ORIGINAL ARTICLE

Leprosy in Mesopotamia

Abstract

Leprosy is an ancient disease, known from South Asia since at least 2000 BCE. While there is no physical evidence of this disease in the region before about 50 CE, five different words are translated as "leprosy" in Mesopotamian texts and some of them occur frequently. Based on the texts, one word (garasu) is rarely used and there is evidence that the other four words relate to diseases that were treated, could be cured and, did not always require that affected individuals be permanently excluded from society. From this we conclude that the four commonly seen words do not describe modern leprosy. Three words (saharašubbû, epqu, garābu) also signify "scales" or "scabs", which naturally prompts the speculation that they are skin diseases more serious than eczema. The final word (*būšānu*) has been associated with several modern diseases, but the common feature appears to be a bacterial infection affecting the skin, mouth and nose.

Key words: Infection, Leprosy, Mesopotamia, Skin disease

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Introduction

Leprosy is caused by infection with *Mycobacterium leprae*. In the relatively mild tuberculoid form, the disease is characterised by pale or reddish skin lesions, numbness and muscle weakness. In the severe lepromatous form, the dermis is thickened, producing the nodules frequently associated with the disease, and there is often involvement of the nasal mucosa.¹

The seventh century Greek Byzantine physician, Paul of Ægina wrote an influential medical encyclopaedia² in which he described various forms of "leprosy", including *leuce*, *alphos* and *lepra* (from which the word leprosy is derived and was the Greek translation of the Hebrew $s\bar{a}ra'at$ in the Septuagint).³ However, none of these corresponds to the modern conception of the disease, which is probably what Paul called *elephantiasis* or *elephas*⁴, which should not be confused with lymphatic filariasis, which is also known as elephantiasis.⁵ He also distinguished these forms of "leprosy" from skin diseases, such as psoriasis or scabies.⁶

During the preceding millennia, many terms had been used for skin diseases in Mesopotamia. For example, five words meaning "leprosy" are given in the Chicago Assyrian Dictionary:⁷ saḥarašubbû, epqu, garābu, garāṣu and būšānu. These are distinct from those for eczema (guraštu or kuraštu, laqlaqqu and šīqu) and from a variety of other skin diseases (such as garārtu or karārtu, ḥazīqatu, kiṣṣatu, ūndu and zirqu), a rash (kibšu) and scabies (ekkētu or eggētu).

It is often stated that some of Alexander's soldiers having been infected in India (327-326 BCE) carried leprosy with them on their return.⁸ However, the disease may have been known in Persia and Egypt prior to that. For example, Herodotus, writing about 440 BCE, stated that *lepra* was known in Persia where affected individuals were isolated⁹ and "leprosy" is mentioned in the *Avesta* of the Zoroastrians.¹⁰ "Leprosy" was also known in Egypt because a treatment was described in the Ebers Papyrus¹¹ which dates from about 1550 BCE, but was probably copied from a much older source. More recently, it has been speculated¹² that "leprosy" was spread by the trade between India and the east coast of Africa, which may be consistent with one of the possibilities described by Monot et al.¹³

Despite the proliferation of labels and the documentary record, it is unlikely that what we know as leprosy was known in ancient Mesopotamia. Palaeopathological studies of skel Britton and Lockwood, 2004.
 Adams, 1846: 2, 15-23.
 Hulse, 1975; Zias, 1989.
 Dols, 1979; Manchester, 1984; Zias, 1989.
 Hajdu, 2002.
 Adams, 1846: 2, 15.
 CAD, 1956/2010.
 Mark, 2002.
 Rawlinson, 1861: 1, 139.
 Mortazavi et al, 2001.
 Bryan, 1930: 88-94.
 Mark, 2002.
 Mark, 2002.
 Mark, 2002. etal remains and the detection of M. *leprae* DNA in ancient bone have led to the unambiguous identification of cases of leprosy in India¹⁴ dating from about 2000 BCE, in Egypt¹⁵ in the second century BCE, Israel¹⁶ and in Central Asia¹⁷ dating from the first millenium CE and later throughout Europe.¹⁸ The lack of such physical evidence from ancient Mesopotamia may simply reflect the small number of reports of skeletal remains¹⁹ and this may not serve as evidence for the absence of leprosy at the time. Nevertheless, it does prompt a reconsideration of whether *saḥarašubbû, epqu, garābu, garāṣu* and *būšānu* could have been leprosy.

