Bán, Katalin

Madness in Seneca's Medea and Celsus's De Medicina

Graeco-Latina Brunensia. 2019, vol. 24, iss. 1, pp. 5-16

ISSN 1803-7402 (print); ISSN 2336-4424 (online)

Stable URL (DOI): https://doi.org/10.5817/GLB2019-1-1

Stable URL (handle): https://hdl.handle.net/11222.digilib/141155

License: CC BY-SA 4.0 International

Access Date: 28. 11. 2024

Version: 20220831

Terms of use: Digital Library of the Faculty of Arts, Masaryk University provides access to digitized documents strictly for personal use, unless otherwise specified.



Madness in Seneca's *Medea* and Celsus's De *Medicina*

Katalin Bán (University of Szeged)

Abstract

According to the Hellenistic *topos*, philosophy is 'medicine' for the soul in order to heal the soul just as medicine is in charge of healing the body. The 'illness' of the soul in need of healing is its passions, that is, its desire, anger, vengeance and fear.

The aim of my study is to examine and compare the different forms, manifestations, causes and treatments of *insania* in Aulus Cornelius Celsus's *De Medicina* and Seneca's *Medea* and prose works *through a text-based* approach. Seneca's tragedies – just as his prose works – display a profound interest in the mental and psychological states of their characters. One of the best examples is *Medea*, which is a drama of passion, madness, and the destructive forces in the soul.

By comparing the tragedy with Celsus's *De Medicina*, a nearly contemporary encyclopaedic prose text on medical theory and practice, I intend to show that philosophical understandings of madness interact at some level with medical ones. Medea's madness is evidently different from the forms of *insania* examined by Celsus, as it is not of the medical variety, since it consists of her anger and desire for revenge, but we can observe connection points in some aspects, such as symptoms and therapeutic tools (e.g. personalized therapy, direct conversation, the importance of self-control, self-reinforcement through direct and encouraging relationships and the concentration of the patient's attention).

Keywords

ancient philosophy; ancient medicine; Seneca; Medea; Celsus

Introduction

The aim of my study is to examine and compare the different forms, symptoms, treatments and therapy of *insania* in Aulus Cornelius Celsus's *De Medicina* and in Seneca's *Medea* in addition to his prose works through a text-based approach. This phenomenon will be studied in medical, philosophical and literary terms, as Seneca is a philosopher, a prose writer and a poet in one person; thus when investigating his tragedy, it is also inevitable to analyse his prose. Seneca's tragedies, his philosophy and the part of Celsus's medical encyclopedia which focuses on the patient's cognitive functioning both investigate the various causes and forms of the suffering and abnormal processes of the mental state, but obviously they do not discuss the same phenomenon. Medea's madness is evidently different from the forms of *insania* examined by Celsus, as it is not of the medical variety, since consists in her anger and desire for revenge, but still we can observe their connection points in some aspects, such as symptoms and therapeutic tools.

"Senecan insania": madness of psychic and physical origin

The tragedy, in order to achieve *catharsis*, often resorted to the phenomenon of *insania*, in Greek *mania*, showing the destructive forces of the human soul and the shocking consequences of their manifestations, which mostly manifests from the pain, loss, shame, anger and revenge of people. The character's mental disorders in mythological tragedies can be explained by both divine intervention and personal responsibility. Being a philosopher at the same time, Seneca puts more emphasis on the character's inner suffering and spiritual struggle in his dramatic works than his Greek predecessors. The main act is not centered around external events but rather around the character's inner, spiritual experiences.

Seneca following the stoic traditions² distinguishes between two types of *insania*, that is, the "usual madness" of those who are in the grip of passions and the madness of those who are medically ill and treated by medical doctors (*insaniam publicam et hanc quae medicis traditur*),³ as the former ones suffer from bodily illness, and the latter ones from false beliefs (*morbo laborat, illa opinionibus falsis*).⁴ Although they are very similar in their symptoms, the two are yet different, caused differently and hence also to be treated

¹ Kosak (2018: pp. 1–2). Kosak in this case mentions the Euripidean Phaedra, Electra and Orestes, and the Sophoclean Heracles and Philoctetes. In addition states that disease affects not only tragic individuals, but also expands to epidemic in cities, which in her opinion disease becomes flexible metaphor (failure of political unity, corruption of leaders, rule of passion over reason).

