Illness and Ascetic Merit: The Moral Signification of Health and Sickness in Early Egyptian Monasticism
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Father Zossima’s death, like his life, elicited no shortage of controversy among monastics in Dostoevsky’s *Brothers Karamazov*. Within a day of the holy Elder’s death, an overwhelming stench of decomposition had filled his cell. This was surprising to the monastics and the lay followers; the body had begun to exhibit the olfactory signs of death unusually quickly—even for the temperate Russian summer (Dostoevsky 1950, 396–97). While an unusually rapid or pungent decomposition might be passed off without comment in the case of the ordinary landholder or peasant, it was held to have special significance in the case of the famously holy Father Zossima. The monastics murmured and their followers gossiped, taking offense that the body of such an ostensibly holy monastic should decompose in such a way.

What reason was there for scandal? It was expected, Dostoevsky’s narrator explains, that the body of a holy ascetic would react to the passing of the soul to heaven quite differently than the body of a common peasant or even a noble (396). Monastics and their followers held tightly to memories of holy monastics who not only retained an exceptional level of health throughout their lives, but whose bodies, permanently it would seem, resisted decomposition. Dostoevsky’s narrator mentions two examples. One, a certain Job, lived to 105, a sure sign of sanctity; and while long dead, his tomb remained a cherished place for reflection and prayer. The other, Father Varsonofy, was of living memory among the monastics. Both their bodies maintained supernatural vigor after death: their faces were bright, their corpses appeared full of life, and most remarkably their remains never decomposed. Varsonofy’s corpse even exuded a “sweet fragrance” (397–98). Their lives of sanctity and ascetic rigor somehow altered their physiology, lending their bodies strength and healthiness that obtained even into death. And while the narrator insists that special,
superhuman health was by no means uniform among the holy brethren, and that many of the deceased monastics had decomposed quite naturally, the decomposition of Zossima’s body—“the breath of corruption”—caused an instant scandal among monastics and laity alike. The state of the Elder’s body was taken to signify his sanctity and ascetic merit, or rather their opposite. “It shows God’s judgment is not as man’s,” one bystander murmured. Others more explicitly traced his bodily decomposition to his ascetic shortcomings: “He was not strict in fasting, allowed himself sweet things, ate cherry jam with his tea, ladies used to send it to him. Is it for a monk of strict rule to drink tea?” Another claimed, “He did not keep the fasts according to the rule and therefore the sign has come.” Others traced it to doctrinal or sacramental errors: “He abused the sacrament of confession” (400–1). While some dissenters argued that such belief in the moral signification of illness was either unorthodox or simply unwise, Dostoyevsky’s account reflects the widespread acceptance that monastics were endowed with a special level of bodily health that set them apart from the laity; their sanctity and ascetic merit manifested in long life and a purity of body that maintained their corpses uncorrupted for generations. And for any acknowledged holy man not possessing this extraordinary health, the opposite qualities could be logically imputed: sickness, or even a quick decomposition such as Zossima’s, signified sin, ascetic immoderation, and heresy.

The assumptions about monastic health and monastic physiognomy reflected in Dostoyevsky’s narratives belong to a long tradition, traceable at least to the late fourth century (Shaw 1998, 485–99; 1998a, 33–52). Monastics who possess extraordinary health, live unusually long, and whose corpses either bear a living semblance or exude sweet fragrance (the so-called corpus incorruptum) are found as early as Athanasius’s Life of Antony (written ca. 356–60) and Jerome’s Lives of Paul and Hilarion (ca. 375–79, and post 390, respectively). These topoi dominate monastic literature, leading the medical historian Owsei Temkin to conclude that “[t]he ascetics’ healthy appearance was an almost necessary postulate of hagiography” (Temkin 1991, 154). And Coptic monks to this day preserve the corpora incorrupta of sacred brethren from as long ago as the fourth century to as recently as the nineteenth century (Meinardus 2002, 65).

And yet, while a connection between health and ascetic merit is deeply imprinted into the worldview of Byzantine hagiographers,
another equally familiar (and seemingly contrary) motif runs through monastic discourse: that of the meritorious ascetic as sufferer of exceptional sickness, Simeon Stylites being the most famous example. In the various recensions of his Life and the poetic panegyrics in his honor it is perhaps the monk’s patient endurance of a podiatric cancer that prompts the most effusive praise (Doran 1992, 81–82, 131–32; Harvey 1990; cf. Urbainczyk 2002, 95–102). The poet Jacob of Serugh, for example, famously aestheticizes Simeon’s grotesque lesion into an object of beauty to contemplate and praise, his gangrenous and decayed foot likened to “a tree beautiful with branches” (Harvey 1990, 22). His disease, and his patient endurance thereof, signals his merit and achievement as an ascetic, as does the attendant smell of perfume from his corpse (Doran 1992, 98). And while such an awed description of pus, gangrene, blood, and amputation may indeed border on the extremes of the hagiographic imagination, Jacob the homilist was in good company by praising monastic sickness as a sign of ascetic merit. He modeled his panegyric to Simeon on earlier lives, which in turn shared much in common with contemporary hagiography. Hagiographers and monastic biographers of the late fourth and fifth centuries popularly represented monastic sickness as reflective—inversely so—of the monastic’s sanctity. This belief—that sickness signified ascetic merit and sanctity—is commonly taken to have been normative in late antiquity: the more painful and grotesque the disease, the holier the ascetic.

What links these representations of monastic sickness and health is a shared assumption that the health and sickness of a monastic says something significant about his or her ascetic merit. Whether it manifests in gruesome illness or superlative health, the monastic’s bodily sickness or health signifies the internal “health” of his or her soul—in other words the morality, sanctity, and ascetic merit of the monastic. Monastic health and sickness, furthermore, is assumed to be specially significant; its meaning differs from—or is at least an intensified manifestation of—the meaning normally imputed to sickness and health among the non-monastic populace.

It is the special significance of monastic health and sickness that the present essay will explore. Is the health of an ascetic necessarily imbued with special meaning, distinct from non-monastic health? Can the interpreted significance of monastic health be traced over time? Does its significance vary with the social location of the
observer? All of these questions may be answered in the affirmative. The following pages will show that the meaning of monastic health and sickness was by no means taken for granted, but was deeply controversial; and it evolved noticeably over the course of late antiquity. The first part of the essay demonstrates that the earliest records of Christian monasticism (from the 330s to the 350s) indicate that the monastic’s sickness/health was not widely held to signify the monastic’s sanctity, morality, or ascetic merit. In fact, such a view is not attested in monastic literature prior to the late 350s. For such a representation of monastic health and sickness we must look to Athanasius’s Life of Antony as the first text to popularize such an interpretation (part two of the present essay). But as influential as Athanasius’s representation of monastic health and sickness undoubtedly was, the interpretation of monastic health and sickness as signifiers of ascetic merit remained contested ground in post-Athanasian antiquity, which betrays some of the very same concerns on which Dostoyevsky would draw centuries later (part three).

