SOURCEBOOK FOR ANCIENT MESOPOTAMIAN MEDICINE
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Sourcebook for Ancient Mesopotamian Medicine
Volume Editor: Marten Stol
SOURCEBOOK FOR ANCIENT MESOPOTAMIAN MEDICINE

by JoAnn Scurlock

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SERIES EDITOR’S FOREWORD

Writings from the Ancient World is designed to provide up-to-date, readable English translations of writings recovered from the ancient Near East.

The series is intended to serve the interests of general readers, students, and educators who wish to explore the ancient Near Eastern roots of Western civilization or to compare these earliest written expressions of human thought and activity with writings from other parts of the world. It should also be useful to scholars in the humanities or social sciences who need clear, reliable translations of ancient Near Eastern materials for comparative purposes. Specialists in particular areas of the ancient Near East who need access to texts in the scripts and languages of other areas will also find these translations helpful. Given the wide range of materials translated in the series, different volumes will appeal to different interests. However, these translations make available to all readers of English the world’s earliest traditions as well as valuable sources of information on daily life, history, religion, and the like in the preclassical world.

The translators of the various volumes in this series are specialists in the particular languages and have based their work on the original sources and the most recent research. In their translations they attempt to convey as much as possible of the original texts in fluent, current English. In the introductions, notes, glossaries, maps, and chronological tables, they aim to provide the essential information for an appreciation of these ancient documents.

The ancient Near East reached from Egypt to Iran and, for the purposes of our volumes, ranged in time from the invention of writing (by 3000 BCE) to the conquests of Alexander the Great (ca. 330 BCE). The cultures represented within these limits include especially Egyptian, Sumerian, Babylonian, Assyrian, Hittite, Ugaritic, Aramean, Phoenician, and Israelite. It is hoped that Writings from the Ancient World will eventually produce translations from most of the many different genres attested in these cultures: letters (official and private), myths, diplomatic documents, hymns, law collections, monumental inscriptions, tales, and administrative records, to mention but a few.

Significant funding was made available by the Society of Biblical Literature for the preparation of this volume. In addition, those involved in preparing this
volume have received financial and clerical assistance from their respective institutions. Were it not for these expressions of confidence in our work, the arduous tasks of preparation, translation, editing, and publication could not have been accomplished or even undertaken. It is the hope of all who have worked with the Writings from the Ancient World series that our translations will open up new horizons and deepen the humanity of all who read these volumes.

Theodore J. Lewis
The Johns Hopkins University
PREFACE

I would like to thank the late, much missed, Raymond Westbrook for asking me to do a volume of medical texts for the WAW series. I would further like to thank Ted Lewis for his support as this volume has proceeded. Marten Stol is commended for taking on the Herculean task of reading through this volume as the volume editor. His input is much appreciated and has resulted in many valuable corrections and suggestions. Any mistakes that remain are, of course, my own. My husband, Richard H. Beal, helped with planning museum visits, collations, and photography. He also has spent many months of evenings and weekends as we jointly reference checked the transliteration. I wish to thank the Trustees of the British Museum for permission to transliterate and translate unpublished tablets in their collection. Cuneiform tablet curator Jon Taylor has always been a joy to work with during our visits to the museum. His predecessor Christopher Walker and his wife Marie-Christine Ludwig, besides being always helpful in the museum, made us feel at home with a number of delicious dinners and wonderful conversation. Finally, I wish to thank the National Endowment for the Humanities (a US government agency) for aiding research on Assyrian and Babylonian medicine through the grant “Ancient Mesopotamian Medical Therapies” (2000–2003) paying my way to photograph and collate tablets in European and American museums and to make preliminary transliterations of all the known medical texts from ancient Mesopotamia, a selection of which are included here.