² Ahonen (2019: p. 7). Stoics made distinction between two kinds of madness, and taught that 'Everybody is mad' (mainesthai). The idea of this 'common madness' of mankind goes back to the Stoic view of virtue and vice. They claim that everyone is 'mad' except the sage, and intended to show the huge gap between our wicked and pitiable lives and the quasi unimaginable sage's entity. The Stoics asserted that the madness of all mankind is a real madness, yet they emphasized that it is not the same as the medical mental illness.

³ Sen. Ep. 94,17.

⁴ Sen. Ep. 94,17.

differently. In the case of madness of bodily origin, the black bile must be treated, while in the case of *insania publica* the fixed errors, such as greed and ambition. Seneca brings Aristo's opinion, since according to Aristo the two types of *insania* are similar, but madmen of both kinds are unable to accept advice and benefit from it; and in his opinion *insania publica* can be healed only by an all-encompassing philosophical therapy and knowledge, similarly to the medical madness that can be cured by the treatment of purgative drugs.⁵ Seneca disagrees with this, declaring that madmen of both kinds can benefit from advice.⁶ He promotes changing our beliefs and values according to the Stoic philosophy, which is the medicine of the soul. Thus he accepts the doctrine of all mankind's madness, but also refers to the distinction from medical mental illness in *De beneficiis: insanire omnes dicimus, nec omnes curamus elleboro; his ipsis, quos vocamus insanos, et suffragium et iuris dictionem committimus*.⁷ However there is a clear distinction, yet both affect the person in a similar way, as he or she is unable to accept rational argument, advice.

As a Stoic philosopher, Seneca depicts *insania publica* in passions, especially in anger and revenge which arise from it. Stoics many times described passions as "flutterings" (*ptoia*). Due to passions the soul moves in various directions, which is an abnormal condition, since it should go in one direction only.⁸ A soul agitated by passions goes into overdrive, and cannot stop in a moment.⁹ Such destructive passions can cause serious conditions, and according to Seneca they are "objectionable impulses of the spirit, sudden and vehement; they have come so often, and so little attention has been paid to them, that they have caused a state of disease (*morbus*)..." ¹⁰

Seneca's *Medea*, which processes the mythological story following Euripides, is a drama of anger, passion, madness and destructive forces in the soul, hence is obviously different from medical *insania* in terms of cause and treatment, although we can find similarities in the case of symptoms and therapeutic tools. Medea is characterized by a high degree of self-consciousness, her monologues reveal the destructive power of passions, but she is not able to resist them. Medea already at the beginning of the drama refers to

⁵ Sen. Ep. 94,17.

⁶ Sen. Ep. 94,35.

⁷ Sen. Ben. 2, 35, 2.

⁸ Ahonen (2014: p. 127). Ahonen describes and compares mainly Stobaeus's, Diogenes Laertius's, Chrysippus's, Cicero's, Seneca's and Galen's opinion about the destructive nature of passions, the importance of hegemonikon and also individual inclinations towards passions.

Generally, in stoic philosophy emotions are fully part of the human psyche, not emerged a subordinate and extraneous soul-part, but by nature, and are manifested in our actions.

Gal. *Hipp. et Plat.* 4. 2. 14–18: According to Chrysippus, something similar to running happens in the human soul in the grip of passions, because if the natural driving force suddenly increases and it is more than necessary, then the soul can have surprising and unpredictable manifestations, and consequently one can act in strange ways. Thus, the driving force is necessary as long as one's common sense and emotions can function optimally. In this model, a conscious decision of the person is made when he or she starts to run, but during running he or she cannot stop in a moment. For Chrysippus, Medea is not a monster, but a person who has lost control – as the man in the state of ἀκρασία in the running model. Therefore, in his view, the conflict is not between the two separate parts of the soul but in the mind itself, whose unified psyche in some way gets involved in the situation in two aspects.

¹⁰ Sen. Ep. 75, 11–12. Translated by R. M. Gummere (2011).

herself with the term of *insania* as soon as she becomes aware of Jason's wedding: *incerta* vecors mente non sana feror.¹¹

In *De ira*, anger is called "short madness" (*brevem insaniam*), the man in the state of anger is unable to have self-control, splits the threads of his most intimate relationships, and in his words: *ruinis simillima quae super id quod oppressere franguntur*. ¹² The same thing happens to Medea, who, while being aware of acting wrongly with her *ratio* is distorted by anger, surrenders her temper, becomes isolated in a psychological sense, severely cuts the threads of her most important human relationships, and though suffering herself too, her vengeance overcomes her human feelings.