I. Ascetic Health and Illness in Early Egyptian Monasticism

*Documentary papryi: archives from the monastery of Hathor.*

The earliest documentation of Christian monasticism lies not in the *Lives* and *Rules* of great monastic organizers, but in quotidian documents from the early monastics and their followers, detritus left behind in garbage pits, or later reused to bind papyrus leaves into codices of more lasting value (Judge 1981; Judge 1977; Goehring and Boughner 1990; van Minnen 1994). The greatest concentration of early fourth century monastic papyri is found in the form of several archives from the monastery of Hathor, a community not otherwise documented in literary sources. Hathor was located on the borders of the Heracleopolite and Upper Kynopolite nomes in Egypt, some 150–200 km south of modern Cairo; the precise location is unknown (Bagnall 1993, 308; Kramer and Shelton 1987, 11–14). Hathor may have been organized along the lines of a coenobium, judging by the names of officers preserved in the papyri: father of the monastery, priests, deacons, a reader, a steward, fathers, an Apa, monastics, and (most indicative of coenobitic monasticism) a housemaster (Coptic *rmnēi*). The monastery included both men and women. And much
like the Pachomian monasteries of Upper Egypt, the monastery of Hathor was united with several others in a federation, although it is not clear what kind of leadership role, if any, Hathor played (Goehring 1999d, 189-195). This federation, known only through the publication of documentary papyri in the past century, rivals that of Pachomius for the title of the first union of monastic communities.

Although the monastery of Hathor is now recognized as among the earliest attempts to organize ascetics in a federation, this organization did not attract the literary acclaim enjoyed by Pachomius’s organization because the monastery of Hathor belonged to the Melitian church—a schismatic church popular in many parts of Egypt (Williams 2001, 32–41; Hauben 1998; Bell 1924, 38–45). Although the origins of the Melitian church lay in organizational rather than theological disputes, the Melitians would in the course of the fourth century ally themselves with the supporters of Arius, drawing the particular wrath of none more than Athanasius of Alexandria (ca. 296–373), whose violent opposition is shown from the Melitian point of view in the archive of Paieous (P.Lond. VI 1919; cf. Arnold 1991, 62–89; Brakke 1998, 468–69). The Melitian monastics would in turn be written out of “Orthodox” historiography, even though papyri document their continuing existence in Egypt through the sixth century, and indeed the coexistence of “Melitian” and “Orthodox” ascetics within the same communities (Goehring 1999e; Brakke 1998, 468).

Documentation for the monastery of Hathor is preserved in three collections of papyri (archives), each of which preserves documents related to a single monastic personage: Paieous (330s), Paphnutius (340s), and Nepheros (350s). Each of the archives is dominated not by the letters of the monastics themselves, but by letters written to the monastics—usually by their non-monastic followers or clientes. The letters to Paieous, Paphnutius, and Nepheros number some thirty-five, representing at least fifteen authors, and they constitute as much of a cross-section of Egyptian society as one might reasonably hope to extract from the papyri. They represent the viewpoints of women and men, monastics and seculars, Greek and Coptic, the politically elite and the downtrodden. These followers, clients, admirers and supplicants depended upon the monastics as spiritual patrons in all the ways now familiar from the last several decades of monastic scholarship (Brown 1995, 57–78; Brown 1982; Brown 1982a; Brakke 1995, 201–65; Goehring 1999).
They beseech intervention in financial and legal hardships; they rely on miraculous healing through the monastics’ intercessory prayer; and they are consoled by the assurance that they will find a place in heaven through the good offices of the monastics. The archive of Paieous (330s) reflects more the economic and political negotiations of the monastics, while the latter two archives of Paphnutius (340s) and Nepheros (350s) reflect most extensively the monastics’ perceived abilities as healers, obtaining divine aid for their followers through prayer and the application of blessed oil, both of which remedies were believed to be efficacious even at long distances. Most relevant to the present essay, the letters to Hathor also tell us much about the meaning of monastic health and illness, and how its significance was interpreted by the earliest witnesses to the Christian monastic movement.

Indeed, the topic of monastic sickness and health is one on which the letters frequently touch. And yet, with all their diversity of social, economic, and geographic location, the correspondents concur with unanimity on the significance of monastic health and sickness. The letter writers evince sincere concern for the health of their monastic patrons: sixteen out of the thirty-five letters explicitly mention the authors’ hopes for the monastics’ continued health and/or anxieties at their potential sickness. Expressions of concern take a variety of forms. Common is the basic closing, “I pray you are healthy” [errōsthai se euchomai] (P.Lond. VI 1916.30; 1921.30; P.Neph. 4.29–30; 9.17–22; 12.21–22), often expanded to “I pray you are healthy in soul and body” [psuchēi kai sōmati], or “I pray that you may be healthy for a long time” [epi megiston chronon] (P.Neph. 1.30–31; 2.10–12; 5.23–25; 7.12–13; P.Lond. VI 1923.19–21; 1925.23–24; 1928.8–11). Frequently the writers invoke either God or Providence as the protector of the monastic’s health. So Athanasius (not the famous bishop) writes, “May divine Providence keep you healthy for the longest time, always remembering us, O beloved, most honored” (P.Lond. VI 1928.8–11; 1929.19–21). Others offer similar wishes of good health to the monastic Nepheros (P.Neph. 1.30–31; 5.23–25; 7.12–13; 12.21–22; 13.16–19; 14.8–10).

Their concern is no idle one; the writers depend upon the monastic’s continued health for the perceived benefits that he provides: “I pray that you may be healthy in the Lord for a long time, praying on my behalf continuously, most pious father” (P.Lond. VI 1928.8–11).
Indeed, without the monastic’s aid there might be no hope, as a certain Heraclides writes to Paphnutius:

You always have the chance to pray on my behalf and I need help from you who are stronger on account of prayer. Both because of my name and because of the sickness that has seized and oppressed me, I now beg you to do this additional thing: send me the oil. . . . For I do not believe that I will be helped otherwise. May you hold up Christ as long as you have health. [second hand] I pray in the Lord Christ that you be preserved for much time, praying assiduously on my behalf, most God-revering father. The prophet also shouted, “In affliction I called out and he heard me.” Now truly it is an affliction in which I live, where help can be received neither from a brother nor from any other, except for the hope through our Lord Christ expected on account of your prayers (P.Lond. VI 1928, Boughner 1990, 461). ¹³

Very simply, the followers of the monks of Hathor depended on them for benefits, foremost among which were bodily healing and the assurance of salvation. These benefits could only—or most reliably—be bestowed by a living monastic. Thus, the correspondents of Paieous, Paphnutius, and Nepheros exhibit anxiety and concern for the health of their monastic patrons.

The well wishes and anxieties of monastics’ correspondents are distinguishable from the epistolary conventions of contemporary non-monastic letters only by the increased insistence of their worry. Ancient letter writers, Christian and pagan alike, were overwhelmingly concerned with the health or sickness of their correspondents—and for good reason (Barrett-Lennard 1987, 247−48; Förster 2001, 213−22; Bagnall 1993, 186). In a society with little in the way of practical hygiene, and with virtually no concept of preventative medicine, antisepsis, or bacteriology, the mortality rate was frighteningly high; over forty percent died before the age five, and those who survived childhood would be fortunate indeed to see fifty (Bagnall 1993, 182). For inhabitants of the late antique world, the notion of sickness and that of death were inextricable. A sudden death following any disruption of the body (by wound, humoral imbalance, or demonic invasion) was neither uncommon nor unexpected. As Roger Bagnall well states the case,
Death came soon, and it came quickly; sometimes also without any explanation. . . . Unlike the modern belief (reasonable enough today) that most infections are either self-limiting or curable, the ancient expectation was that any illness might end in death without much warning. Probably for this reason ancient letter writers are obsessed with wishes for health, reports on the sender’s health, and inquiries after the health of the recipient (Bagnall 1993, 185).