There is a risk in attempting to attach a modern diagnosis, based on a relatively small number of fragments of text, to a disease that is millenia old.²⁰ However, this has not proved to be a deterrent previously, so here we adopt the conservative approach of Kinnier Wilson²¹ and use the available text to test four characteristics of leprosy: that (i) any description of the symptoms were not inconsistent with the disease, (ii) no attempt was made to cure it, (iii) it was incurable and (iv) those affected were excluded from society. We consider the first of these criteria to be the weakest because communication between the doctor and patient can be difficult even when they can talk to one another; and when they are separated by a few millenia the probability of miscommunication is even higher. However, the fourth criterion may not be reasonable unless it can be demonstrated that exclusion was reserved for particularly severe illness. Finally, we assume that the words were used consistently, which seems reasonable given that texts differing in age by almost a millenium are often very similar.²²

saharašubbû and epqu

The literal meaning of *saharašubbû* is "covered with dust (i.e., with dustlike, whitish scales)"²³ and Kinnier Wilson²⁴ argued *saharašubbû* (or *saharašuppû* or *suharašubbû*), was leprosy because it was incurable; affected individuals had the expected symptoms and the sufferers were excluded from society rather than being treated.²⁵ He makes the points using two fragments of text. The first²⁶ invoked the god Sin to clothe someone completely with leprosy (*lepra*) until the day (s)he dies and banish him or her. This follows a common pattern (for example, at least one other similar example was translated by Oppert and Ménart²⁷). However, *saharašubbû* appears in neither of these. Instead, *išrubû*,

 14- Robbins et al, 2000.
 15- Dzierzykray-Rogalski, 1980.
 16- Matheson et al, 2009; Spigelman et al, 2001.
 17- Blau et al, 2005.
 18- Dols, 1979; Zias, 1989.
 19- Sołtysiak, 2004.
 20- Geller, 2010: 4; Neufeld, 1986.
 21- Kinnier Wilson, 1966.
 22- Biggs, 2005.
 23- Oppenheim, 1956.
 24- Kinnier Wilson, 1966.
 25- Nougayrol, 1948.
 26- Oppert et al, 1877: 120, 16-8.
 27- Oppert et al, 1877: 91, 19-21.

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one of a small set (including *iššubū* and *isribū*) of similar variants of *saharašubbû*, is written in the text. The symptoms of *saharašubbû* are described in the second passage "[if] the skin of a man exhibits 'white *pūşu*-areas', or is 'dotted with *nuqdu*-dots', such a man has been rejected by his god and is (to be) rejected by mankind".²⁸ Kinnier Wilson suggested²⁹ that these two possibilities correspond to the tuberculoid and lepromatous forms of the disease, respectively. Mark³⁰ points out that the skin lesions in leprosy are not white and so dismisses the suggestion that this passage describes the disease, but he did not consider the possibility that the other four terms might refer to leprosy.

Both of these passages, like others,³¹ indicate that those affected by leprosy were excluded from society. However, there is at least one example where the exclusion was temporary because "one who had *saḫarašubbû* has been cleansed and may re-enter his house".³² Clearly, this also indicates that *saḫarašubbû* could be cured and there is even a hint that this was the case in the curse "may Sin clothe his whole body in *saḫarašubbû* which will never lift"³³ and, perhaps, if "you put (wool from the sheep's forehead) either on an unclean man or on a leper [*saḫarašubbû*]"³⁴ this might be achieved. Given these three examples, it is likely that *saḫarašubbû* might be treated; it could be cured and affected individuals might be excluded only temporarily. Given the criteria we outlined above, it seems unlikely that *saḫarašubbû* could be what is now considered leprosy.

The term *epqu* replaced *saharašubbû* in standard Babylonian,³⁵ implying that they might refer to the same disease. Irrespective of this, there is some indication that individuals affected by *epqu* were not necessarily excluded. For example, the quotation "he who swears (falsely) by DN and DN₂ will be covered with *epqu*, will become poor and have no son and heir"³⁶ might be taken to indicate that *epqu* need not prevent the sufferer from having a son and heir. It is possible to read this as reinforcing the threat, but if *epqu* required complete exclusion, there would be no need to make the point.

