Within the academic community there are a number of common and widespread prejudices about the nature of *iatrosophia*. *Iatrosophia* are usually regarded as vernacular compilations of medical texts lacking structure or intellectual value and being of a purely practical scope. In addition, because they are often transmitted in only one manuscript, *iatrosophia* are viewed as ‘dead ends’ of the transmission. Even though these views capture some characteristics of the majority of known *iatrosophia*, they hardly suffice in defining a genre. For instance, a number of texts fit the description but are not called *iatrosophia*. Moreover, there are texts called *iatrosophia* that do not fit this description.

Because of these very basic problems in understanding the genre, it is necessary to take a look at the evidence to determine what *iatrosophia* actually are before examining the reception of Galen in such works.\(^1\) With such a large and amorphous group, it is difficult to select representative examples. In the end, two texts were chosen because they present different ends of the spectrum: (a) an organised text of relatively high quality, and (b) a disorganised text of lower quality. Both of these texts have been labelled an *iatrosophion* by the scribes who copied the volumes, so that we can be sure that we are indeed working with the correct material. Moreover, these primary sources have been digitised, so anyone interested can conduct further research and form their own opinions. This will then be followed by a brief discussion of three

\(^1\) Only a few articles have been published on the nature of *iatrosophia*. Amongst these, the most influential are the works of Ieraci Bio, who connects *iatrosophia* to hospitals. See in particular Ieraci Bio (1982: 33–43), where the text designated sample (a) in this chapter is discussed. This characterisation was then explored further by, for instance, Oberhelman (2015: 133–46), who identifies *iatrosophia* as recipe collections, and Congourdeau (2002: 64), who equally describes *iatrosophia* as recipe collections mainly used in hospitals. Moreover, influential publications on the nature of *iatrosophia* have included Touwaide (2007: 147–74), who likens *iatrosophia* to therapeutic manuals; Garzya (2003: 165–72), who provides the most in-depth analysis of content, structure, and the problems posed in editing these texts; and Tselikas (1995: 57–70). Marchetti (2011: 121–6) offers an interesting twist, namely that *iatrosophia* became increasingly interdisciplinary over time, including incorporating astrology. The most detailed information on medical texts and manuscripts associated with Byzantine hospitals can be found in Bennett (2003) and its published form, Bennett (2017).
other texts: sample (c), which has no title as such but has been described as an *iatrosophion* by a person who later owned it; sample (d), a post-Byzantine text that resembles an *iatrosophion* but is not actually called *iatrosophion*; and sample (e), an ambiguous text. Again, here the focus is on edited, or at least catalogued material, to ensure transparency. In a final step, the overarching theme of the reception of Galen in *iatrosophia* will be discussed.

Sample (a) is transmitted in Plut. 75.19, a fourteenth-century manuscript held by the Biblioteca Medicea Laurenziana in Florence. As is often the case, it opens with annotations and a few blank pages. The beginning of the main text, on fol. 5r, is preceded by a large, red scribal heading, the title, that reads, ‘An *iatrosophion* with [the help of] the Holy God that contains the definitions and methods of various philosophers and the natural faculties and the therapies of various diseases. And then also [excerpts] from the book on therapy of Cyranides. In these [chapters] also about foodstuff in alphabetical order’.

There follows the heading ‘the preface’ along with some rather theoretical and abstract discussion on the nature of the medical art. All this gives the impression that is indeed the title of the work, or of the entire codex. Moreover, a later owner certainly thought it was the title of the volume, as he added the following lines to the flyleaf of the codex: ‘τοῦτο τὸ ἰατροσόφιον ἐνε τοῦ πάπα Μανουὴλ τοῦ Μαρμαρᾶ’ (this *iatrosophion* belongs to Father Manuel of Marmara). Also, the contents mentioned in the title of the *iatrosophion* do indeed appear in the codex, if in a slightly different order.