The ubiquity of wishes for good health in monastic and non-monastic, Christian and non-Christian letters alike might seem a mere formality, but when ancient letter writers express their concern over their correspondents’ health, they mean it (Bagnall 1993, 185).

The point of all this is to demonstrate that monastic health and sickness were indeed quite significant in the view of the non-monastic followers of Paieous, Paphnutius and Nepheros: it communicated something important. Yet monastic sickness did not apparently communicate the ascetic merit or failing of the monastic. The writers do not delight in the prospect of their Fathers’ expiatory sufferings (as in Jacob of Serugh); nor do they wring their hands in worry at the injustice of their Fathers’ mundane bodily constitution, nor do they betray any belief that “normal” vulnerability to sickness and decay detracts from their sanctity (as among the followers of Dostoevsky’s Zossima). In fact, the followers of the Melitian monastics betray no belief that monastic health differed fundamentally from the precarious health that they experienced in their own bodies. Rather, monastic sickness communicated the non-monastics’ tenuous link to the power of the monastic. The fragility of monastic health and the inescapable imminence of death signified the potential loss of monastic patronage and its many benefits, both tangible and intangible. For these early monastic followers, the health and sickness of a monastic signified a simple and practical concern: their privileged access to the divine was only as secure as the monastic’s own unexceptional health. This would constitute no small anxiety: even hagiographical literature (Athanasius’s famous claim to the contrary) suggests that a good holy man could be quite hard to find.14

*The Writings of Pachomius.*

The second significant corpus of monastic documentation from the 330s and 340s differs in its specific representation of the signifi-
cance of monastic health/sickness, yet confirms that monastic health and sickness were not widely held to signify the ascetic merit or ascetic failings of the monastic. This literature comes from a large group of monastics who rallied around the figure of Pachomius, organizing about the same time as the Melitian monastics of Hathor. Pachomius founded his first monastery sometime after 323 C.E. near the Theban town of Tabenesse (Goehring 1996d, 193; also Rousseau 1985, 58–64). Whether Pachomius influenced the formation of such Melitian coenobia as that of Hathor, or was influenced by them (or whether the systems developed independently) remains an open question (Goehring 1996d, 193–95). Regardless, Pachomius—or at least his biographer—was certainly familiar with the Melitian communities (e.g. VPach. Bo 129=G1 120). And like the archives of the Melitian monastics, Pachomius's writings reflect accepted interpretations of the significance of monastic health and sickness.¹⁵

Pachomius's writings could scarcely differ more from the letters of the Melitians' followers. Generically, the archives of Paieous, Paphnutius, and Nepheros are private documents, while the letters of Pachomius were self-consciously literary, intended as encyclicals for the several monasteries in his federation. Politically, the archives from Hathor represent the Melitian church, while Pachomius—at least in the memory of his biographers—fell firmly behind Athanasian orthodoxy (Bo 28; G1 30, 31; cf. Goehring 1998c). And socially, the letters to the monastics of Hathor represent the attitudes and views, the desires and fears, of non-monastic followers; the Letters of Pachomius reflect monastic self-understanding. The differences between the documents from Hathor and the literature of Pachomius are reflected in the significance attributed to monastic sickness and health therein, although the two corpora share much in common.

The topic of monastic sickness is raised most extensively in his Letter Five. Letter Five is among the more accessible of Pachomius's letters. It is among the longest and most thematically unified, and the letter is also among the few to avoid Pachomius’s vexing use of the religiously significant ciphers that dominate most of his letters (Joest 2002; Joest 1996; Joest 1992, 3–10; Wisse 1979).

The occasion for Pachomius’s letter, addressed as an encyclical to the monastics, is the annual Easter celebration at Pachomius's home monastery of Pbow. The Easter gathering posed a significant organizational challenge for the Pachomians: all monastics (as many as three
thousand) were to travel to Pbow—a journey of over one hundred kilometers for some. The logistics of the pilgrimage were daunting. Appropriate transportation had to be secured; shelter and food had to be prepared for the influx of monastics; and hospitable arrangements also needed to be augmented for an increased holiday volume of non-monastic pilgrims. Travel outside the coenobium was always problematic and entailed special arrangements for transportation, food, and accommodation, as well as special behavioral guidelines for reentering the coenobium (e.g. Praecepta 56, 57, 63, 64, 84, 86, 118). The celebration of Easter, highlighted by sermons by the Father himself—not to mention a break from the routines of monastic life—was greatly anticipated by the Pachomians. The Easter celebration was also one of the biannual occasions on which Pachomius assigned leadership positions throughout the federated monasteries (VPach. GI 83, 122; Rousseau 1985, 74–75). It is in this occasional and preparatory context that Pachomius raises the issue of monastic sickness and health.

The letter constitutes a series of instructions to his spiritual children for the celebration to come. The instruction is quintessentially Pachomian. He eschews the specific formulation of rules, and instead limits himself to a recitation of scriptural passages, a call to the emulation of the saints of Christian memory, primarily the patriarchs of the Old Testament. Thus, Pachomius offers general moral guidance, providing few specific instructions for the feast. Primarily, Pachomius exhorts his children to the virtues of obedience to superiors, kindness to others, and mutual aid, the foundational monastic precepts of Pachomius's system (Rousseau 1985, 65–67, 98-99, 101–102). As Noah obeyed God's commands, Pachomius says, so too should they. Remembering the examples of the disobedient Canaan and Esau, monastics should obey their spiritual fathers. And as the Apostle commands, the brethren should “bear one another's burdens” (Ep. 5.11, citing Gal 6:2 [Veilleux 1982, 66]).

In this rhetorical line Pachomius urges his children to care for the sick monastics among them: “When you come to us [for the Easter feast], take care to make the bed of the sick and not to be short of bread, and also, if possible, to find a pillow or a head-cushion, so that those who are weak may rest” (Ep. 5.2 [tr. Veilleux 1982, 63]). Pachomius justifies the care for the sick, as is common in his social teachings, as a necessary fulfillment of the scriptures, at least as Pachomius interprets them. He explains: “This [care for the sick] is to
fulfill the warning left to us in writing: ‘Anyone who does not look after his own relations, especially if they are living with him, is worse than an unbeliever’” (Ep. 5.2, citing 1 Tim. 5:8 [tr. Veilleux 1982, 63]).

Pachomius’s discussion of the sickness and health of monastics must be understood in the context of Pachomius’s overriding interest in forming “a community built upon mutual respect and mutual support” (Rousseau 1985, 66). More specifically, Pachomius intended the monastery to act as a surrogate for the biological family or household, the only reliable source for the necessities of life in antiquity. Although they lived among virtual strangers, monastics were expected to live as a family, providing all the supports that biological kin normally would: food, shelter, clothing, emotional support, and health care (Crislip 2005, 55–67; Krawiec 2002, 20–27; also Krawiec 2003). A call to mutual aid undergirds all of Pachomius’s writings, and indeed characterizes the memory of him as preserved in his Lives. In the other passages in which Pachomius draws attention to the sickness and health of monastics, it is likewise in the broader context of the exhortation to mutual assistance (Ep. 5.11, 3.3).