Medical background and Celsus's insania

During the 6–5 century BC, the religious, philosophical and rational-scientific approaches were present at the same time, which relied on observations and accumulated experiences. In later centuries, the *mania / insania* studied from medical and philosophical aspects became more and more distant from each other, as one approached the phenomenon mainly from an organic and medical point of view, while the other one rather from ethical side. At the same time, there are parallels in the period considered, which presuppose a link, a complex, but obscure relationship. Philosophy and medicine, although separate disciplines, jointly formed the area of ancient "psychopathology". Is

The medical literature of the era was largely determined by the descriptions of Greek predecessors. In most cases, the antique medical literature does not separate mental illnesses explicitly from the rest, for them all medical phenomena have bodily origin, thus their systematization was related to this phenomenon. However, many disorders have been described with mental symptoms such as delusions, hallucinations, irrational emotional eruptions, etc.

Hippocratic physicians were the first ones who tried to put mental illnesses into a system, to diagnose them and to explain that they do not have supernatural causes. ¹⁷ Explanations of psychological illnesses are materialistic, and separating the philosophy from

¹¹ Sen. Med. 123.

¹² Sen. Ir. 1, 2.

We know about many early philosophers and physicians, such as Alcmaeon, Empedocles and Democritus, who, besides healing, also studied the nature of things. See more Pigeaud (1981: pp. 455–470).

¹⁴ Thumiger & Singer (2018: p. 24). The authors claim that this complexity and obscurity existed due to the category of psyche is used to denote two different types of 'disease', the ethical and the medical. In addition, there is no clear categorization of illnesses in relation to psyche, the treatments sometimes could be environmental, interactive, cognitive, which can be interpreted as psychic or ethical diseases.

^{15 &}quot;Philosophical therapy" is manifested in various genres, and flourishes mainly during the Hellenistic and Post-Hellenistic period, of course, inspired by former influential thinkers such as Plato and Aristotle. E.g. Chrysippus, Philodemus, Lucretius, Cicero, Seneca, Plutarch, Galen, Epictetus, Marcus Aurelius.

¹⁶ For example, chronic or acute, which part of the body is affected, etc.

¹⁷ Hp. Morb. Sacr. 1, 1. The Hippocratic On the Sacred Disease totally refused the supernatural agency in the case of epilepsy and refute the obviously ubiquitous magicians and quack doctors.

medicine, saying that the latter approaches the diseases from an organic point of view.¹⁸ They collected and examined various symptoms of these mental disturbations, focusing on observation and recording the characteristics of abnormal behaviour.

Celsus is the first Latin medical specialist writer who organizes mental illnesses from a taxonomic point of view and fills the gap after Hellenistic medicine, as he has preserved a lot of data from the lost or fragmented Hellenistic medical literature. ¹⁹ In addition, he is the first one who divides *insania* into three parts: the first is *phrenitis*, the second is *melancholia*, and the third is equivalent to the Greek *mania*. However, the last one was not named by him. He distinguishes between two kinds of this latter madness: some patients suffer from hallucinations (*imagines*), and some are mentally deranged (*animo desipere*). This kind of madness is the longest-lasting category, while *phrenitis* is acute and *melancholia* is somewhere between the two in terms of duration. ²⁰ Following Hippocratic medicine, he explains pathological mental states by the disturbance in the balance of bodily humours and the result of a feverish condition. ²¹

Since Celsus's encyclopedia is the only comprehensive work in Latin medical literature, and he is more or less Seneca's contemporary, it would be worth exploring and comparing the two authors' views about *insania*, the different forms, symptoms, causes and possible therapies of the phenomenon, including the terminological aspect.

The issue of *ratio*, irrationality, personal responsibility, self-consciousness, self-control are all parts of Seneca's poetic, philosophical and Celsus's medical mindset. At the same time, I would like to emphasize that the psychotherapeutic approaches are only auxiliary measures for Celsus, as *insania* is a physical, bodily condition in his opinion. In most cases, he emphasizes the importance of contemporary medical procedures and suggests that the patients' cognitive functioning should be enhanced by various types of measures such as blood-letting, use of purgatives, regimen, fomentation and even certain tortures as starvation, fetters, flogging and keeping the patient in complete darkness or lightness.²² In addition, Celsus recommends fatiguing physical exercise, massage, personalized therapy, direct conversation between a patient and a doctor, and even after the mind "has returned" the change of environment and travelling once a year, which serves as a preventive medical prescription. In spite of their physical nature, the latter recommendations obviously mean "taming" the madman rather than achieving any physical change. Thus, it seems that Celsus presents madness sometimes also as a psychological condition, but in most cases, psychotherapeutic devices do not play a primary role in his work.