How would the rest of the book have been perceived by a medieval user? Roughly speaking, the volume contains some general information on abstract topics, such as the nature of the healthy body, on fol. 6r, and the optimal

---

2 This codex has been digitised and can be accessed via the homepage of the Biblioteca Medicea Laurenziana, at http://teca.bmlonline.it/ImageViewer/servlet/ImageViewer?idr=TECA000109274&keyworks=plut.75.19#page/15/mode/1up (accessed 29 October 2017).

3 The Greek original reads, ‘ἰατροσόφιον σὺν θεῷ ἁγίῳ περιέχων διαφόρων φιλοσόφων δρώς τε καὶ μεθόδους δυνάμεις τε φύσεων καὶ θεραπείας διαφόρων νοσημάτων. Ἐτε καὶ τῶν ἐκ τῆς τοῦ Κοιράνου βιβλίου ἀποθεραπευτικῶν. Ἐν οἷς καὶ περὶ τροφῶν κατὰ ἀλφάβητον’.

4 The most convenient way to check the content is Bandini (1770: 166–8). This catalogue has been digitised and can be found in the online catalogue of the Biblioteca Medicea Laurenziana. A number of articles discuss specific aspects of these excerpts as well. The Pinakes database of the IRHT Paris provides a bibliography that is being progressively updated. See http://pinakes.irht.cnrs.fr/ (accessed 29 October 2017). In addition, the bibliography maintained by the Biblioteca Medicea Laurenziana can be accessed via the library catalogue. See for instance Ieraci Bio (2003: 28ff). The most comprehensive overview, however, is provided in Bennett (2017: 81–106).

5 This should actually be the research question for the present chapter. The question of how the content of this book relates to the broader context of medical book production is discussed by Bennett (2017: 81–106). The question of its (mainly ancient) sources has been
constitution of the body, on fol. 7v. This thematic section even includes diagrams on fol. 11r. There are more diagrams throughout the codex. After a few more chapters on similar topics, an ornament on fol. 12r marks the beginning of a new section on urine diagnosis. At around fol. 26r, the focus seems to shift subtly to blood and the four humours. At fol. 27r, the codex begins to discuss the nature of the cosmos and man, and at fol. 28r embryology. Following a chapter on life cycles, ornaments mark the beginning of another section, this time on foodstuff, in alphabetical order. Sometimes, the start of a new letter is marked by vermilion ornaments, as for instance on fol. 39v. On fol. 42r, the text breaks off at the beginning of a chapter on ginger, and the rest of the fol. remains blank. After this lacuna, the scribe resumes with another letter. The text comes to an end on fol. 82v. After some ornaments, another text begins, this time on therapeutics. The next obvious section can be found on fol. 149r, where, after some vermilion ornaments, an anonymous text on urine starts, followed by another heading: ‘therapeutics with the help of the Holy God, selected from various books’. On fol. 158r, an alphabetical lexicon of medicinal plants begins. This text ends on fol. 187v with a bit of page being left blank. An astrological text starts on fol. 168r.

As far as names are concerned, apart from the title referencing Cyranides and unspecified philosophers, the first obvious mention of a source can be found on fol. 8v: ‘On the Nature of Man by Meletios the Monk’. On fol. 10r, the heading ‘by Democritos’ has been written in the margin by the first hand. The big heading on fol. 12r indicates the start of a new text on urine by Galen. On fol. 30, an abbreviated form of the name Hippocrates can be found in the margin, again written by the first hand. A similar abbreviation stands in the margin of fol. 39r. On fol. 82v, a therapeutic text is attributed to a certain Theophilos, who is said to have excerpted it from various authors, and on fol. 92v, Aetios is mentioned. Amongst some marginal comments, ‘of Galen’ can be found on fol. 96r. Occasionally, the Hippocratic Aphorisms are quoted, in the original dialect, for instance, Aph. iv.72 on fol. 150v, but just under the title, without an attribution to an author. These would be the most obvious names in the codex, but a closer look reveals more.