There is clear evidence that in the past it was understood that some infectious diseases were more dangerous than others. For example, in a letter dating from the 18th century BCE, Zimrilim, King of Mari, wrote to his Queen $Š\bar{t}btu$:

"I have heard that Nanname is suffering from skin lesion; yet, she frequents the palace. It will infect many women with her (ailment). Now, then, give strict orders that no one drink

28- Kinnier Wilson, 1966: 50.
29- Kinnier Wilson, 1966.
30- Mark, 2002.
31- Nougayrol, 1948.
32- Clay, 1912/1925: 4, 24, 61.
33- King, 1912: No. 7 ii 16.
34- King 1896: 12:97
35- CAD E 246.
36- Gadd, 1963.

from the cup she uses, and no one sit on the seat on which she sits, and no one lie on the bed on which she lies, so that it should not infect many women with her (ailment). That [skin lesi]on is catching."³⁷

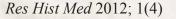
This clearly indicates that the "skin lesion" (*simmu*) was contagious, implying that others were not. Despite this, it was not necessary that the affected woman be excluded. However, it was necessary that care be taken to ensure that the affliction was not passed on and specific infection control measures are given. Moreover, the proverb "a rash [*simmu*] without a doctor is like hunger without food"³⁸ implies that *simmu* was treated. As *simmu* is equated with *epqennu*,³⁹ which means "leprosy-like"; it is likely that a distinction was made between "leprosy-like" diseases that did not require exclusion, and "leprosy" (*epqu*), consistent with the possibility that it necessitated temporary exclusion.

būšānu, garābu and garāsu

The literal translation of $b\bar{u}\bar{s}\bar{a}nu$ (or $bu'\bar{s}\bar{a}nu$) is "the evilsmelling disease",⁴⁰ but the definitions range from "skin disease"⁴¹ to "*übler* Geruch, eine Krankheit der Nase"⁴² and "a severe disease affecting mouth, nose, and skin".⁴³ However, there is a strong suggestion that it is "... a type or stage of leprosy".⁴⁴ In contrast, *garābu* is defined as "leprosy" and equated with *saḥarašubbû*,⁴⁵ whereas *garāşu* is a "malignant skin disease, probably leprosy",⁴⁶ although it appears to be used less frequently than either *būšānu* or *garābu*.

As both Goetze⁴⁷ and Kinnier Wilson⁴⁸ maintain, *garābu* and *būšānu* are equated to the same logogram,⁴⁹ from which it seems reasonable to infer that they must be related. However, *garābu* and *garāşu* also share the same logogram,⁵⁰ but this differs from that common to garābu and *būšānu*. Given the relative rarity of *garāşu*, we feel safe in assuming that the more important connection is that between *garābu* and *būšānu*.⁵¹

However, $b\bar{u}\bar{s}\bar{a}nu$ appears in the therapeutic texts among diseases of the teeth, implying that it was treated, whether using "wild grape"⁵² or hellebore⁵³ is unclear. That $b\bar{u}\bar{s}\bar{a}nu$ is treated, and perhaps even cured, is made even more explicit by "you relieve the $b\bar{u}\bar{s}\bar{a}nu$, the pulsating in the temples that makes one hop around".⁵⁴ Similarly, the implication of a "medicine against garābu"⁵⁵ is that the disease was treated. Consequently, $b\bar{u}\bar{s}\bar{a}nu$ is unlikely to be leprosy, but, based on the literal translation, Kinnier Wilson⁵⁶ suggested that it 37- Neufeld, 1986. 38- CAD S 276. 39- CAD E 246. 40- Kinnier Wilson, 1996. 41- Goetze, 1955. 42- von Soden et al, 1985: 1, 143. 43- CAD B 350. 44- CAD B 351. 45- CAD G 46. 46- CAD G 49. 47- Goetze, 1955. 48- Kinnier Wilson, 1966. 49- Rawlinson, 1861/1875: 2, 44 No. 2, 13-4. 50- CAD G 49. 51- Goetze, 1955; Kinnier Wilson, 1966. 52- Kinnier Wilson, 1966. 53- von Soden et al, 1985: 1, 143. 54- Ebeling, 1919: 321-5. 55- Landsberger et al, 1970: XVII 216. 56- Kinnier Wilson, 1966.



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might be scurvy. Subsequently, it was proposed that būšānu might include diphtheria, bronchiestasis, visceral leishmaniasis, acute necrotizing ulcerative gingivitis and a variety of oral infections,⁵⁷ culminating in Salin's⁵⁸ suggestion that būšānu represents a family of pathologies. Whatever būšānu and garābu might have been, they were treated and could be cured and further there was no implication that affected individuals were excluded.

How are the diseases related?

If none of the terms identified mean leprosy, which is at least consistent with the view that the Biblical use of the word "leprosy", should not be taken literally,⁵⁹ what might they have been? Bearing in mind our reservations about attempting to attach a modern diagnosis to an ancient disease, we adopt a very conservative approach.