¹⁸ Thumiger & Singer (2018: p. 23). Hippocratic physicians explained the phenomenon of all illnesses, including mental illnesses, with the overturning of bodily fluids, a theory which, although with changes, remained in medicine for a long time. See more Jouanna (2012: pp. 335–360).

¹⁹ Celsus was called as the Cicero of physicians (*Cicero medicorum*). Langslow (2000: p. 121) in his book claims that Celsus is more a Latinizer than a Hellenizer, he replaces with Latin equivalents more Greek words than he borrows and shows restriction in his use of Greek terminology.

²⁰ Cels. 3, 18, 1-21.

²¹ Cels. 3, 18, 17.

²² Cels. 3, 18, 1-21.

Common symptoms of insania in Seneca's and Celsus's works

Celsus mentions the duality of rationality and irrationality within the category of *insania* by examining the phenomenon of *phrenitis*. According to his description, a man in the state of *insania* behaves completely irrationally, but when he wants to get rid of his "shackles", his mind/*ratio* suddenly overcomes irrationality, but Celsus warns us not to believe in this impression.²³ We can observe this symptom in Seneca's *Medea* when Creo gets trapped by the woman during their conversation. Medea provides rational arguments in order to win one day, begs and touches Creo's heart, and this will be the king's destiny. Although Creo suspects that the woman asks for time to commit a crime,²⁴ he lets her plead and gives her the delay. In Celsus's case the term of *dolus*, in Seneca's the term of *fraus* represents the person in the condition of *insania*, in whose begging, the appearance of the rationality is a trap.²⁵

In Celsus's description, the patient's behaviour often changes, sometimes laughs or is sad without reason, ²⁶ and he thinks that this symptom can be a characteristic of *insania*. In Seneca's *Medea*, this phenomenon is clearly reflected in the nurse's description. In her opinion the signs of Medea's madness are clear: once she laughs and exclaims, and at other times her eyes are brimming with tears, and then she suddenly laughs again.²⁷ Seneca presents the woman as the opposite of the Stoic tranquillity, who, although by anguish and spiritual conflicts, allows passions to triumph and chooses destruction.

According to Celsus, real *insania* develops when there is *continua dementia*,²⁸ that is to say, the patient is completely immersed in his irrational imaginations (*vanas imagines*) and becomes dependent on them.²⁹ In this case, the person speaks irrationally, completely under the influence of madness and in distinction from mere passing fever delirium.³⁰

Medea is absolutely immersed in her anger, vengeance and "imaginations",³¹ and though driven by passions, does not commit the crime by *impetus*, but in the state of full consciousness that her deed is wrong, surrenders herself to the destructive forces in her soul. In Seneca's prose, we can also observe connection points between "imaginations" and madness. In his opinion disturbed people are being chased by "false dream images"

²³ Cels. 3, 18, 3-5: Neque credendum est, si vinctus aliqui, dum levari vinculis cupit, quamvis prudenter et miserabiliter loquitur, quoniam is dolus insanientis est... speciem sanitatis in captandis malorum operum occasionibus praebent, sed exitu deprenduntur.

²⁴ Sen. Med. 290: Fraudibus tempus petis.

²⁵ The same phenomenon can be found in Euripides'drama.

²⁶ Cels. 3, 18, 22: ipse sine causa subinde rideat, an maestus demissusque sit.

²⁷ Sen. Med. 388–389: proclamat, oculos uberi fletu rigat/renidet. Seneca elsewhere (e.g. Vit. Beat. 12, 1) mentions also this phenomenon, when a person's frenzy state burst out in laughter.

²⁸ Cels. 3, 18, 3.

²⁹ Cels. 3, 18, 3: Phrenesis vero tum demum est, cum continua dementia esse incipit, cum aeger, quamvis adhuc sapiat, tamen quasdam vanas imagines accipit: perfecta est, ubi mens illis imaginibus addicta est.

³⁰ Cels. 3, 18, 2: interdum in accessione aegros desipere et loqui aliena.