A NOTE ON CONVENTIONS

For those unfamiliar with conventions in the field of Assyriology, a few notes here should be useful. The scribes wrote the words of the texts both syllabically in Akkadian (Assyro-Babylonian) and using word signs derived from the Sumerian language. In transliterating the text, we write the syllabically written Akkadian in lowercase italics, while the Sumerian derived word signs are written in capital letters. Sumerian word signs would have been read as the underlying
Akkadian word. So, for example, the Sumerian word DINGIR would have been read as the Akkadian word *ilu*, just as the Arabic numeral 1 is read as English “one.” Akkadian signs attached to a Sumerian word sign aid in the reading of the underlying Akkadian word, so DINGIR-*li* provides the last consonant of *ilu* and the genitive case ending -*i*. Hyphens divide individual signs making up an Akkadian word, and periods divide individual signs making up a Sumerian word sign. Some word signs, called “determinatives,” tell the class that a particular thing belongs to, such as GIŠ “wooden object” or ŠEM “an aromatic.” These word signs, which were unpronounced, are written in modern scholarship as superscripts. Since there are often homophonous signs, scholars today differentiate these with accents and subscript numbers: sig₁ = sig₂, sig₂ = sig₃, then sig₄, sig₅, etc. The most recent and thorough signlist is Rykle Borger, *Mesopotamisches Zeichenlexikon*, 2nd ed., AOAT 305 (Münster: Ugarit-Verlag, 2010).

In transliterating and translating tablets, the following conventions are followed:

[ ] indicates damage to the clay tablet. Any signs or words within [ ] are missing on the tablet and are restored by the modern editor.

[( )] indicates that while the signs are missing in a hole on the main tablet, another tablet allows the modern editor to know what is missing in the damaged section.

<> indicates that the modern editor thinks that the ancient scribe has omitted something, which the modern editor has supplied within <>.

<( )> indicates that a tablet duplicating the passage in question contains information that is not in the text at hand and that the modern editor has supplied.

≠ ± surrounds signs or words that are damaged, but still readable.

( ) indicates information supplied by the modern editor to make something clearer for the reader.

! indicates that a sign is miswritten by the ancient scribe or miscopied by the modern copiest.

: used in the transliteration to indicate a Glossenkeil, a wedge or two used by the ancient scribe to indicate glosses or variants.

x illegible sign

0 space within a lacuna for a sign

§ new paragraph

// parallel or duplicate

# number missing

col. column

coll. collated
Medical texts are identified by their publication or, if unpublished, by their museum number.
ABBREVIATIONS

4R²  H. C. Rawlinson, *The Cuneiform Inscriptions of Western Asia* vol. 4, 2nd ed. London: Lithographed by R. E. Bowler, 1891
A  museum number of cuneiform texts in The Oriental Institute of the University of Chicago
AfO  Archiv für Orientforschung
AfOB  Archiv für Orientforschung Beiheft
AfOB 3  F. R. Kraus, *Texte zur babylonischen Physiognomatik*. Berlin, 1939
AJSL  *American Journal of Semitic Languages and Literature*
AMD  Ancient Magic and Divination
AO  museum number of a cuneiform text in the Louvre
AOAT  Alter Orient und Altes Testament
AOS  American Oriental Series
ArOr  Archiv Orientální
AS  Assyriological Studies
ASJ  *Acta Sumerologica* (Japan)
AUAM  museum number of the Andrews University Archaeological Museum
AuOr  Aula Orientalis
AUWE  Ausgrabungen in Uruk-Warka—Endberichte
ANCIENT MESOPOTAMIAN MEDICINE

BA Beiträge zur Assyriologie und semitischen Sprachwissenschaft
BE The Babylonian Expedition of the University of Pennsylvania—Series A: Cuneiform Texts

*BiOr* Bibliotheca Orientalis
BM museum number of cuneiform tablets in the British Museum
BPOA Biblioteca del Proximo Oriente Antiguo
BRM Babylonian Records in the Library of J. Pierpont Morgan

*CAD* *The Assyrian Dictionary of the Oriental Institute of the University of Chicago.* Chicago: The Oriental Institute of the University of Chicago, 1956–2010

CBS cuneiform tablet in the collection of the University Museum, University of Pennsylvania
CM Cuneiform Monographs

CT Cuneiform Texts in the British Museum
CTN Cuneiform Texts from Nimrud
CTN 4 D. J. Wiseman and J. Black. *Literary Texts from the Temple of Nabû.* The British School of Archaeology in Iraq, 1996

DPS the Diagnostic and Prognostic Series of tablets, edited in this volume 1.1.3 to 1.1.40

FAS Freiburger Altorientalische Studien
GCCI Goucher College Cuneiform Inscriptions
Hg the ancient lexical series HAR.gud = *imru*
IM museum number of cuneiform texts in the Iraq Museum

