be 'performed by young women in drawing-rooms', while 'classroom plays for educating the young' were also created from Bulwer-Lytton's novel (Hunnings 2011: 181-2). An even more active Nydia appears in an exercise designed by museum educator Anne Kindseth for The Art Institute of Chicago (Kindseth 2006). Describing the sculpture in a short piece for a journal aimed at teachers involved with art education, Kindseth produces an active Nydia, who searches for her lost companions: 'Her body strains forward and her hand cups her ear as she desperately, and daringly, tries to listen for her lost friends'. Kindseth set an activity for those interacting with the sculpture:

Activity

How do you think this woman feels? What makes you think that? Pose your body like Nydia. How do you feel standing this way? Think of a story that you would like to tell about an event in your life. Become a living sculpture by posing your body to convey the emotion of your story. Be sure to include props to help tell your story.

Conclusion

In both formal histories and in imaginative engagement with the classics, the stories we tell are forms of classical reception. Disability histories use the classical world in a number of ways, depending to some extent on whether they are written by those with the disability or by medical professionals. Greek and Roman history may feature as one source of stories of inspirational individuals and, although the acknowledged 'great names' of the canon will often feature as 'discoverers', there is often little concern with the details of ancient vocabulary. Here, as elsewhere in histories of medicine and the body, Hippocrates is often seen as 'right' even if the medicine of the past did not realise this. The emphasis tends to be placed on continuity, giving the reassurance that what is being experienced now was also experienced then and offering a 'special connection' to the past, although it may also be suggested that the outcomes are far better today. The sense of continuity can also extend to myth, with characters from Greek and Roman myth being used to represent conditions or those who have them. In the case of Nydia, an imagined figure from the ancient world can be someone to pity, or to admire, with the enthusiasm for her literary and artistic representations varying over time. While mythical or fictional stories may offer images of disability which are unhelpful to those who live with that condition, they have the potential to be used to foreground those with disability or to allow imaginative identification with a condition which the viewer or user does not share.