³¹ There are a lot of references to this, e.g. Sen. Med. 40: Per viscera ipsa quaere supplicio viam; 46–48: tremenda caelo pariter ac terris mala / mens intus agitat: vulnera et caedem et vagum / funus per artus.

(falsae imagines),³² which is the symptom of madness, because treating dream images as real is a disease. They "do not put themselves in motion without any hope: they are excited by the outward appearance of something, and their crazy mind cannot see its futility".³³

In this regard, we can mention Medea's imagination when Absyrtus's figure appears and calls for revenge. 34

Common treatment methods of *insania* in Seneca's and Celsus's works

In Celsus's and Seneca's works, we can observe separate medical and philosophical interpretations of the heated, feverish state. Although they do not discuss the same phenomenon, especially in the case of Celsus's description about *phrenitis*, the treatment methods may well be similar. According to Celsus, the feverish state is an integral part of *phrenitis*, which has to be alleviated by various treatments. However, it matters how various treatments are used: all kinds of medications are ineffective when *furor* reaches its top, as the fever also increases proportionately. Celsus quotes Asclepiades, who says that it is necessary to let *phrenitis* and the fever which accompanies it go up to the top, and *sanguinem mitti ac si trucidentur*, that is to say let the person burn in the fever, because the condition is uncontrollable and it can be cured only in the remission phase.

Seneca writes about this method in the same manner in the case of anger: you should not treat anger immediately with persuasion, because anger is deaf and frenzied at this time (*surda est et amens*)³⁹ and let him get time to pass over it, that is, he thinks that the starting disease can mostly be cured by tranquillity.⁴⁰

Seneca characterizes Medea's *insania/furor* with the rising of her body temperature and the signs of fever many times. ⁴¹ In the *De ira*, he explains in detail the characteristics of a man who has become angry, which are similar to the symptoms of high fever: a flaming face, shaking hands, burning eyes, trembling lips, wheezing, the convulsion of limbs, etc. ⁴²

³² Sen. Tranq. 12,5: Non industria inquietos, ut insanos falsae rerum imagines agitant.

³³ Sen. Tranq. 12,5: ne illi quidem sine aliqua spe mouentur; proritat illos alicuius rei species, cuius uanitatem capta mens non coarguit. Translated by D. Stevenson & A. Stewart (2015).

³⁴ Sen. Med. 963-964: cuius umbra dispersis uenit/incerta membris? frater est, poenas petit.

³⁵ Cels. 3, 18, 1: Incipiam ab insania, primamque huius ipsius partem adgrediar, quae et acuta et in febre est: φρένησιν Graeci appellant.

³⁶ Cels. 3, 18, 6: Remedia vero adhibere, ubi maxime furor urget, supervacuum est: simul enim febris quoque increscit.

³⁷ Cels. 3, 18, 6.

³⁸ Cels. 3, 18, 6: rationem hanc secutus, quod neque insania esset, nisi febre intenta, neque sanguis nisi in remissione eius recte mitteretur.

³⁹ Sen. Ir. 3, 39.

⁴⁰ Sen. Ir. 3, 39: dabimus illi spatium (...) initia morborum quies curat.

⁴¹ Sen. Med. 387: flammata facies; 858: flagrant genae rubentes.

⁴² Sen. Ir. 1, 2: (...) audax et minax vultus, tristis frons, torva facies, citatus gradus, inquietae manus, color versus, cre-

In this case, the person is unable to follow his own rational thinking, and passions take control over his rationality. The nurse in her frightened speech describes the woman's madness as it grows, firing her blood.⁴³ Later, when both infanticides occur, Medea herself says that she could not provide more sacrifices to her anger (*plura non habui, dolor*),⁴⁴ that is to say, her *insania* through her vengeance has entered into the phase of calmness, and no one could stop her until that point.

Celsus writes about the need for the restoration of self-control in the third and chronic type of *insania*. In his opinion, it is very important to apply techniques in order to increase the patient's attention, concentration and self-control, such as the practice of memorization.⁴⁵ In this way, we can steer him away from his *imagines* step by step, and help him understand what is happening around him, what he is doing. Celsus, beyond the therapy of mental illness, has also promoted the importance of self-control in general. According to him, if the patient is unable to self-regulate himself (*sibi temperare non possunt*),⁴⁶ the doctor cannot heal him completely.