The literal meaning of *saharašubbû* is "covered with dust (i.e., with dustlike, whitish scales)",⁶⁰ epqu is also associated with "scales" because the phrase ša e-ep-qa-am ma-luú means "who is full of scab"⁶¹ and the second definition of *garābu* is "scab".⁶² Given that *saharašubbû*, *epqu* and *garābu* are distinguished from eczema in CAD, we infer that they are likely to be more serious, but given the association with scales and scabs, it seems probable that they all have such features (Figure 1).

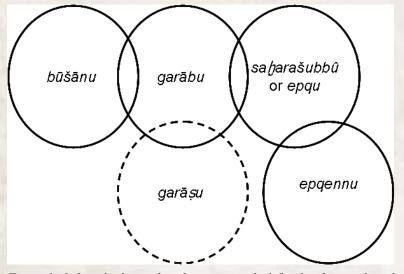


Figure 1. Inferred relationships between words defined as leprosy based on the common logograms and word usage.

Then, it seems that $b\bar{u}\bar{s}\bar{a}nu$ affected the skin, the mouth and the nose, but not the lungs, as is apparent from "if a man is

57- Kinnier Wilson, 1996; Scurlock et al, 2005.
58- Salin, 2010.
59- Hulse, 1975.
60- Oppenheim, 1956.
61- Ibid.
62- CAD G 46.

ill in the lungs and he has būšānu-disease in his mouth".⁶³ It is also distinguished from epqennu because they are listed separately in "severe chills, epqennu-disease, and būšānu-disease".⁶⁴ Of the modern diseases associated with būšānu, several involve bacterial infection (diphtheria, bronchiestasis and acute necrotizing ulcerative gingivitis) and even scurvy may be associated with secondary oral infection.⁶⁵ While Sa-lin's⁶⁶ suggestion that būšānu represents a family of pathologies is entirely reasonable, a plausible characteristic might be an infection of the skin, mouth and nose. Despite this, the fact that garābu and būšānu are equated to the same logogram⁶⁷ may imply that they share some characteristics (Figure 1).

Conclusions

It is likely that none of the diseases identified as "leprosy" in Mesopotamia can be equated with the modern leprosy. Whether or not this is the case, it is reasonable to assume that some of those affected were treated and others were at least tolerated, even if some of those might have been "... chained in their huts under the walls of the city ...".⁶⁸ It is clear that previously other affected individuals were expelled from their community, but some of them were later allowed to return. In these respects, their treatment was more enlightened than any other treatment that was to be seen for centuries.

References

Adams F. The seven books of Paulus Aegineta translated from the Greek. With a commentary embracing a complete view of the knowledge possessed by the Greeks, Romans, and Arabians on all subjects connected with medicine and surgery. London: The Sydenham Society, 1846.

Biggs RD. Medicine, surgery, and public health in ancient Mesopotamia. *J Assyrian Acad Studies* 2005; 19: 1-19.

Blau S, Yagodin V. Osteoarchaeological evidence for leprosy from western central Asia. *Am J Physical Anthropol* 2005; 126: 150-8.

Britton WJ, Lockwood DNJ. Leprosy. Lancet 2004; 363: 1209-19.

Bryan CP. The papyrus Ebers. London: Geoffrey Bles, 1930.

CAD. The Assyrian dictionary of the Oriental Institute of the University of Chicago. Chicago: The Oriental Institute, 1956/2010.

Clay AT. *Babylonian records in the library of J. Pierpont Morgan*. New Haven: Yale University Press, 1912/1925.

Dols MW. Leprosy in medieval Arabic medicine. *J History Med Allied Sci* 1979; 34: 314-33.

Dzierzykray-Rogalski T. Palaeopathology of the Ptolemaic inhabitants of Dakhleh Oasis (Egypt). *J Human Evol* 1980; 9: 71-4.

Ebeling E. [Keilschrifttexte aus Assur religiösen Inhalts]. Leipzig: J. C.

63- Thompson, 1923: 55, 1 6.
64- Goetze, 1955: 27.
65- Touyz, 1984.
66- Salin, 2010.
67- Rawlinson, 1861/1875: 2 44 No.
2 13-4.
68- Nougayrol, 1948: 208 n. 21.

Hinrich, 1919.

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Gadd CJ. Two sketches from the life at Ur. Iraq 1963; 25: 177-88.

Geller MJ. *Ancient Babylonian medicine*. Theory and practice. Chichester: John Wiley and Sons, Inc, 2010.

Goetze A. An incantation against diseases. *J Cuneiform Studies* 1955; 9: 8-18.

Hajdu SI. Elephantiasis. Ann Clin Lab Sci 2002; 32: 207-9.

Hulse EV. The nature of biblical "leprosy" and the use of alternative medical terms in modern translations of the Bible. *Palestine Exploration Quart* 1975; 107: 87-105.