*JCS* Journal of Cuneiform Studies
JEOL Journal Ex Oriente Lux

*JMC* Le Journal des Médecines Cunéiformes
JNES Journal of Near Eastern Studies

*JRAS* Journal of the Royal Asiatic Society

K museum number of a cuneiform tablet in the Kuyunjik collection of the British Museum
ANCIENT MESOPOTAMIAN MEDICINE

SBH

Sm
cuneiform text in the Smith collection of the British Museum

SpTU
Spätbabylonische Texte aus Uruk

SpTU 1

SpTU 2

SpTU 3

SpTU 4

SpTU 5

StBoT
Studien zu den Boğazköy Texten

StBoT 36

STT

Šurpu

TAPS
*Transactions of the American Philosophical Society*

TBP

TCL
Textes Cuneiformes du Louvre

TCS
Texts from Cuneiform Sources

Labat, TDP

TUAT
Texte aus der Umwelt des Alten Testaments Neue Folge

UET
Ur Excavation Texts

Uruanna
ancient pharmacological plant-list

VAT
museum number of tablets in the Vorderasiatische Abteilung of the Berlin Museum
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>VS</td>
<td>Vorderasiatische Schriftdenkmäler</td>
</tr>
<tr>
<td>W</td>
<td>museum number of tablets from Uruk/Warka</td>
</tr>
<tr>
<td>WMF</td>
<td>Würzburger medizinhistorische Forschungen</td>
</tr>
<tr>
<td>WO</td>
<td>Die Welt des Orients</td>
</tr>
<tr>
<td>WVDOG</td>
<td>Wissenschaftliche Veröffentlichung der Deutsche Orient Gesellschaft</td>
</tr>
<tr>
<td>WZKM</td>
<td>Wiener Zeitschrift für die Kunde des Morgenlandes</td>
</tr>
<tr>
<td>YOS</td>
<td>Yale Oriental Series, Babylonian Texts</td>
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<tr>
<td>ZA</td>
<td>Zeitschrift für Assyriologie</td>
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INTRODUCTION

Ancient Mesopotamia, the “cradle of civilization,” preserves a surprisingly large and comprehensive set of medical texts. Unfortunately, physicians, medical specialists, historians of medicine, or just interested laymen with an interest in exploring ancient Mesopotamian medicine soon discover that most of this fascinating material is essentially inaccessible to the uninitiated. Even those who can read cuneiform well find medical texts difficult, and those attempting to learn to read them for the first time are risking a white-knuckle experience. The technical vocabulary used to describe signs and symptoms, procedures, and plants is unfamiliar to nonspecialists, and enlightenment is in many cases less likely to be found in the dictionary than in one of a growing number of scattered articles to be found in a bewildering variety of specialist medical journals. What is needed is an introductory study guide that will allow interested persons at whatever level of proficiency in cuneiform to get a basic working knowledge of ancient Mesopotamian medical texts either as an end in itself or as a foundation for further research.

This book aims to fill this need. It includes transliterations and translations of individual tablets representing the full range of developed Mesopotamian medicine both in time (from Middle Babylonian and Middle Assyrian to Seleucid periods), in space (texts from Assur, Nineveh, Sultantepe, Nippur, Sippar, Babylon, and Uruk), and by type (diagnostic, therapeutic, and pharmacological) to serve as an introduction to the study of these very difficult but ultimately extremely rewarding texts. These transliterations and translations are intended not just for the specialized reader but also for interested public (as, for example, medical doctors and specialists in the history of medicine). Therefore, philological commentary has been kept to a minimum. For the convenience of those who might wish to use this book as an introductory textbook to learn how to read ancient Mesopotamian medical texts, two source lists have been provided. Source List 1 contains a complete listing of all known duplicates of the Diagnostic and Prognostic Series. Source List 2 provides a basic bibliography of editions and translations of each of the texts treated in the volume, as well as a listing of the most significant duplicates, both published and unpublished.
A handful of Old Babylonian (1792–1595 BCE) incantations and the largely unpublished therapeutic texts from the Ur III (2112–2004 BCE) and Isin-Larsa (2017–1763 BCE) periods do not yet allow for any real attempt to understand the development of this medical tradition over the full course of ancient Mesopotamian history. When, as the Mesopotamians did, you do not record things simply to record them but “in order not to be forgotten,” what gets recorded is what cannot easily be remembered. As time goes on and knowledge accumulates, more and more will consequently need to be written down. This factor provides an obvious explanation for why, despite the fact that we have therapeutic texts already in the Ur III period, there are so many recitations and so few treatments from the Old Babylonian period. At this point, there were probably already many treatments, but since ancient Mesopotamian plant mixtures rarely contain more than ten ingredients (and earlier treatments often simply one or two), there were probably not so many that a practicing doctor could not remember them all. He also will have known which recitation to use with which treatment. The exact text of these recitations (and in particular the lengthy sections in Sumerian) are the only feature of his practice where a written copy might have come in handy. By the Neo-Assyrian period, by contrast, when there could be hundreds of treatments for any given condition, writing everything down in a convenient handbook form will have become a desideratum.