In Stoic philosophy the importance of consciousness, self-control, personal responsibility and *ratio* play a major role. According to Gill, Seneca's prose offers a preventive psychological remedy to his readers, which, in today's terminology, corresponds to a sort of cognitive psychotherapy.⁴⁷ According to the philosopher, the person is responsible for the recognition, the awareness and the management of his own emotions, passions, anxiety and the elimination of the same.⁴⁸ Seneca deals a lot with the possibilities of *remedia*, the various treatments which can be applied by the person himself, and with the awareness that the dominance of passion means the state of *insania* and it requires treatment. Following the philosophical practice of his predecessors, he places great emphasis on the therapy of conversation and dialogue.⁴⁹

bra et vehementius acta suspiria, ita irascentium eadem signa sunt: flagrant ac micant oculi, multus ore toto rubor exaestuante ab imis praecordiis sanguine, labra quatiuntur, dentes comprimuntur, horrent ac surriguntur capilli, spiritus coactus ac stridens, articulorum se ipsos torquentium sonus, gemitus mugitusque et parum explanatis vocibus sermo praeruptus et conplosae saepius manus et pulsata humus pedibus et totum concitum corpus magnasque irae minas agens, foeda visu et horrenda facies depravantium se atque intumescentium — nescias utrum magis detestabile vitium sit an deforme.

- 43 Sen. Med. 672: accendit ipse vimque praeteritam integrat.
- 44 Sen. Med. 1019.
- 45 Cels. 3, 18, 21: Cogendus est et attendere et ediscere aliquid et meminisse: sic enim fiet, ut paulatim metu cogatur considerare quid faciat.
- 46 Cels. 3, 21, 3.
- 47 Gill (2013: p. 372). According to Gill, those writings, mainly *De tranquillitate animi* display similarity to the "one-to-one responsive guidance" that we can associate with the modern practice of psychotherapy. In his opinion we can find clear reference to the importance of the psychological needs of distressed or disturbed people.
- 48 Sen. Ir. 2, 18–36; 3, 5–43. Cooper & Procopé (1995: pp. 33–35) in their treatise elaborate Seneca's views and advice about moral and intellectual training, that is, the need to strengthen, to deepen our 'reasoning' capacity.
- 49 See Long (2009: pp. 20–38). In Seneca's opinion, friendship is a kind of mirror or *alterego*, and by that one can gain more self-awareness, and he might not be able to do so alone (Sen. *Ep.* 27, 1). The one who looks in the mirror with the aim to change himself has already undergone a change, as it indicates a level of self-consciousness. The one who starts the way of self-awareness and consciousness, acquires self-control,

Celsus does not localize the area of mental illnesses (*qui certis partibus adsignari non possunt*)⁵⁰ but analyses them from a holistic point of view, and, according to him, this holistic perspective has a central role in restoring the health of the mind, that is to say self-knowledge, direct contact between a patient and a physician, the knowledge of a patient's lifestyle, any medical data generated during the patient-centred observation, and, of course, the all-encompassing therapy.⁵¹ In his opinion, everyone should be treated according to the nature of his illness (*pro cuiusque natura*),⁵² Celsus does not recommend to generalize because everyone is different, so people's insanity might manifest in many different ways.⁵³

The prerequisite of the treatment is to get to know one's patient and to contact him directly. Celsus lists possible techniques to form such a relationship in the case of *melancholia*, such as storytelling or playing, to eliminate his fear, to raise his self-affirmation by praise, that is, to establish a direct relationship.⁵⁴

Seneca also advocates personalized therapy, in his opinion it is not possible to use the same cure for people with various diseases (*pro cuiusque morbo medicina quaeratur*).⁵⁵ According to him, so many kinds of soul and so many mental problems exist, and in each case you need to find the right treatment: "(...) let us seek for the remedies proper for each disease. This man may be cured by his own sense of honour, that one by travel, that one by pain, that one by want, that one by the sword".⁵⁶

Seneca also places great emphasis on the importance of the dialogue, the direct contact between the philosopher and the person in order to restore and maintain the "mad" person's healthy mental state. He agrees with Celsus that it is important to initiate a conversation and find a topic that is kind or new to the patient, so his curiosity will distract him from his madness, gives him comfort and helps to restore his rational thinking.⁵⁷

De tranquillitate animi shows characteristics of the spiritual calmness, the Stoic sage's features in the form of a dialogue. In chapter one, Serenus asks for a remedy for his spiritual weakness, as he constantly oscillates between different feelings, thoughts and does not find peace. He also mentions friendship as an important factor in achieving spiritual calmness and says that the Stoic philosopher (Seneca) is like his doctor (quare

which will enable rationality to prevail over the destructive power of his passion.