The context of Pachomius’s correspondence—the obedient provision of mutual aid to fellow monastics—indicates the significance of monastic sickness, and indeed it was particularly significant. In fact, the exhortation to care for the sick is the only specific administrative instruction in the fifth Letter. Why such interest in the care of the sick? Very simply, care for the sick posed the greatest risk for monastics to fail in their obligations to care for their fellow monastics—especially in the context of the Easter celebration that is the focus of Letter Five. All the monastics were to leave en masse for Pbow for at least three days, including travel time and the proceedings itself, at least, that is to say, all the healthy monastics. In accordance with what would become standard practice in Pachomian monasteries, the sick were excused from requirements of worship, diet, and manual labor, and were left to rest and recuperate. In the preparations for travel and during the feast, Pachomius assumed that those left behind were at risk of neglect. That this was indeed a risk during occasions of collective travel is confirmed by the later Rules, attributed to the Father himself but actually a later accretion, which mandate that an officer—here identified as a minister (aegrotatum), a “nurse”—remain behind with any sick monastic during funerals, the most common occasion for all monastics to travel outside the monastery en masse.
This later regulation responds to just such a situation as that to which Pachomius directed his early attention. But in the absence of such a regulation, Pachomius's admonition serves as a simple reminder to provide for those left behind. Monastic sickness thus signifies both an opportunity for monastics to perform acts of mutual aid, and a risk to that obligation, a chance for monastics—intentionally or not—to ignore the bodily needs of their brethren. Monastic sickness also bears an eschatological significance for Pachomius, as he contemplates the potential negligence of his spiritual children: in neglecting the sick the monastics risk their immortal soul. But by caring for the afflicted they may yet share in their reward in the cosmic reversal of fortunes to come. He writes,

Let us toil, "carrying each other's burden," as Christ "carried our diseases in his body" without flinching. If Christ is our master, then let us imitate him and bear his injuries, lest in the age to come we be separated from our brothers who suffered afflictions (Ep. 5.11, Veilleux 1982, 66, quoting Gal 6:2, Isa 53:4, Matt 8:17).

The presence of sick monastics in the koinonia thus acted as a crucible to separate the worthy monastics from the unworthy; it provided an opportunity for monastics to enact the highest ideal of Pachomian monasticism—the Christ-inspired provision of mutual support. It also represented a dangerous opportunity for monastics to fail in that duty.

It is not surprising that the Letters of Pachomius reflect different concerns from those of the letters to Melitian monastics. Yet, it is worth noting what monastic sickness does not signify in Pachomius's writings. Neither health nor its deficiency is regarded to signify the moral status of the monastic. Sickness is not symptomatic of general or specific debaucheries, or of a "sickness of the soul." The sickness of a monastic is not taken as controversial, or inappropriate to asceticism. Rather, Pachomius's interest in monastic sickness lies not in the behavior of the sick or in the interpretation of the moral significance of sickness, but in the specific difficulties posed for the provision of mutual aid among the monastics. Monastic sickness warns of the moral precariousness of the healthy, rather than signifying the ascetic merits or failures of the sufferer.
II. Athanasius of Alexandria: Health and Ascetic Merit

Athanasius’s composition of the *Life of Antony* (ca. 356–360) marks a watershed in the history of monasticism: the birth of a popular literature of monasticism. The *Life* marks the first literary work intended to educate the non-monastic public about monasticism, an educative process also intended to entertain and edify. The monastic *bios* would become one of the most popular forms of literature in late antiquity (Kannengiesser 1995, 490–91; Williams 1982, 23). In short order Athanasius’s Antony would assume the role of exemplar in monastic mythology, and his *Life* would become the template for later hagiography.

It is now accepted that the Antony of the *Life* represents Athanasius’s own distinctive construction of Antony, one that probably shares little in common with the literate, possibly Origenist monastic that Antony himself presents in his *Letters* (Brakke 1995, 203–16; Rubenson 1995). Athanasius himself had little interaction with Antony, perhaps meeting him only once (Brakke 1995, 204–206). Athanasius himself admits that he went to no great effort to speak with those who lived and labored with the great monk, desiring rather to send the *Life* out for publication quickly, before the close of the sailing season (*Vit. Ant.* Introduction [Gregg 1980, 30]). His urgency thus precluded further background research. Athanasius constructed his Antony both as “correction” to the representations encouraged by other monastic storytellers and as “rule” or “guide”: a model for imitation and a rubric against which the asceticism and orthodoxy of other monastics could be judged (especially his rivals, the Melitians and “Arians”). In this model of the normative monastic, health and sickness first take a special position as signifiers of ascetic merit.

Athanasius betrays some concern in the *Life* that his claims about the special significance of monastic health—not to mention the other wonders of Antony’s career—might be difficult to accept as anything other than a tall tale. Athanasius responds by downplaying the exceptionality of Antony’s exploits. In fact, he claims that the ascetic feats described therein represent only a small sampling of his virtues. He urges his readers, “Do not be incredulous about what you hear of him from those who make reports [i.e. Athanasius]. Consider, rather, that
from them only a few of his feats have been learned, for these hardly
gave full description of so much” (Vit. Ant. Introduction [Gregg 1980,
30]). The events described in the Life, Athanasius swears, are true:
“In every instance I kept my mind fixed on the truth, lest someone
disbelieve because he heard too much, or lest, on the contrary, learn-
ing less than he ought to, he regard the man with contempt” (Vit. Ant.
Introduction [Gregg 1980, 30]). Any possible incredulity notwith-
standing, Athanasius encourages his readers to equal or surpass
(parisoomai, hyperballō) Antony (Vit. Ant. Introduction [Bartelink
1994, 124]). And Athanasius’s contemporaries, such as Gregory of
Nazianzus (Or. 21.5.6–7), understood the Life to be a rule, no less
than any coenobitic regula. So Athanasius writes, “Antony’s way of life
provides monks with a sufficient picture for ascetic practice” (Vit. Ant.
Introduction [Gregg 1980, 29]). He also urges, “[R]ead these things
now to the other brothers so that they may learn what the life of the
monks ought to be” (Vit. Ant. 94 [Gregg 1980, 99, emphasis added]).

The details of the Life are familiar enough that there is little need
for a detailed summary. Suffice it to say that Athanasius presents
Antony as enduring a harsh and unrelenting askēsis. The particulars
of his self-mortifications would become the boilerplate of hagiographic
narrative. He ate at most once daily, but usually no more than two to
three times a week. He subsisted almost exclusively on bread and
water, avoiding oil, wine and meat entirely. And he neglected personal
hygiene and slept little, and then only on the ground (Vit. Ant. 7
[Gregg 1980, 36]). His askēsis was so severe that he nearly died (Vit.
Ant. 8 [Gregg 1980, 37]).