Forerunners from the Ur III to the Old Babylonian periods are of interest mainly in terms of the developments that preceded systemization, and will not be dealt with here. Similarly omitted are medical omens (the first two tablets of the Diagnostic and Prognostic Series plus scattered sections within this corpus), the physiognomic omens, the malformed birth omens and astrological medicine (which develops in the late periods). These are subjects which were peripheral to the medical duties of the scholar-physician and/or would deserve a study in their own right.

THE PRACTITIONERS (ASû AND ÂšIpu)

As I have argued elsewhere, the asû was a close equivalent of the European pharmacist. The pharmacological texts outlined in chapter 2 will have been his primary responsibility, along with generally unrecorded information on exactly where medicinal plants grew, when to pick them, and how to store them. Like his modern counterpart, the “pharmacist” will have been a medical expert of first

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1. Interested persons are referred to translations of selections of the most important of these texts in TUAT 5 (Heeßel 2011a and 2011c).
2. For sample texts of this type, see Heeßel 2011b, texts 5.1–2.
resort, particularly for simple problems like headaches and upset stomachs, and there is no doubt that these pharmacists were perfectly capable of devising their own treatments using the plants at their disposal.

The āšipu’s job was to diagnose and treat diseases, as these were understood by ancient Mesopotamians. For only a little over half of the syndromes recognized by ancient physicians could a plausible connection be made with already known spirits as potential causal agents. The remaining syndromes were either attributed to a malfunctioning body part, for instance “sick gall bladder” or given a name based on some characteristic, for instance “stinking” (buʾšānu)⁴ for syndromes involving foul smell and grayish lesions in the mouth. For more details on the diagnostic system, see Scurlock and Andersen 2005, ch. 19. The diagnostic and prognostic handbook translated in chapter 1 was certainly intended exclusively for the use of the āšipu, as were the commentaries in chapter 4. In short, he was the equivalent of our physician, or would be if there were a less stringent division of labor between modern physicians and pharmacists.

In ancient Mesopotamia, medicine was a team effort, and the therapeutic texts appearing in part 1, chapter 3 and parts 2 and 3, although provably intended for the use of the āšipu also, again provably, contained a fair amount of material that was originally intended for the use of the asû, and collected (sometimes with attribution) from that source. Identifying pharmacists’ treatments in the mass of texts stemming from physicians’ archives is a bit troublesome, but not impossible.

Texts almost certainly to be assigned to the āšipu are medical texts with the recitation, label and “its ritual” format typical of “magical” texts. This leaves two major categories of text which give clear indications as to the purpose for which they were intended, those that a) list symptoms after which the treatment is described, and those that b) begin with a list of plants, followed by a label (either immediately after the plants or at the end after preparation instructions) that indicates that the treatment is to be used for such-and-such a problem.

As I have argued elsewhere,⁵ only the āšipu would have had any use for type a), leaving type b) as the prime candidate for origination with the asû, particularly those with labels formulated “it is good for such-and-such a problem,” a phraseology that is typical of pharmacological texts. In the translations that follow, note has invariably been made of such potential pharmacists’ treatments.

As for what these bits of pharmacists’ lore are doing in the archives of āšipus, the obvious suggestion is they were intended to be used as what we call a prescription, a type of text which the physician (āšipu) had to be able to generate.

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⁴. See chapter 5, text 6.
(and hence would have been found in great numbers in his archive) but which was actually intended for the use of the pharmacist (asū).