

'fundamental articulations' of religious transformation, four of which were the topics for the original lecture series. He acknowledges that other religious transformations occurred, but he does not explain why he chose to discuss particular transformations and not others. Also, there is little connective tissue between the chapters. As a result, the thesis that Stroumsa develops throughout the book is not voiced as strongly as one might hope. This is of particular concern because Stroumsa implies that the discipline of Late Antiquity has virtually ignored Judaism, while focusing on Christianity and 'pagan' traditions. As a comparative history of religions scholar, this writer would argue that Judaism has long been recognized as an important contributor to the Mediterranean cultural and religious world in religious studies and biblical studies circles. Stroumsa's concern seems overstated, and a more developed Conclusion may have allowed him to clarify or nuance this point.

The Conclusion, a mere two pages, is too brief to bring the previous chapters together, and it raises issues that are not developed thoroughly, such as the impact that the Byzantium and Muslim cultures had on religious transformations in Latin European Late Antiquity. Stroumsa suggests that the Jews were mediators between these two cultures but does not explain how or why. By the end of his Conclusion, Stroumsa credits the Jews with being 'at the origin of each of the transformations I have studied: personal identity, the place of the Book, the abandoning of sacrifices, the development of communities – Judaism seems to have experimented before other religious systems with all these aspects of the "new" religion that emerges in Late Antiquity' (p. 130). As a result of its brevity, the Conclusion can not effectively develop this broad claim; instead, it makes reference to metaphoric images (for example, 'living fossils') – references that are more evocative than conclusive. This is unfortunate, as the body chapters offer solid, interesting, well-developed data, and a fully developed Conclusion could have brought the arguments of each chapter into more defined relationship.

Finally, the title of the book is somewhat misleading, as it suggests that sacrifice will be a dominant topic throughout the volume. In actuality, sacrifice is only the focus in the third chapter. While the Foreword states that Stroumsa will characterize the destruction of the Temple in 70 CE (the moment of the end of sacrifice) as the tide-changing moment when all the various transformations begin to occur, the book itself is more nuanced on this point. The transformations of ritual (specifically the ritual of sacrifice) are merely one of several religious transformations examined in the work. Thus, the book's subtitle, 'Religious Transformations in Late Antiquity', driven by transformations in Judaism, would reflect more accurately the multiple foci of the volume.

Despite these concerns, the book has a great deal to offer to scholars of Late Antiquity, Christianity and Judaism, as well as comparative historians of religion. Stroumsa is completely at home in the material, and his writing is engaging. (This is particularly impressive since the English version is a translation from the French.) As a result, readers who do not have a strong grounding in Late Antiquity can follow his argument easily. Stroumsa's thesis – that religious transformations in Judaism are at the root of religious transformations in Late Antiquity – is supported with detailed examples in each chapter. When read less as a sweeping critique of previous Late Antiquity scholarship and more modestly as an analysis of how Judaism contributed to religious life in Late Antiquity, *The End of Sacrifice* makes persuasive arguments about the types of religious transformations that occurred and their origination, and it encourages future comparative scholarship between the various religious traditions active in Late Antiquity.

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Gary B. Ferngren, *Medicine and Health Care in Early Christianity*. Baltimore, The John Hopkins University Press (2009). xi + 246 pp., \$35 (hardcover), ISBN 978 0 8018 9142 7.

Religion and medicine – nowadays, these two elements of culture exist next to each other and yet they form different systems of discourse. But if we take a brief look at some basic books on the history of religion and the history of medicine, we can see that both systems were once strongly connected. A patient in a modern hospital, who refers to a nurse as 'sister', is creating a tacit echo of this ancient liaison between religious beliefs and health care.

In his book, Gary B. Ferngren traces the footprints of relations between Christianity and medicine from around the 2nd century C.E. We use this metaphor of tracing intentionally, because while reading Ferngren's book one feels like one is participating in an investigation taking place in the times when Christianity was emerging from the catacombs, and becoming a dominant religion in the Roman Empire. The book is full of original (and therefore controversial) interpretations of early Christian scriptures (mainly works of the Fathers of the Church and the New Testament) which pertain to medicine, healing and health care.