The antique philosophy generally attaches great importance to the dialogue. Socrates, Plato, Aristotle and many other philosophers used the genre to present their philosophical theses. This topic has a very large bibliography, see e.g. Gill (2006).

⁵⁰ Cels. 3, 18, 1.

⁵¹ Cels. 3, 18, 4: eos, qui violentius se gerunt, vincire convenit, ne vel sibi vel alteri noceant.

⁵² Cels. 3, 18, 10.

⁵³ See Hp. Morb. Sacr. 18.

⁵⁴ Cels. 3, 18, 18: removendi terrores, et potius bona spes offerenda; quaerenda delectatio ex fabulis ludisque, maxime quibus capi sanus adsuerat; laudanda.

⁵⁵ Sen. Ir. 1, 16.

⁵⁶ Sen. Ir. 1, 16. Translated by D. Stevenson & A. Stewart (2015).

⁵⁷ Sen. Ir. 3, 39, 4: sermones inferet uel gratos uel novos et cupiditate cognoscendi avocabit. He explicates his psychological-philosophical therapy several times in his prose. See e.g. Gill (2018), Entralgo (1970), Gill (1985: pp. 307–325), Bartoš (2015: pp. 165–229).

enim non verum ut medico fatear?).⁵⁸ The similarity with Celsus's description is also shown by the therapeutic technique of encouragement and self-reinforcement, that is, to communicate that Serenus is on the right path, he only needs to trust himself. According to him, self-control, the impertinence of the soul, a tranquil mental state is the most important that the Greeks call euthymia.⁵⁹ In his opinion, Stoic philosophy is the medicine of the soul (remedia), which is essential to achieve the spiritual peace. Through philosophy, self-control and rational thinking become strong, thus passions cannot take control and insania cannot manifest.

We can also observe a sort of therapeutic method in Seneca's *Medea*. According to Szilágyi, it can be considered a drama with a moral lesson, like the "dark" equivalent of philosophical writings. Its originality is also manifested by the fact that while Euripides makes the woman's passion more visible in her surroundings, Seneca's Medea develops her emotions in long monologues, thus the author indirectly conveys the realization that there is no way out from the net of passions without the true *ratio* and the Stoic philosophy. ⁶⁰ Her passion and rationality alternately prevail, and eventually her anger wins. ⁶¹

In fact, Seneca does not offer healing in the tragedy, but makes diagnosis, confronts his audience with the painful reality and thus leads them to the threshold of self-knowledge, as he thinks that the true *virtus* is the victory over ourselves. This requires self-knowledge and self-control, the ability to recognize and treat destructive passions in our souls. At the same time, the dialogue itself plays an equally important role, for which the genre of the drama creates opportunity. Generally, in tragedies the character suffering from madness often tells his/her pain and passion to a person close to him/her, who tries to discourage his/her destructive plan and restore his/her rational thinking. In this case, the nurse – but also to some extent Jason – acts as a friend, a sort of *alterego*, unsuccessfully.

Conclusion

The genre of the tragedy obviously cannot provide a sufficiently broad framework for a detailed presentation of this mental state, but in comparison with Seneca's prose, we can still gain a greater insight into the nature of the "Senecan *insania*", thus we can examine it more thoroughly. Seneca expresses the difference between *insania publica* and *quae medicis traditur*, and Medea's madness obviously belongs to the first category, since her *insania* is derived from her passions.

We can observe that the therapy and symptoms of *insania* in Celsus's and Seneca's interpretation may well be similar, although it can not be suggested that they discuss the same phenomenon, because one of them approaches the phenomenon from a medical,

⁵⁸ Sen. Tranq. 1, 2.

⁵⁹ Sen. Trang. 2, 2-3.

⁶⁰ Szilágyi (1977: pp. 98–128). Szilágyi claims that the tragedy helps us to recognize the destructive emotions that threaten us, and to learn how to deal with them.

⁶¹ The struggle between love and revenge mostly appears in lines 938–943.

while the other from a philosophical point of view. However, we can find connection points in the case of symptoms, the recommended treatment methods and therapeutic tools, such as the appearance of rationality as a trap, the frequent change of mood, irrational imaginations, the importance of the personalized therapy, direct conversation, self-control, self-awareness, waiting for the reduction of *insania* before the treatment, self-reinforcement through the direct and encouraging relationship or the concentration of the patient's attention.