Yet significantly Athanasius insists that Antony’s regimen did not
harm the body irreparably. Quite to the contrary, his ascetic privations
“strengthened” (ischuō) the “intensity” or “force” (tonos) of the soul
(Vit. Ant. 7 [Gregg 1980, 36]). Dialectically, his strengthened soul in
turn influenced his bodily health. Thus, after undergoing torment and
pain from Satan and his zoomorphic demons, Antony is rewarded
with renewed health: “The pain of his body ceased,” and once again
he breathed “easily” and was “relieved of the sufferings” (Vit. Ant. 10
[Gregg 1980, 39]).19 The ascetic regimen did not merely return
Antony to his formerly healthy state, it left him transformed, physi-

cally enhanced: “He was so strengthened that he felt that his body
contained more might than before” (Vit. Ant. 10 [Gregg 1980, 39]).
His health, in Athanasius’s description, manifests the internal state of
his soul. It bears witness to his ascetic merit, having endured tortures that would have broken a lesser man. And it signifies him as one of God’s protected, for whom God interceded and whom God imbibed with exceptional power and strength, in both body and soul.

Athanasius’s insistence on the dialectical influence of body and soul reflects ancient physiological and medical theory. The use of tonos as a psychic attribute, with its semantics of stretching, tensing, bracing, and strengthening, reflects the fact that the ancient Greeks, Romans, and Egyptians had none of the modern Cartesian duality of material body and immaterial soul (Martin 1995, 7-15; Singer 1997, xxxvi-xxxix). Rather, the soul was “material” (physikē) too, just of a finer sort of “stuff” (Martin 1995, 8). And body and soul impinged upon each other: psychic illness could lead to bodily dysfunction, just as bodily illness necessarily affected the health of the soul (e.g., Galen, The Soul’s Dependence on the Body). Thus Athanasius reflects a commonplace understanding (at least among the educated) of human physiology when he describes Antony’s soul as a material substance, a sort of muscle or tendon, to be conditioned and exercised by askēsis.

The dialectical influence of soul and body, appropriately, may be observed in both directions, as Athanasius explains in the fragmentary treatise On Sickness and Health. Here Athanasius emphasizes the soul as a signifier of bodily virtues. He writes,

In short, lest I linger making clear the particulars, one must know that the body is composed of members, but the inner person is not composed of bodily members, but rather possesses the significance of the members’ actions. Thus, the soul’s progress toward virtue is the feet, and the accuracy of its reflections is the hands, and the clear-sighted mind is the eye, and the discrimination of thoughts is the tongue itself. And it is said to have even a womb, so that the productive capacity of thought itself might be made manifest, as it is written, ‘From fear of you, we have conceived, and been in labour, and given birth to a spirit of salvation, which we have wrought upon the earth’ (Fragment A, 4 [Brakke 1995, 311]).

But it is the body’s signification of the monastic’s ascetic merit (i.e., the state of his soul) that occupies the central role in Athanasius’s Life of Antony. In fact, Antony’s physical appearance, viz. his remarkable health, is a central component of Athanasius’s ascetic theology. Antony, whose soul is guided by the divine Logos, brings his flesh under control,
subjugating it to the soul (Brakke 1995, 243–44). The primary sign of this is that Antony has transcended the mundane susceptibility to illness of other monastics, and is himself a corpus incorruptum.

Such extraordinary health is emphasized in Antony’s emergence from his desert tomb after twenty years of solitude. This public debut, as the Life presents it, was quite against Antony’s will. In the previous twenty years Antony’s reputation had grown steadily, fed by the reports of the visitors who had occasionally glimpsed the hermit through the cracks in the doorjamb, and heard the sounds of wild animals and corporeal struggle. His followers, burning with desire to imitate the anchorite, “came and tore down and forcefully removed the fortress door” to fully behold Antony for the first time in two decades. Antony’s appearance leaves them stunned:

Antony came forth as though from some shrine, having been led into divine mysteries and inspired by God. . . . And when they beheld him, they were amazed to see that his body had maintained its former condition, neither fat from lack of exercise, nor emaciated from fasting and combat with demons, but was just as they had known him prior to his withdrawal (Vit. Ant. 14 [Gregg 1980, 42]).

It has been well established that the presentation of Antony’s health in this passage concords nicely with Athanasius’s theology. Antony’s bodily and psychic equilibrium is an expression of his guidance by the Word of God. As Brakke argues, “Antony’s soul has recovered its likeness to the Word and, as a result, has regained proper control over the body” (Brakke 1995, 243). The “proper control over the body” is signified in both Antony’s exceptional health and his ability to help others, through healing, exorcism and instruction. His equilibrium also endows him with an exceptionally long life. The remarkable health witnessed at his emergence from the tomb held throughout his life, because of his steadfast adherence to strict asceticism, which, according to Athanasius, he kept unabated until his death. Athanasius delineates precise external signs of the healthful soul. He claims that

[Antony] never succumbed, due to old age, to extravagance in food, nor did he change his mode of dress because of frailty of the body, nor even bathe his feet with water, and yet in every way he remained free of injury. For he possessed eyes undimmed and sound, and saw clearly. He lost none of his teeth—they simply had been worn to
the gums because of the old man’s great age. He also retained health in his feet and hands, and generally he seemed brighter and of more energetic strength than those who make use of baths and a variety of foods and clothing. [Vit. Ant. 93 [Gregg 1980, 98]].

Such health was remarkable, a wonder to behold, and apparently not at all what his followers had expected.

A brief comparison to the significant corpora of monastic evidence from the two generations before Athanasius’s Life of Antony shows how striking the Antony of Athanasius must have been. Gone are the mundane references to monastic sickness and health that characterize the attitudes of both Pachomius and the followers of the Melitian monastics. Gone is the unreflective sense that monastics, even powerful and righteous ones, were subject to the same ravages of injury and illness that their non-monastic followers endured. Absent is any notion of monastic sickness as an unquestioned, everyday occurrence, even if one that could pose (in the case of Pachomius’s writings) special administrative challenges. In the stead of these early representations of the significance of monastic sickness and health, Athanasius transforms the health of the monastic into one of the clearest signifiers of monastic virtue. Through the endurance of extreme asceticism Antony is endowed with strength and bodily health exceeding that which he enjoyed before entering the ascetic contest. Antony’s health is one of the primary signs to his followers of the state of his soul. Consequently, his fame and the marvel of his extraordinary health provide indisputable “proof of his virtue” (Vit. Ant. 93 [Gregg 1980, 98]).

It is worth noting that Athanasius’s narrative critiques the popular notions of monastic health and sickness, especially as evidenced in the correspondence of the followers of the Melitians. In fact, the mistaken expectations of Antony’s followers are the same as those of the followers of the Melitians monastics. While they revere the monastics as ascetics, and thus endowed with charismatic powers of healing, forgiving sins, and prophecy (for visions, see P.Lond. VI 1926), the Melitian suppliants never express an expectation that the monastic’s ascetic merit will manifest in extraordinary health. Rather, as shown above, the Melitians express concern throughout at the fragility of their spiritual patrons’ health. Athanasius projects such a view on the gaggle of onlookers who witness Antony’s emergence from
his tomb: they are stunned at the sight of Antony’s perfectly healthy body, healthy even after twenty years of ascetic privations. Athanasius sets up Antony’s followers as dupes—they have failed to grasp the true significances of monastic life. Perhaps used to the spiritual patrons so popular in the Melitian church they fully expected Antony’s body to be wracked by his extreme ascetic regimen. Athanasius corrects this mistaken assumption: the true monastic, the orthodox monastic, is imbued with a health different from the ordinary mortal. So, the onlookers discover that the visible, external, bodily health of the orthodox monastic signifies the internal state of the soul. If the monastic, such as Antony, succeeds in his ascetic exercises his soul will be toned as an athlete’s muscles, neither tight nor relaxed but at an ideal state of control and flexibility. The monastic’s success in conditioning his or her soul will then be reflected externally in the state of the body, which naturally will be healthy due to the perfect balance or equilibrium. The health of the monastic thus offers the observer a window into the soul of the monastic, and an indication of his or her ascetic merit.