Altogether, one could argue that the manuscript exhibits only a few characteristics of the common preconception of an iatrosophion. Admittedly, it is largely a compilation, but it otherwise devotes about the same amount of space to theory as to practice. Most of the content is written in standard, classical or classicising Greek. To describe the text in one sentence, it is a compilation addressed in several articles, some of which are mentioned above. A full list can be found on the dynamically growing IRHT Pinakes bibliography and the Laurenziana online catalogue.
of various ancient and medieval works that has a fairly well-defined thematic structure. This would have been obvious to the medieval user as well. What is most significant here, however, is that the manuscript does not differ much from most other medical codices. Had it not been for the title, one would hardly call it an *iatrosophion*. It would probably be catalogued as yet another medical manuscript that primarily, but not exclusively, contains compilations.⁶

The second *iatrosophion* to be discussed, sample (b), is of an entirely different nature.⁷ It is a rather disorganised compilation of brief paragraphs, most of which would be about two lines in length in the layout of this volume. Moreover, it is transmitted in more than one manuscript, six to be precise, and it does not comprise an entire volume in any of the witnesses. Rather, it is a separate text, under the heading *iatrosophion*, amongst other texts in a codex.⁸ That said, there is a slight anomaly when it comes to the unity of text. The paragraphs of this *iatrosophion* are numbered, but in all except one witness, the numbering does not start with ‘1’ at the beginning of the *iatrosophion*.⁹ Moreover, the manuscripts do not always present the same text. Even though it is clear that the manuscripts all go back to a single master copy, the scribes made significant changes to the text in the process of copying.¹⁰

Whereas sample (a) covers a broad range of topics, including medical theory, sample (b) has a practical scope, as it mainly focuses on a simplified form of medical therapy. Of the many recipes contained in this collection, only a few are heavily rephrased quotations from famous medical authors of classical and late antiquity, such as Galen, Dioscorides, and Paul of Aegina.¹¹ It is doubtful whether the author of the *iatrosophion* had direct access to manuscripts of these specific works given the low number of parallels and the tendency to rephrase points to an intermediary source or even an oral tradition.

⁶ It is not uncommon for manuscripts to have a thematic structure; just one example would be Wellcome MS.MSL.14. A substantial proportion of this manuscript is taken up by therapy, partly in the vernacular, and these are the pages of the book that were used most. Yet, it also contains theoretical content. Sample (a) and this manuscript actually have a very similar structure. For details on MS.MSL.14, see the description in Bouras-Vallianatos (2015: 289ff); and Nutton and Zipser (2010: 259–70). Another such sample of a manuscript with a thematic structure would be the Par. Suppl. gr. 1297 of the early tenth century.


⁸ One codex omits the title altogether, see Alexopoulou (1998: 38ff).


¹⁰ For the Barb. gr. 344, see Alexopoulou (1998: 8ff); for the Coisl. gr. 335, see Alexopoulou (1998: 6ff). That the text is transmitted in versions is evident from almost every page of the edition.

It would have been difficult for readers to find the material they needed, as this would have required going through a long and disordered table of contents and then trying to find the corresponding paragraph in the main text. The same topic may be covered in more than one paragraph and not always in the same part of the text.\textsuperscript{12} Moreover, one could never be sure that the table of contents is accurate. Chapter and paragraph numbering in Byzantine medical texts can be notoriously unreliable, as subheadings can be misinterpreted as chapter headings, new chapters or paragraphs could have been inserted by scribes, or, last but not least, scribes could simply forget to copy a heading. All this could lead to inaccurate numbering. These phenomena are common and were no doubt known to medieval readers.