Bibliography

Primary Sources

- Adams, F. (Transl.). (2007). *Hippocrates: On the Sacred Disease*. Adelaide: University of Adelaide Library.
- Basore, J. W. (Transl.). (1998). Seneca: Moral Essays (Vol. I-II). Cambridge: Harvard University Press.
- De Lacy, P. (Transl.). (2005). On the Doctrines of Hippocrates and Plato: Commentary and Indexes (Second edition, augmented and revised). Berlin: Akademie-Verlag.
- Fitch, J. G. (Ed.). (2018). Seneca. Tragedies, I: Hercules. Trojan Women. Phoenician Women. Medea. Phaedra. Cambridge: Harvard University Press.
- Gummere, R. M. (Transl.). (2011). Ad Lucilium epistulae morales: with an English translation (Vol. 2). Cambridge: Harvard University Press.
- Reynolds, L. D. (Ed.). (1965). Ad Lucilium Epistulae Morales, Books 14–20. Oxford: Oxford University Press.
- Spencer, W. G. (Transl.). (1935). Celsus. On Medicine, I: Books 1–4. Cambridge: Harvard University Press.
- Stevenson, D., & Stewart, A. (Transl.). (2015). *Dialogues by Seneca*. Los Angeles: Enhanced Media Publishing.

Secondary Sources

- Ahonen, M. (2014). Mental Disorders in Ancient Philosophy. Helsinki: Springer.
- Ahonen, M. (2019). Ancient philosophers on mental illness. History of Psychiatry, 30, 3-18.
- Bartoš, H. (2015). Philosophy and Dietetics in the Hippocratic On Regimen. A Delicate Balance of Health. Leiden – Boston: Brill.
- Cooper, J. M., & Procopé, J. F. (1995). Seneca: Moral and Political Essays. Cambridge: Cambridge University Press.
- Entralgo, P. L. (1970). The Therapy of the Word in Classical Antiquity. Oxford: Yale U. Press.
- Gill, C. (1985). Ancient Psychotherapy. Journal of the History of Ideas, 46, 307–325.
- Gill, C. (2006). The Platonic dialogue. In M. L. Gill, & P. Pellegrin (Eds.), A Companion to Ancient Philosophy (Vol. 1; pp. 136–150). Hoboken: Wiley-Blackwell.
- Gill, C. (2013). Philosophical Therapy as Preventive Psychological Medicine. In W. V. Harris (Ed.), Mental Disorders in the Classical World (Vol. 38; pp. 339–362). Leiden – Boston: Brill.

Gill, C. (2018). Philosophical Psychological Therapy: Did It Have Any Impact on Medical Practice?
In C. Thumiger, & P. N. Singer (Eds.), Mental Illness in Ancient Medicine from Celsus to Paul of Aegina (Vol. 50; pp. 365–380). Leiden – Boston: Brill.

Jouanna, J. (2012). Greek Medicine from Hippocrates to Galen: Selected Papers. Leiden – Boston: Brill. Kosak, J. (2018). Heroic Measures, Hippocratic Medicine in the Making of Euripidean Tragedy. Leiden – Boston: Brill.

Langslow, D. R. (2000). Medical Latin in the Roman Empire. Oxford: Oxford University Press.

Long, A. A. (2009). Seneca and the self: why now? In S. Bartsch, & D. Wray (Eds.), *Seneca and the Self* (Vol. 101; pp. 20–38). Cambridge: Cambridge University Press.

Pigeaud, J. (1981). La maladie de l'âme: étude sur la relation de l'âme et du corps dans la tradition médico-philosophique antique. Paris: Les Belles Lettres.

Szilágyi, J. Gy. (1977). Seneca, a tragédiaköltő. Budapest: Európa Könyvkiadó.

Thumiger, C., & Singer, P. N. (2018). Introduction. Disease Classification and Mental Illness: Ancient and Modern Perspectives. In C. Thumiger, & P. N. Singer (Eds.), *Mental Illness in Ancient Medicine from Celsus to Paul of Aegina* (Vol. 50; pp. 2–32). Leiden – Boston: Brill.

Katalin Bán / ban.katalin90@gmail.com

Doctoral School of Literature University of Szeged, Faculty of Arts Egyetem utca 2, 6722 Szeged, Hungary

