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unity. Nevertheless, it still serves as a useful guide for church leaders seeking greater theoretical and/or practical understanding of conspiracy thinking, and for small groups wishing to improve communications, counselling services, and ministry to the politically and socially disaffected within their church or wider community.

If we reformulate the title of this text to "Whom Should Christians Trust?," and distill it through the clichéd but effective rhetorical question "What would Jesus do?," we might then ask ourselves, "Whom would Jesus fear?" The answer to this question, of course, is "no one," because his kingdom is not of this world. This maxim encapsulates the central message of this discussion paper, which admonishes its readers not to fall prey to worldly anxieties but to have—and to guide others toward—the confidence that Christ has already won the battle against all evil plots. His followers need only guard their hearts against despair and pursue the truth with love.

Reviewed by Michel Jacques Gagné, a historian, podcaster, and the author of Thinking Critically about the Kennedy Assassination: Debunking the Myths and Conspiracy Theories (Routledge, 2022). He teaches courses in critical thinking, political philosophy, and ethics at Champlain College, St. Lambert, QC.

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ILLNESS, PAIN, AND HEALTH CARE IN EARLY CHRISTIANITY by Helen Rhee. Grand Rapids, MI: Eerdmans Publishing, 2022. 367 pages. Hardcover; \$49.99. ISBN: 9780802876843.

"The practice of medicine is an art, not a trade; a calling, not a business; a calling in which your heart will be exercised equally with your head." —William Osler (1849–1919)

Helen Rhee, professor of the History of Christianity at Westmont College, has encapsulated this famous saying in her recent book, *Illness, Pain, and Health Care in Early Christianity* by demonstrating how partially objective medicine as an early science co-evolved with subjective religious thought throughout early Greek, Roman, and Christian history. Indeed, even today, a patient's pursuit of relief from suffering often involves the clinical science of medicine occurring arm-in-arm with spiritual care. Such examples include use of hospital chaplains, visitation and assistance from members of a congregation, and personal prayer. This book is comprehensive in nature and academic in tone, and Rhee has found some fascinating continuing threads of healthcare occurring in these aspects of Western civilization.

The book begins with general ideas of illness in all three cultures. Greek culture considered the importance of the Hippocratic ideas such as humoralism (defined as various body fluids and their effect on human illness) as well as prioritizing an individual's health to be a

societal priority. The emphasis placed on one's individual health inherently makes sense when one considers Greek culture's lack of modern medicine, the absence of understanding public health, the high mortality rate of pregnant women and young infants, and the constant presence of death in their society (pp. 1, 2). A Greek athlete was considered the exemplar of health with the expectation that their health attributes, like all humans, would decline over time.

Roman ideas followed, led by Galen, in which each part of the body was defined simply by its usefulness and its ability to work together in concordance with every body part to make up a healthy human. Thus, Galen believed that all human function descended from a divine design; this was in sharp contrast to the ideas of Epicurus who believed nature's design had random underpinnings. This early philosophical debate involving Roman medicine still continues almost 2,000 years later with regard to a potential purpose versus a lack of purpose in biological evolution. Typically, suggestions for changes in diet and exercise were the main Roman recommendations in the setting of illness, in that medicine and public health would not be viable study areas for many centuries. The author brings up the stark reality of terrible sanitation in ancient Rome which exacerbated many of the infectious pandemics. In fact, pandemics often were considered a part of divine punishment possibly for unknown sins. We can consider the parallels of pandemics of our time, such as those associated with HIV/AIDS or COVID-19, which unfortunately have been incorrectly associated with societal sin.

Subsequent early Christian ideas regarding health and illness received significant influences from both Greco-Roman and Hebrew society. Illness was considered more holistic-encompassing both the physical and the spiritual. Specific cultural influences affecting early Christian society's views on health included the importance of caring for others (for example, Deut. 15:10) and the Levitical dietary restrictions which probably had some health benefits (p. 3). A healthy person would benefit from overall shalom; a decline in one's health could be considered demonic. Jesus was seen as the perfect healer through his miracles, and stories of healing in the Gospels were added to the already-present Greco-Roman influences such as the balancing of humors. Mental illness, which is still under-appreciated and considered an individual "weakness" in much of today's society, was evaluated and treated using the entire gamut of early Christian thought: from being a disease of the soul, to being a result of divine judgment, to being a physical problem (perhaps not yet understood during that time period).