That this \textit{iatrosophion} does not have a coherent structure is indeed significant, as there was a common and easy-to-understand system for arranging content in therapeutic manuals, the so-called head-to-foot order, \textit{a capite ad calcem},\textsuperscript{13} and this would also be the system an educated medieval or early modern user of these manuscripts would have expected to find. That the compiler of the collection did not follow this common system leaves one to wonder about his motives and the intended audience. Could this have been a text made solely for the private use of a specific individual that ended up circulating in the mainstream by mistake? Alternatively, would the reader have been expected to read the entire text before making a decision on further medical treatment? Was the author perhaps not familiar with the head-to-foot system? This last possibility would be somewhat surprising, but cannot be excluded.

The next aspect requiring assessment is how names are handled. As Alexopoulou rightly points out, the name of the \textit{iatrosophion}'s compiler remains unknown.\textsuperscript{14} The title describes the text as either the ‘\textit{iatrosophion} of Meletios’ or the ‘\textit{iatrosophion} of Galen, Hippocrates and Meletios’. Here, the Greek is ambiguous. In the first instance, the title could either be interpreted as ‘\textit{iatrosophion} written by Meletios’ or ‘\textit{iatrosophion} taken from Meletios’. The work does not, however, bear any resemblance to the other transmitted

\begin{itemize}
\item \textsuperscript{12} On groups of paragraphs covering the same topic, take for example diseases of the ear (Alexopoulou, 1998: 66, 68, 70). There are hints of a partial head-to-foot order, but overall it is fair to say that the \textit{iatrosophion} does not follow a set order.
\item \textsuperscript{13} Many therapeutic manuals follow the \textit{a capite ad calcem} system, that is a text starts with the diseases of the head, such as hair loss, then moves on to migraines, tonsillitis, cough and so on, until reaching the feet. This system might sound unusual today, but it facilitated differential diagnosis if all disorders affecting a specific part of the body were grouped together.
\item \textsuperscript{14} See Alexopoulou (1998: 13).
\end{itemize}
works of Meletios. In the second instance, even if one assumes that it might be referring to another, otherwise unknown Meletios, the *iatrosophion* most certainly does not bear any resemblance to Galen or the Hippocratic corpus either, as far as style and arrangement are concerned. Moreover, even though it is not known precisely when Meletios lived, he clearly post-dates Galen, and most definitely anybody involved in the composition of the Hippocratic corpus, so that the text could not have been compiled by these two authors in collaboration.

The combination of Galen, Hippocrates, and Meletios sounds rather unusual. Whereas Galen and Hippocrates are today regarded as the most important medical authorities of antiquity, Meletios is only known to a handful of specialists. His works, as far as they are known, do not contain groundbreaking, new medical theory. Rather, they reflect earlier ideas with a bit of Christian ideology added to the mix. Overall, they do not seem to be that spectacular today. As this *iatrosophion* shows, however, the perception must have been different at the time, or at least for this particular audience. Meletios must have been regarded as a valid and reliable source. This is supported by the relatively large number of manuscripts transmitting his *On the Constitution of Man*. Perhaps it was his eloquent discussion of earlier sources that made his work particularly appealing to a medieval audience. Another important feature of this *iatrosophion* is that it was written in a vernacular Greek idiom. It is not quite ‘as vernacular’ as sample (d), but it certainly shows strong post-classical features.

Sample (c) is a medical compendium without a title as such. Many scholars might dispute whether it should be considered or understood as one coherent text or rather as a series of texts. The only reason it is discussed here is because a later owner called it an *iatrosophion*, on fols 37v and 205v. The codex