III. Illness and Ascetic Merit after Athanasius

There is little need to argue the influence of Athanasius’s *Life of Antony* on the worldview of late antique Christians. The *Life* circulated widely, and was quickly translated into Latin and the other languages of the Near East and Mediterranean. It established the primary template for later monastic biographies (Kanngiesser 1994, 486). The monastic whose sanctity manifests in extraordinary health would become in short order the model upon which later hagiographers developed their own pious fictions. Jerome’s *Life of Paul of Thebes* stands out in this regard, both in the explicitness of its dependence upon the *Life of Antony* and in its own popularity. Everyone knows the story of Antony, says Jerome, writing in 377, some twenty years after the publication of the *Life of Antony*. Everyone thinks that Antony was the “first monk to dwell in the desert,” at least “[t]his is the common opinion of the uninformed” (*Vit. Paul.* 1 [Harvey 1990, 360]). Rather, Jerome claims that honor for his own hero, Paul. But ironically, in attempting to undermine Antony’s primacy Jerome adopts his *Life* as the very model of the virtuous ascetic. Jerome’s one-upmanship runs throughout the life; the signification of monastic health and sickness
is no exception. Whereas Antony's ascetic merit allowed him to live to merely 105, Paul lives to 113. Antony's strength of soul allows him to live in full health until his very end; Paul's healthy appearance obtains even further. Even in death, he was so strong as to be virtually indistinguishable from the living Paul:

[When Antony] entered the cave, he saw Paul kneeling, with his head held high and his arms extended to the sky. But the body was lifeless. At first, Antony believed Paul still to be alive and so knelt beside him to join in prayer. But when he heard not even a breath of normal sound from his partner in prayer, Antony embraced and kissed him, wept, and understood that even the corpse of the holy man was praying in appropriate posture to the God for whom all things live. (Vit. Paul. 15 [Harvey 1990, 368]).

Jerome further underscores the hagiographic desirability of good health as a signifier of ascetic merit in his Life of Hilarion, Jerome's legendary founder of Palestinian monasticism. Again in Hilarion's case, his ascetic merit does not cease its physiological effectiveness with the passing of Hilarion's soul. Rather, a mob of his followers in search of relics finds his corpse perfect and undecayed, even after months. In fact his corpse has only become more sweet-smelling over time, exuding a delicate perfume (Vit. Hil. 46).

Just as the Life of Antony became the template for all later hagiography, the Life (as genre) provided the primary means for the dissemination of knowledge about the ascetic life. Non-monastics who were interested in adopting the monastic life could read the Lives as both inspiration and as preparation for the drastic changes in lifestyle that joining a cloister entailed. So, just as Antony was called to the ascetic life by the word of the Gospel, others in turn—such as Augustine of Hippo—became enamored with the ascetic life through the fantastic tales of Antony. In fact, it is through the Life of Antony that Augustine first glimpses the monastic life, in spite of the fact that flesh and blood monastics lived in Milan at the very same time, under the organization of Ambrose the Bishop, no less (Confessions 8.6; Kannengiesser 1995, 485-86). Augustine elsewhere describes the role of the Life of Antony as monastic pedagoge, leading the secular to their first contact with Christian asceticism: some Milanese civil servants, associates of his friend Ponticianus, chanced upon a copy of the Life in a nearby house of "men poor in spirit." "One of them began
to read it and was so fascinated and thrilled by the story that even before he had finished reading he conceived the idea of taking upon himself the same kind of life” (Confessions 8.6 [Pine-Coffin 1961, 167]). Notably, the civil servant does not learn of monasticism from the nearby house of “men poor in spirit,” urban ascetics with whom they apparently had regular social interactions (at least regular enough to enter their house); rather, they pass by these urban ascetics without notice, either as inspiration or model, only to be enlivened by the tales of Antony. Many others, no doubt, were driven to similar worldly renunciations by the Life, regardless of the frequent proximity of flesh and blood monastics. The fantastic, exotic exploits of Antony proved much more attractive to the late antique Christian than the mundane world of village ascetics, whose quotidian arrangements and business transactions are so abundantly documented in fourth-century papyri. There is every indication that the attributes of Antony—such as the moral signification of sickness and health—were widely accepted to be normative, at least in the eyes of those outside the monastery. The Historia Monachorum in Aegypto, a pilgrim’s narrative from a journey to Egypt around 394, shows the widespread acceptance of such monastic attributes among the readers of late antiquity. A belief in monastic physiognomy—the interpretation of external bodily attributes as signifying moral virtues—runs throughout the text (Frank 2000, 134–70; cf. Shaw 1998). Not the least among physiognomical signs is the healthy appearance of the monastic. Pilgrims fully expected monastics to enjoy extraordinary health through their pious asceticism, and describe their journeys in the light of such expectations. So the author of the HMA writes that John of Lycopolis gave no care to the health or maintenance of his body, yet never suffered from exhaustion or ill health (1.45). About a coenobium near Thebes the HMA also reports, “[T]he monks within the walls were such saints that all could work miracles and none of them ever fell ill before he died. On the contrary, when the time came for each to depart, he announced it beforehand to all the others and then lay down and fell asleep” (17 [Russell 1981, 101). The pilgrims thus describe their experiences in the terms of Athanasian hagiography: whole communities may be found where illness no longer exists; virtuous monastics live until the hour of their deaths without suffering or weakness. Their deaths, like those of Antony and Paul, are orderly, painless, and appropriately timed.
This is not to say that the Athanasian model of monastic health was unchallenged in the years following Antony's influential biography. While undoubtedly attractive as a literary motif and theological ideal, such an interpretation of the moral signification of monastic health could not remain entirely unproblematic, inasmuch as holy men and women do fall ill, do die young, and do not always leave behind perfumed, good-looking corpses. Such anomalies demanded explanation.

