the cautionary note that forays into such expensive research must proceed on the basis of a coherent "research design", as opposed to curiosity or enthusiasm to "try out" new techniques.

So on what areas should research be concentrated at present? Roberts and Manchester suggest three topics where optimum use could be made of available funding: the relation of health to the transition to agriculture, differences in health and medical conditions between urban and rural communities, and the interplay between gender and health. But here again: "The important message is not to study palaeopathology for 'its own sake'. Genuine research questions must be asked of the data; in this way a more meaningful interpretation will result." (p. 202)

The archaeology of disease in its new revised dress is a first-rate introduction to the field of palaeopathology, and is an ideal starting point for both students and historians in other areas of research. For specialists, however, it will also prove valuable for its numerous fresh insights and observations on the present state and future prospects of the field.

Lawrence I Conrad, Wellcome Institute

Gerrit Bos, Ibn al-Jazzār on forgetfulness and its treatment. Critical edition of the Arabic text and the Hebrew translations with commentary and translation into English, The Sir Henry Wellcome Asian Series, vol. 1, London, The Royal Asiatic Society of Great Britain and Ireland, 1995, pp. 91, £15.00 (0–947593–12–8). Distributed by Lavis Marketing, 73 Lyme Walk, Headington, Oxford OX3 7AD (Tel: +44 1865 67575; Fax: +44 1865 750079).

A hearty welcome to this new "Asian Series" which, under its three enterprising editors, Lawrence I Conrad, Paul Unschuld and Dominik Wujastyk, aims "to make available fine editions of the medical and scientific classics of Asia . . . in their original languages" and in modern translation. Its inaugural volume, this little medical tract by Ibn al-Jazzār (died c. AD 980), is presented in the original Arabic from the only known text, together with the editor's excellent English translation and two different medieval Hebrew versions. It does not include the eleventh-century Latin translation by Constantine, by which it was introduced to Europe, albeit under his own name.

Problems of memory and forgetfulness (mental retention and its impairment) received much attention in ancient and medieval times, before printed books were available: not least by Aristotle in his philosophico-psychological study: *On memory and recollection*, which, like most other works on the subject, also considers mental training to enhance the power of memorization.

In his interesting introductory Chapter 3, Gerrit Bos describes medieval Jewish and Arab systems of this kind. Yet this "letter" by Ibn al-Jazzar, which purports to answer the queries of an elderly sufferer, appears to be the only extant Arabic work devoted to "forgetfulness" in general. Moreover, the condition is here considered solely as a pathological entity, and, on the basis of an amalgam of Greek concepts regarding the anatomy of the brain and its abnormal operation, "medical" treatment alone is prescribed. The latter is even recommended for the enhancement of physiological memory which, however, is not otherwise discussed. Thus, excessive "coldness" or "moistness" is said to alter the humoral balance by causing an over-production of "phlegm". Forgetfulness results when this obstructs the flow of "psychic pneuma" in the posterior ventricle of the brain. Treatment essentially consists of polypharmacy, using mainly "warming" or "drying" medicaments to prevent the production of excess phlegm, or drugs which expel it from the body. (In this connection I suggest that the plant-name baladhur, frequently cited in both the Arabic and Hebrew versions, but left untranslated in English, could be a transliteration of the Latin pellitory: a term given to various plants used for tanning skins, on account of their powerful drying

qualities). On the same basis physical methods are additionally prescribed, such as drycupping of the neck, or massage of the head with warm oils (thereby offering modern "aromatherapy" a much-needed "rationale").

This is indeed a "fine" edition in the scholarly sense, including variant readings, glossaries, ample notes and bibliography, which are matched by the quality of its design and typesetting contributed by members of the Wellcome Institute. An additional index in English might, however, be useful. Yet, a far more serious question is raised by the choice of this particular text to herald the series. Can it really be considered as a "classic"? It has been given a high gloss by its editor, but is its *content* really deserving of such an expenditure of talented effort: particularly the attempt to interpret the names of the innumerable drugs listed in both Arabic and Hebrew?

Far worthier texts of medieval medicine in Arabic and Hebrew, long and short, still remain untranslated because so few scholars are qualified for these tasks. Having long demonstrated such capabilities, let us hope that Dr Bos will now continue the pioneering efforts of Max Meyerhof and Franz Rosenthal to excavate new treasures from this muchneglected field, which will then be added to the series.

Elinor Lieber, Oxford

Ibn Qayyim al-Jawziya, Natural healing with the medicine of the prophet: from the Book of the provisions of the hereafter, transl. Muhammad Al-Akili, Philadelphia, Pearl Publishing House, 1992, pp. xxvi, 360, £14.95 (p&p £1.45), \$16.95 (1-879405-07-5). Distributed in Great Britain by Alif International, 109 Kings Avenue, Watford, Herts WC1 7SB.

Ibn Qayyim al-Jawzīya (d. 1350) was a renowned Damascene scholar and jurist of the Hanbalī school. The author of many literary and doctrinal works, he was especially prominent as a preacher and theological popularizer, and it was in this capacity that he wrote his most important book, the $Z\bar{a}d$ alma' $\bar{a}d$ ("Provisions for the Hereafter"), an encyclopaedic survey of the vast materials available in his day on the life of the Prophet Muhammad, his merits and distinctions, and traditions (*hadīth*) concerning religious observances and law. This didactic work quickly became an authoritative text in Islamic devotional literature; among the Hanbalīs in particular, it enjoyed a status comparable to that of the classic *Ihyā' 'ulūm al-dīn* ("Revival of the religious sciences") by al-Ghazālī (d. 1111).

One of the many topics considered in the Zād al-ma'ād is the Medicine of the Prophet, a fluid corpus claiming to record the sayings of Muhammad pertaining to medicine, but in fact representing a much broader range of material. Most of it originated in later times, and came to include, for example, quotations from Avicenna (d. 1037). The genre was well developed by the fourteenth century, and Ibn Oayyim's presentation of it in his Zād al-ma'ād takes advantage of much previous work. The first part (pp. 1-116 of the translation) deals with treatments for physical complaints, the second (pp. 117-216) is more oriented toward charms and amulets, and the third (pp. 217-345) is an alphabetical survey of materia medica. Ibn Qayyim sometimes comments at length on his material. Of particular interest is his discussion of the medical profession (pp. 98-105), which considers such issues as how to find the most expert physician, the qualifications a physician should have, and his responsibility and accountability to the patient. He also offers an important analysis of contagion (pp. 106-12). In the main, Ibn Qayyim presents the traditional religious materials pertinent to medicine, within the framework of an educated layman's knowledge of the humoral medicine inherited from Galen and systematized by Avicenna. Hippocrates and Galen are both cited (pp. 48, 114, 242, 280), for example, and always approvingly. This is a typical attitude, but the fact that such a stand is taken by a conservative Hanbali