---

16 The most recent contribution to the complex discussions about Meletios’ date with related bibliography can be found in Renehan (1984: 159). The main point for the chapter here is that he post-dates the mid-seventh century, whereas Galen lived in the second century.
17 At present, the ever-growing IRHT Pinakes database contains sixty-seven manuscript witnesses of this text; see http://pinakes.irht.cnrs.fr/notices/oeuvre/3275/ (accessed 29 October 2017). In the context of classical and medieval medical texts, this is a substantial number.
18 The text has been edited twice, first in Cramer (1836) and in Migne (1862). We do not know, to which of Meletios’ works the *iatrosophion* refers, and whether this attribution is even accurate. His book on the constitution of man consists of some introductory material on physiology and embryology; next, the nature of specific body parts is discussed.
19 A detailed analysis can be found in Alexopoulou (1998: 16ff).
in question, Wellcome MS.MSL.60, has recently been catalogued by Petros Bouras-Vallianatos, who provides a detailed breakdown of the content and other information.20

To summarise sample (c) very briefly, the codex opens with rather theoretical texts, the Hippocratic Aphorisms and Prognostic, before moving on to pharmacy, theoretical texts on the nature of man and the cosmos, the four elements, and embryology. There follows a dictionary and some text on drug substitutes. The next thematic section consists of excerpts discussing sweat, respiration, and digestion, which is then followed by more or less miscellaneous content on measurements, precious stones, prognosis, the calendar, the different ages of persons, more on the nature of the cosmos, some therapy, foodstuff, and, finally, a number of texts on related topics, namely urine and excrements. This is followed by another block of texts on the pulse.

The above is just a paraphrase of how the manuscript would have looked to a reader. Overall, the volume starts with archaic and theoretical texts, before moving on to fairly high-quality content on pharmacology, some more basic theory, and then larger thematic blocks on urine and pulse, interspersed with other content, which is well in line with what one usually finds in Byzantine medical manuscripts. At the time, uroscopy and pulse analysis were important diagnostic methods. To a reader, the manuscript looks fairly chaotic at first sight. It has no title or description of its contents, and the sources are a mixed bag. Some are classical, and some are attributed to big names, including Hippocrates and Galen, on fols 1r and 56r, respectively. On the other hand, the manuscript also contains at least one excerpt that claims to be a Greek translation of Avicenna, on fol. 58r, and some clearly Byzantine content, for instance Nicholas Myrepsos. As far as quality is concerned, the manuscript preserves everything, from excellent to rather basic or average.

One feature of sample (c) is that it contains several texts on the same topic, a choice that might seem illogical to some. If one were to compile a medical handbook, why include several treatises on urine and excrements? Why not choose the most suitable of them and devote the remaining space to something else? It seems that the scribe, or whoever devised the structure of the book, followed some basic preconceptions of what content a medical book should contain, namely Hippocratic works and the basics, such as the nature of man and pharmacology, and then selected a distinctive thematic focus for the rest of the book.

Sample (d) is by all accounts post-Byzantine, dating to the early twentieth century. It was composed in the 1930s in a village in Crete, but apart from a few obviously modern linguistic characteristics, it very much looks like an iatrosophion. It is an unordered list of medical recipes and therapeutic instructions written in a vernacular dialect. The style and language are consistent throughout. The manuscript does not appear to be a compilation at all, but a translation and paraphrasing of simplified Galenic thought, as commonly found in iatrosophia. By all accounts, one could easily label this work an iatrosophion, as it meets all the common preconceptions of iatrosophia. The main catch, however, is its title: ‘ἰατρικὸς ὁδηγὸς’ (medical guide). Therefore, the editor of the text, Patricia Clark, rightly discusses it in the context of the iatrosophic tradition, rather than an iatrosophion in its own right.

There are more examples of texts or codices that one could easily label as iatrosophia, as they bear the commonly associated characteristics, but have a different title or do not have a title at all. Sample (e) is one such example. It is a rather early therapeutic manual that has been transmitted in two main versions. Just one of the versions has the title iatrosophion, but it is not the version one would expect.