Post-Athanasian literature is replete with explanations and defenses of the ascetic merit of sick monastics—defenses that monastic literature from early generations apparently felt no need to make. John Chrysostom, for example, addresses just such an issue. Chrysostom acknowledges in any number of sermons that a certain degree of asceticism serves the cause of health: temperance is preferable to drunkenness, frugality to luxuriousness (Musurillo 1956, 17–18). Such rhetoric was as commonplace in the late Roman Empire as it is today. But writing in Antioch in 387, he delivered his first homily On the Statues in response to an emerging difficult question: Why do saints fall ill? Chrysostom takes 1 Tim. 5:23 as inspiration, as Paul encourages Timothy to drink wine for his many infirmities. Why, he asks, voicing his audience's concerns, would God allow such a holy man to fall ill, especially a man whose relics were endowed with healing abilities? Why, he asks, would he even be allowed to suffer such chronic illness? Why did Timothy, if he was so holy a man, not heal himself? And how could a man, upon whom so many of God's people depended, be allowed to suffer so? (Stat. 1.5–7) Chrysostom is at no loss for answers. In fact, there are eight reasons why holy men fall ill: illness prevents the saints from falling prey to vainglory and arrogance; it proves to others that they are indeed human, and not divine (or demonic); it proves that ascetics and saints do not live their lives out of hope for earthly rewards; it may convince others of the reality of the resurrection, since even the holiest of men are not rewarded in this lifetime; it consoles those who have also fallen ill; it prevents followers from being dissuaded from imitating the saints, assuming them to partake of a different physiological nature; and it allows Christians to distinguish between the truly blessed and the cursed (Stat. 1.14ff.).
Palladius, writing around 420 C.E., addresses the same issue in his *Lausiac History*, a record of his life among the ascetics of Lower Egypt in the latter years of the fourth century. Palladius describes in graphic detail two monastics, Apa Benjamin and Apa Stephen, who suffered grotesque and humiliating diseases. Benjamin, Palladius explains, was morally flawless, having “attained the height of ascetic perfection” (*HL* 12.1 [Meyer 1964, 47]). Like Antony, Benjamin was blessed with a long life; he was also granted the charisma of healing as a consequence of his ascetic perfection. But unlike Antony, Benjamin’s undeniable ascetic merit did not manifest in freedom from disease. Rather, he developed dropsy, a painful accumulation of water in his joints and bodily cavities. Benjamin’s body swelled, Palladius claims, so much “that another person’s fingers could not reach around one of his” (12.2 [Meyer 1964, 48]). Benjamin suffered for eight months without comfort. Eventually a special seat had to be constructed for him as he had become so swollen that he could no longer lie down. His death dealt a final indignity: he had swelled so greatly that the door and jambs had to be disassembled simply to remove the saint’s body. Such a painful and humiliating illness and death was hardly congruent with the image of Antony, a contradiction that was not at all lost on Palladius. Writing to an educated non-monastic audience in Constantinople, he assumes that the picture of an ostensibly holy ascetic suffering illness, especially such an extended, gruesome one, would confuse, surprise, or scandalize his audience, surely quite familiar with the commonplace topoi of the traditional monastic *bios*. Palladius concludes with a defense of Benjamin: “I felt that I must tell about this sickness so that we might not be too surprised when some accident befalls just men” (12.3 [Meyer 1964, 48]).

Palladius returns to this theme again as he relates the story of Apa Stephen, who like Benjamin was without fault in his ascetic life, and was similarly granted the charisma of healing. But again Stephen had no special claim on good health because of his ascetic perfection, suffering instead a painful and humiliating illness, indeed an illness that could easily be taken as a sign of immoral living (cf. the profligate monk Heron, *HL* 26.4). Palladius describes with some detail Stephen’s suffering of cancer, progressively eating away his testicles and penis (24.2, *kata tous topous tôn didumôn kai tês balanou*). Stephen’s visitors find him undergoing surgery, the doctor excising the morbid tissue from his genitals “like locks of hair” (24.2 [Meyer 1964, 83]).
Why relate such a graphic story about the holy monastic? Again Palladius explains that his hope is to demonstrate that health is not an essential component of monastic identity and that monastic sickness does not necessarily signify ascetic or moral failing: Palladius himself maintains that without question the monastic was “holy” and “had attained the highest degree of asceticism” (24.3, 24.1 [Meyer 1964, 84, 83]). Again Palladius concludes, “Now I have told you this so that we may not be puzzled when we see holy people falling prey to sickness” (24.3 [Meyer 1964, 84]).

Intra-monastic literature (i.e., intended for a monastic audience) from the later fourth century shows that monastics were deeply concerned with the moral signification of monastic sickness and health. In fact, writers in the wake of the Life of Antony argued in a number of different ways against the Athanasian attempt to link ascetic health physiognomically to the state of the ascetic’s soul. One such critic is Theodore, a later successor to Pachomius. In contrast to Pachomius’s discussion of monastic sickness, which was restricted to the context of the provision of mutual, quasi-familial assistance to one’s monastic brethren, Theodore (d. ca. 368) responds to what is now a widespread problem in the monasteries: monastics are stigmatizing the sick as sinners. Theodore adamantly condemns such a belief that sickness signifies ascetic failures in the monastic:

As for the brothers who are sick, let us not be tormented on their behalf, and let them not be discouraged. The merciful God knows what is advantageous for each one of us and he dispenses remedies as he likes, fashioning men for himself that they may inherit the riches of the Saviour’s kingdom. Let no one among us say, “no doubt it is because he is a very wicked man that these tribulations have fallen on him!” He who will say that to himself does not perhaps yet deserve remedy himself (Theodore, Inst. 3.15 [Veilleux 1982, 101-102]).

Theodore, in another fragmentary passage, again urges his monastics not to “impute sin” to others (Theodore, Inst. 1.1 [Veilleux 1982, 91]). Shenoute, archimandrite of several monastic communities near Atripe (d. ca. 466), addresses the same issue, likewise holding that “it is a great impiety for some to insult people in their sickness” (Canon 4, BZ 26-27=Leipoldt 1908, 127). Elsewhere he speaks of those who scorn the sick:
It is he [God] who will judge anyone who scorns those who are sick among us and among you. . . . But let us also not forget that which was requested for us according to the rules that our fathers established for us . . . which sets our body back on its feet, lest we be scorners of each other before the Lord, for the Lord will scorn us in His presence and in the presence of angels (Canon 3, YB 73, BnF ms.copte 130.2 folio 61 recto).

Basil of Caesarea address a similar concern in his Shorter Rule (RB); monastics assumed that some of their sick brethren had fallen ill because they were indulging in unascetic and unhealth foods, thus failing in their ascetic regimens. Are these sinful sick, his monastics ask, deserving of care, or should they be shunned for their sin? Basil says they deserve care, along with moral instruction (RB 140).

Others reacted more radically to the popularity of Antony's model and the moral signification of monastic sickness and health. Evagrius sees imitation or competition with hagiographical role models—he specifically names Antony—as a potential manifestation of demonic influence; since flesh and blood monastics can but fail in comparison with the great Antony, the demon (either of gluttony or akēdia) prevails by provoking the monastic to flee in shame, and forsake the monastic life (De cogit. 35). Other later writers accepted the basic Athanasian premise of the moral signification of monastic health and sickness, but rejected his focus on monastic health. So, among many examples, the author of the Life of St. Syncletica interprets her lengthy sufferings as the very signs of her sanctity. In such a scheme disease is no longer the sign of sin, but the tool of Satan; in contrast it is the saint's patient resistance to the disease (preferably without medical intervention; cf. V. Syncletica 112) that most clearly signifies her or his ascetic merit. Such a belief in the moral signification of monastic illness would of course exercise a widespread influence in the late antique hagiographic imagination.