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The next section of the book contains ideas of physical pain utilized in all these early societies. Greeks used pain as an essential part of determining a physical diagnosis: pain is still an important concept utilized in modern healthcare. Romans expanded such thinking to consider pain as a disruption of the body's natural state; thus, they emphasized the importance of bringing the body back to its natural order. As an example, Galen felt that patients were not able to explain pain well. and this meant that the final opinion of pain resided solely with the medical provider. Such thoughts have had disastrous effects right up to today, when one considers healthcare's role in causing the recent opioid crisis in the United States (p. 4). Written pain narratives in Roman history were extensive and often seem to model the current history and physical examination process taught to modern medical students. Early Christian ideas of pain were somewhat parallel to Stoic belief structures in which human pain could be used as a learning tool. Early Christian writers often considered the imitation of Christ's suffering through the suffering of an individual as a learning, holy experience. Such ideas eventually led to the concept of the "martyr," which the author describes using examples in wonderful detail.

The last section of the book deals with healthcare in the ancient world, and I found this part of the book most fascinating when considering how healthcare is practiced in modern society. Both Greeks and Romans utilized their temples as places of healing, utilizing prayer and purification rituals. Treatments were extremely limited, mainly due to a lack of understanding the scientific method. Dangerous bleeding, purging, and cauterization were common ancient practices. The author points out that the Romans did build hospitals for a time, but the hospitals were used simply for preserving the health of property (slaves) and soldiers.

Early Christians considered medicine as a gift from God, and their building of early hospitals (in reality, often homes to provide rest and nutrition for the sick) during times of recurrent plagues likely marked a significant advancement in early healthcare as such simple but essential therapies do have healing benefits. It is fascinating to see early writers, such as Origen, believe that more spiritual people would be healed by God while not necessarily requiring medical care from a physician. These propositions parallel pseudo-scientific ideas that still percolate in modern society; the rise of the anti-vaccination movement in some religious movements is a good example. Regardless of the writing of early Christian writers, it is understandable that many patients would continue to follow some of the pagan medical therapies of Greco-Roman society, since good treatment options were limited, while the writing of the

ancient Greeks and Romans in essence provided a "second opinion" in care.

I have many good things to say about this book. Rhee goes into great detail regarding the writings of healers in ancient Greek, Roman, and Christian societies. Examples of patients and therapies used to heal in these early historical periods are provided in extensive detail. Many of the medical aspects of prevention continue to echo in today's society, including the emphasis on exercise and diet to improve health, using pain to determine a cause of illness, and the building of hospitals to improve care. Unfortunately, there is also the continuation, in some religious systems, of the idea that illness is due to sin in which prayer alone can cure. Such beliefs are unfortunate; a better belief is that God has provided modern medicine as a gift to improve humanity's well-being. I highly recommend this book, not only for people interested in early healthcare in Greco-Roman and early Christian society, but also for people looking at the evolution of healthcare over time as it began to slowly progress into today's scientific, evidence-based, modern medicine.

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OF MAYBUGS AND MEN: A History of Philosophy of the Sciences of Homosexuality by Pieter R. Adriaens and Andreas De Block. Chicago, IL: The University of Chicago Press, 2022. 246 pages. Hardcover; \$105.00. ISBN: 9780226822426. Paperback; \$32.50. ISBN: 9780226822440. Electronic; \$31.99. ISBN: 9780226822433.

Pieter Adriaens and Andreas De Block offer a substantive analysis of the science of sexual orientation as it relates to male homosexuality. As a psychologist who has been involved in research¹ in the areas of sexual orientation and sexual identity, I found the concepts in the book helpful in thinking through the evidence for what I believe and why. For example, although I have critiqued animal models as inadequate to explain the complexities of human sexual orientation and behavior, Adriaens and De Block challenge the reader to think more deeply about such a response and how it matches up with existing theories and the scientific support for each theory. They are even handed and largely dispassionate in their accounting of both theories and evidence to support various theories.

The authors note in the introduction that the book will be about male homosexuality rather than homosexuality in general; that is, they purposefully exclude female homosexuality as it has been far less attended to in the scientific literature and what is known suggests female homosexuality appears to be different than