The first version is written in a simplified form of classical Greek, the standard in medieval Greek writings. It consists of a preface that contains basic information on physiology and then a long list of paragraphs on general therapy. The final paragraphs differ in style and content and are most likely later additions. This version has the title ‘iatrosophion of the most wise Galen’. In a somewhat stilted style, the text then announces that it is an epitome of the instruction of Galen, who wrote on the affected parts. In other words, it claims to be an epitome of Galen’s On Affected Parts. In actual fact, this is hardly a correct characterisation. Any similarities between the two works would be extremely superficial. The second version is a vernacular translation of the first version with an added commentary. Here, the word iatrosophion is no longer extant, and the text is described as an explanation and commentary of Galen. Apart from a mention of Hippocrates in the preface, neither version contains any source attribution.

The chapters of the first version are, apart from the final chapters of course, clearly written by the same person. The second version, apart from perhaps

---

21 Clark (2011).  
22 Clark (2011: 1).  
24 The designation iatrosophion can also be found at the beginning of the pinax, that is the table of contents, of this version; see Zipser (2009: 54).  
25 The headings and prefaces can be found in Zipser (2009: 70, 173).
a few dubious passages, has been translated and commented on by the same person. So we can clearly see a great consistency when it comes to philological work on a very substantial scale. As for the content, the first version is lucid and to the point and moderately disorganised. There are some blocks of text that form part of a head-to-foot order, but not throughout the text. The second version follows the first, just adding a commentary. The explanations are very basic, and it certainly feels as if it was aimed at the craft end of medicine.

So overall, the analysis here has revealed a number of rather surprising characteristics of *iatrosophia*. Perhaps the most striking is that in sample (e), the designation *iatrosophion* was replaced with the more learned ‘translation and commentary’, even though in content, style, and scope, the revised version of the text moved very much towards a simplified, practice-oriented vernacular incarnation. Equally surprising is that an *iatrosophion* would contain several texts on the same topic, as in sample (c), which would seem like a waste of space, time, and, therefore to some, money. If one needed a handbook for practical purposes, as opposed to research, why not include as much diverse content as possible?

Another, important finding is that a manuscript may not have a title written on the first page but could still have been regarded as an *iatrosophion* by an owner, as in the case of sample (c). It is certainly worth noting that even though this codex was here treated as an *iatrosophion*, such an approach may be inaccurate at best, as the perception of what an *iatrosophion* actually constitutes may not have been the same for its owners, intellectuals, and scribes. Most certainly, one cannot conclude that a text or codex lacking a title was not intended to be or perceived as an *iatrosophion*. It is quite possible that it would have been understood to be an *iatrosophion* without explicitly stating so, or alternatively, that a title could have been written on a book cover that was then removed or that the title was lost in some other way.

The most important point that has come to light, however, is that some *iatrosophia* could bend the rules of unity of text and authorship that had been firmly ingrained in the minds of scholars since classical antiquity, by giving an entire volume a title, along with the texts it contains, such as in sample (a), or attributing an entire *iatrosophion* to three different authors without indicating the source in the respective excerpted paragraphs, as in sample (b). This

---

26 For a list of titles, see Zipser (2009: 330ff).
27 See, for instance, Pérez Martín (2007: 1–18) for analysis of a fragmentary palimpsest dating to around the early thirteenth century. From the description, the text could very well have been an *iatrosophion*, but the transmitted title is *Iatērion* (2007: 8), and the beginning of the first section is missing.
last finding leads to the main issue addressed here – the reception of Galen in *iatrosophia*. It might be best to subdivide it into three questions: Has any genuine Galenic content been transmitted in *iatrosophia*? Have these excerpts been labelled accordingly? What was Galen perceived to be by the compilers and readers of *iatrosophia*?

The answer to the first question is definitely yes, as this occurs in samples (a), (b), and (c). The sources for these quotations are rather diverse, including an introductory text, diagnostics, and therapy. It is therefore not correct to assume that *iatrosophia* solely reflect purely practical elements of Galenic works, such as recipes. To answer the second question, yes, in some cases, these excerpts were labelled individually, but in many others, they were not. They could also be attributed summarily in the title, as in sample (c). The third question is the most difficult to address.