King LW. *Babylonian magic and sorcery being "the prayers of the lifting of the hand"*. London: Luzac and Co., 1896.

King LW. *Babylonian boundary-stones and memorial-tablets in the Brit-ish Museum*. London: Longmans and Co., 1912.

Kinnier Wilson JV. Leprosy in ancient Mesopotamia. *Rev Assyriol Ar*chéol Orient 1966; 60: 47-58.

Kinnier Wilson JV. Diseases of Babylon: an examination of selected texts. *J R Soc Med* 1996; 89: 135-40.

Landsberger B, Reiner E. MSL X. *The series HAR - ra = hubulla. Tablets XVI, XVII, XIX and related texts.* Rome: Pontificum Institutum Biblicum, 1970.

Manchester K. Tuberculosis and leprosy in antiquity: an interpretation. *Med Hist* 1984; 28: 162-73.

Mark S. Alexander the Great, seafaring, and the spread of leprosy. *J History Med Allied Sci* 2002; 57: 285-311.

Matheson CD, Vernon KK, Lahti A, *et al.* Molecular exploration of the first-century *Tomb of the Shroud* in Akeldama, Jerusalem. *PLoS ONE* 2009; 4: e8319.

Monot M, Honoré N, Garnier T, *et al.* On the origin of leprosy. *Science* 2005; 308: 1040-2.

Mortazavi H, Dowlati Y, Dowlati B. A brief history of dermatology in Iran. *Arch Dermatol* 2001; 137: 936-7.

Neufeld E. The earliest document of a case of contagious disease in Mesopotamia (Mari tablet ARM X, 129). *J Ancient Near East Soc* 1986; 18: 53-66.

Nougayrol J. *Sirrimu* (non **purîmu*) "âne sauvage". *J Cuneiform Studies* 1948; 2: 203-8.

Oppenheim AL. The interpretation of dreams in the ancient Near East. With a translation of an Assyrian Dream-Book. *Trans Am Phil Soc* 1956; 46: 179-373.

Oppert J, Ménant J. [*Documents juridiques de l'Assyrie et de la Chaldée*]. Paris: Maisonneuve & C^{ie}, 1877.

Rawlinson G. *The history of Herodotus*. New York: D. Appleton and Company, 1861.

Rawlinson HC. *The cuneiform inscriptions of western Asia*. London: R. E. Bowler, 1861/1875.

Robbins G, Tripathy VM, Misra VN, et al. Ancient skeletal evidence for

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leprosy in India (2000 B.C.). PLoS ONE 2000; 4: e5669.

Salin S. Una nota sui casi di bu'sanu. Nouv Assyriol Brêves Util. 2010; 2010: 14-5.

Scurlock JA, Andersen B. *Diagnoses in Assyrian and Babylonian medicine: ancient sources, translations, and modern medical analyses.* Chicago: University of Illinois Press, 2005.

Sołtysiak A. Physical anthropology and the "Sumerian problem". *Studies Historical Anthropol* 2004; 4: 145-58.

Spigelman M, Donoghue HD. Unusual pathological condition in the lower extremities of a skeleton from ancient Israel. *Am J Physical Anthropol* 2001; 114: 92-3.

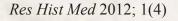
Thompson RC. Assyrian medical texts from the originals in the British Museum. London: Oxford University Press, 1923.

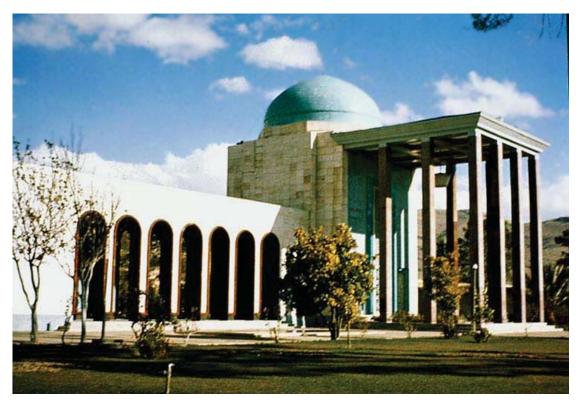
Touyz LZG. Vitamin C, oral scurvy and periodontal disease. *S African Med J* 1984; 65: 838-42.

von Soden W, Meissner B. *Das Akkadisches Handwörterbuch*. Wiesbaden: Otto Harrassowitz, 1985.

Zias J. Lust and leprosy: confusion or correlation? Bull Am Schools Oriental Res 1989; 275: 27-31

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Sadi (Persian poem, 13th century AD) Tomb, Shiraz, Iran

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