The full scope of early monastic discourse on the moral signification of illness and health in the wake of Antonian hagiography is beyond the scope of this essay. My hope, rather, is to point out that the ideal characteristics of the monastic or holy man were by no means inevitable outgrowths of late antiquity piety, no fait accompli; nor were they universally accepted as such by contemporary monastics. The earliest records of Christian monasticism, reflecting both the views of monastics and non-monastics, betray no interest, concern, or
controversy over the moral signification of monastic illness and health. While Pachomius and the followers of the Melitian monastics certainly engage in discourse about the meaning of monastic sickness as a threat either to the monastic imperative for mutual aid or to the monastic's continued spiritual patronage, they show no indication that they believed the health or sickness of a monastic to signify anything about his or her ascetic merit, orthodoxy, or sanctity. Quite to the contrary, in Athanasius's *Life of Antony*, his ascetic merit would come to be signified most visibly in his remarkable health. And while the model of the unfailingly healthy monastic would exercise an undeniable influence on the hagiographic imagination, the moral signification of monastic sickness and health remained contested ground, for centuries in fact, as the monks of Dostoyesky's monastery attest.

**Notes**

1. Interestingly, Meinardus claims that while the cult of the *corpus incorruptum* has a long tradition in the Greek and Latin churches, it is a relatively recent import into Coptic pilgrimage traditions.

2. I cite ancient texts according to the standard modern translations, wherever appropriate.

3. A corollary to such an interpretation of the meaning of monastic sickness is that medical care would be ruled out for the holy man as undermining the very sanctity that the hagiographers had hoped to describe. See Harvey 1984.


5. Alternatively spelled Phathor, Hathyr, and Hathyrti (Kramer and Shelton 1987, 11).

6. Cf. Kramer and Shelton 1987, 15-17, who nonetheless suggest that Hathor (at least in the time of Nepheros) was probably closer to the lavra type of semi-eremitical monasticism, an opinion supported by Haubert. Confusion between the two classifications is not surprising, as differences between the traditional categories were not necessarily strict. For the role of housemaster in coenobitic monasticism, cf. Rousseau 1985, esp. 81-85; Layton 2002, 51-52; Chitty 1995, 25-26.

7. While writing Apa Paphnutius, a certain Valeria greets (*as pazomai*) her daughters Bassiana and Theoclia, *P.Lond.* VI 1926.19-23; most likely the daughters are in the monastery with Paphnutius, although the reason or length of their residence there is unknown.

9. The archives of Paieous and Paphnutius are published in Bell 1924 (P.Lond. VI 1913–1921 [Paieous] and 1923–1929 [Paphnutius]). The archive of Nepheros is published in Kramer and Shelton 1987, 35–83 (P.Neph.). The Melitian affiliation of Hathor in the time of Paieous is clear from his archive, while the Melitian affiliation of Nepheros is argued circumstantially by Kramer and Shelton 1987, 11–14. The Paphnutius archive probably comes from the same community. Bagnall 1993, 308, concludes that the three archives should be understood as representative of the same monastery and of the Melitian church, as does Goehring 1999, 7. For more discussion, see Goehring 1999e, 201–3. Earlier editors were more circumspect about the relationship of Paphnutius to the Melitians; cf. the editio princeps of Bell 1924, 100–3. In the case of more familiar Greek and Greco-Egyptian names I employ the common Latinized forms, e.g., Paphnutius for Paphnouthios, Athanasius for Athanasios.

10. The archive of Paphnutius exclusively preserves such non-monastic letters. That of Paieous includes some intra-monastic correspondence, while that of Nepheros comprises a wider range of documentation: contracts, receipts, and other ephemera.

11. The papyri are notoriously difficult to use as a “random sample” of Egyptian society, as Roger Bagnall points out. While papyri were preserved and discovered by chance, the data they provide is by no means randomized; rather it depends upon a host of conditions, not least of which are the relative infrequency of literacy and the environmental factors that allow for the preservation of written artifacts in certain locales while precluding their preservation in others; see Bagnall 1993, 4–6; Bagnall 1995, 22–29.

12. Also P.Lond. VI 1929.19–21: “May divine Providence keep you healthy for the longest time, always remembering us, beloved, most honored.”

13. The oil in question is holy oil, blessed by the monastic and then sent to the person in need; it was apparently believed efficacious even far from the holy man himself. On such use of oil in healing in late antique Egypt, Barrett-Lennard 1994, 62–66; Barrett-Lennard 1987; Crislip 2005, 24–25.

14. Athanasius claims that by his time, and especially due to the influence of Antony, “the desert was made a city by monks” (Vit. Ant. 14, Gregg 1980, 42–43). Recent scholarship has raised significant doubts about the accuracy of Athanasius’s claim; see Goehring 1999e. The common view of Late Antiquity as heavily populated with “holy men” has also been questioned, for which see Horden 1993. Horden suggests (and I am inclined to accept) that “the Byzantine world did not pullulate with ascetics, that there were
villages complete without a holy man, a resident 'outsider' who would resolve conflicts. I suspect that, despite our best critical efforts, we have in this respect taken the hagiographers too much at their word, and failed to question their recurrent implication that saints were readily available to those in need of therapy" (3-4).

15. The genuine writings of Pachomius comprise eleven letters, along with several fragments of indeterminate genre. None bears a date, but Pachomius is known to have died in 346. The letters are preserved with various numerations in Coptic (Pachomius's native tongue), Greek, and Jerome's Latin translation. The fragments are preserved in an eleventh-century Coptic miscellany. Pachomius's writings are edited in various places: Greek and Coptic texts are edited by Quecke 1975; Jerome's translations are found in Boon 1932; and for the fragments see the edition of Lefort 1956, 26-30.

16. The same concern is shown also for those who have left the monastery, as sudden sickness also threatened those journeying. Thus nurses were expected to accompany monastics wherever they were sent, "in case by chance sickness were to come up by surprise during the journey or in the field" (Pachomius, Praecepta 129).

17. It is additionally possible that the coenobitic offices of nurses or infirmarians—so well-attested in later Pachomian and otherwise coenobitic sources—had not yet fully developed. On nurses and other 'ministers for the sick' see Crislip 2005, 14-18.

18. So Williams 1982, 24: "We can assume that other people might have known of Antony (and other monks) in these terms, and yet Athanasius must have been aware that the fascination in his day with figures such as Antony could take, and was taking, directions which Athanasius perceived to be invalid and dangerous. This assumption can be made both upon the basis of what we are learning about the early history of Christian monasticism and upon the basis of features within the Life of Antony which suggest that Athanasius is engaging in polemical correction of competing traditions," also see 23-26, 34-40; and Brakke 1995, 203-16.

19. Indeed, Athanasius indicates elsewhere in his oeuvre that he intends Antony's ascetic health to be a true model for the ascetic life. As he states explicitly in his more practical text On Virginity, ascetic fasting induces and maintains health: "Consider what fasting accomplishes: it cures disease, dries up bodily humors, casts out demons, drives away evil thoughts, makes the mind clear, the heart pure, and the body holy" (De virginitate 7, Migne PG 28, 260.

20. Athanasius's portrait of the monastic guided by the Word, and thus enabled and dedicated to serve the members of God's community, may be understood as part of Athanasius's ecclesiastical goals of integrating the
monastic movement into the Athanasian orthodox hierarchy centered at Alexandria (Brakke 1995, 244). It also concords nicely with the moral valuations of sickness and health in the Old Testament; see Amundsen and Ferngren 1996, 2945.

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Illness and Ascetic Merit  