The first and foremost conclusion that can be drawn is that Galen was indeed regarded as a valuable source for *iatrosophia*. This is evident by Galenic content being repeated and sometimes adapted in *iatrosophia*, and also by his name being referenced explicitly in some instances. Content attributed to Galen was not always genuine, however, as evident from sample (e). Even though the text is labelled ‘*iatrosophion* of Galen’ or ‘epitome of the instruction of Galen’, in the title and first lines of the original version, and of his work *On Affected Parts* in particular – one could only argue a rather general similarity, with some degrees of separation. It may be doubted whether the compiler even had access to this Galenic work.

Apart from focusing on any use or mentions of Galen, it is necessary to look at the other non-Galenic sources of *iatrosophia*. Who would have been included or referenced in an *iatrosophion*, and what was their standing? This necessarily concerns the entire spectrum, chronologically and in terms of quality. *Iatrosophia* could contain anything, ranging from idiosyncratic recipes one would normally expect to find scribbled on the flyleaf of a manuscript to highly sophisticated Hippocratic or Galenic medicine, whereas Galenic content would be more predominant amongst the two. They could equally contain late antique or Byzantine authors, some of which may not be transmitted elsewhere, as is for instance evident from sample (a).

---

28 For instance, fols 5r–12r contain extracts from Galen; see Boudon (2000) for details.

29 See Alexopoulou (1998: 247). The author seems to have excerpted the pseudo-Galenic work *On Procurable Remedies* directly, or at least a good intermediate source.

30 This manuscript contains a number of texts that have been transmitted under Galen’s name, but which are probably not genuine. However, to a medieval reader these texts would not have been clearly recognisable as forgeries; see Bouras-Vallianatos (2015: 292ff.) for details.
Galen appears to be just one commonly used author amongst others, leaving one to wonder how the compilers came up with their respective selection. Was it solely influenced by the availability of manuscripts – did the compilers simply use anything reasonable they could access – or were there other considerations? For instance, did a specific author perhaps have particular influence at the place where a certain *iatrosophion* was compiled?

To conclude, at the end of our analysis, we are left with a number of unanswered questions, along with some rather puzzling observations regarding the nature of *iatrosophia* as such. Clearly, one can only take *iatrosophia* into account that are labelled as such, either by a scribe or an owner. Within this group, however, there remain open questions as to how the genre should be defined or whether it is indeed fair to apply the term genre at all.31 In the end, one is left wondering whether *iatrosophion* could simply have meant ‘medical codex’ to some and ‘collection of excerpts and entire texts from various medical authors’ to others. Many *iatrosophia* have at least the potential for practical application, which appears to have been a defining feature of this genre. One would hardly call the works of Oribasios *iatrosophia*, even though they mainly consist of excerpts, too, because they would be less tailored for use as a general practice manual.

What has become clearer, however, is the reception of Galen in *iatrosophia*. Evidently, Galen was still regarded as an authority, but he was far from being the sole source of *iatrosophia*. Moreover, Galen’s works could be amalgamated into these new works. The scope of creating an *iatrosophion* was not to create a philologically accurate collection of excerpts with a consistent referencing system. Rather, these excerpts were combined to create a new collection.

**Acknowledgements**

I would like to start with some acknowledgements. First and foremost I am grateful to the Wellcome Trust who funded me through a Wellcome Trust University Award (048921). Some of the research that was included in this chapter was carried out during a previous Wellcome funded Project Grant (039752). Next, I extend my thanks to everybody who published primary or secondary sources, or digitised manuscripts open access, as this a tremendous help, not just for me, but for all those who are new to the topic and would like

---

31 I owe this final point, on whether it is accurate to call *iatrosophia* a genre, to Peregrine Horden.
to have at the material themselves. I am grateful to Peregrine Horden for his feedback on a draft of this chapter.

**Bibliography**

**Texts Used**


**References**