The book begins with a chapter clarifying the author's methodological approach. Particularly revealing is the section 'Assumptions and Terminology' in which Ferngren states that in the New Testament one can find 'a consistent and credible picture of Jesus's public ministry and the origins of the earliest Christian community' (p. 6). Further on, he explains that as a historian he sees the Gospels and the 'works of classical Greek and Roman historians' (p. 7) as being equally promising as sources 'for the reconstruction of the events they describe' (p. 7). This assumption is potentially destructive to the rest of the book – if one does not accept the fact that the New Testament presents a real image of the life and works of Jesus Christ, one can easily contest the book as a whole. Expressing such an assumption by Ferngren is obviously very honest, but we find it methodologically inappropriate. Ferngren does not discuss or take a critical stance towards other interpretations of the New Testament – he considers them wrong altogether – but he presents no single piece of solid evidence to support this opinion. Obviously the fact that – according to Ferngren – discussions on the historicity of Jesus became the subject of disputes at the beginning of the 19th century and never reached a conclusive solution does not solve the problem. We can clearly see that the author 'forgets' that the New Testament is a religious text and a subject of faith. Ferngren treats the New Testament as a chronicle, forgetting that it is also (or primarily) a *kerygma*, that is, a proclamation of faith. Nobody ever considered Suetonius's *De Vita Caesarum* to be a religious text and a subject of faith. Putting two different kinds of texts together and then stating that they are identical is a misunderstanding. The New Testament –

besides being a religious scripture – is a text full of metaphoric and allegoric meanings, and approaching it as a historical source is a rejection of the long-standing tradition of literary critique of the Bible presented, for example, by valuable works of N. Frye (*The Great Code, The Bible and Literature*, Orlando, Harvest Books, 1983). In this way, Ferngren's book poses a serious problem for the reader.

The detailed exploration of the relationship between medicine and health care begins in Chapter 2, which is devoted to the Christian reception of Greek medicine. After analysing some texts, the author concludes that medicine, just as natural philosophy, could be detached from a polytheistic world-view. As a result, early Christians felt no need to extract medical knowledge from its religious or mythical context; in the author's opinion the two were simply not connected at all. This lack of relationship between the Greek school of medicine and Greek religion is considered to be one of the main reasons why early Christians adapted medical thought and techniques so easily. The high level of independence that medicine held in Greek society from the 5th century B.C.E. (Hippocratic School) and its major development in the 3rd century B.C. (Herophilus and Erasistratus, who formed a school of anatomy in Alexandria) laid the foundation for understanding medicine in early Christianity. This point is not sufficiently emphasized in the chapter (probably because the material of the book is generally set between the 2nd and 4th centuries C.E.), despite the fact that it would support Ferngren's hypothesis very well.

In the third chapter the author presents his most curious ideas, which concern early Christian views on the etiology of diseases. Ferngren is against the pan-demonological theory of etiology (its supporters are Mueller and Hankoff). He not only considers that it has reductionist elements but also states that it is simply false. He considers that early Christians looked upon disease as a part of the natural order of the 'fallen world', which is the world in which we are living – a dominion of sin, yet ruled by God. He concludes that 'they [Early Christians] viewed Jesus's exorcism and miraculous healing as signs that the kingdom of God had come, not as normative models for the healing of ordinary disease' (p. 62). As we read this sentence without the two words added by us, we could consider that the subject of Ferngren's analysis is a somewhat rationalist, Protestant denomination. We cannot underestimate the fact that even nowadays – in highly developed countries – there are people who are sincerely convinced that some diseases are caused by demonic forces. The statement that all (or most) believers in early Christianity were convinced of the natural etiology of many diseases does not form a satisfactory hypothesis. In Chapter 4 the author analyses the relationships between Christian doctrine and acts of healing. The significant role of miraculous healing in early Christian beliefs (especially those of Gnostic origin) is highlighted, but the author still supports his thesis about the rational view of diseases held in early Christianity.

The most valuable part of this book is Chapter 5. Here Ferngren analyses the Christian idea of philanthropy and its relation to medicine and health care systems. The author derives the origins of the idea of Christian philanthropy, compassion and charity from the concept of *imago dei*, which states that all human beings are living images of God. After the dawn of paganism, the doctrinal concept of *imago dei* played a crucial role in the development of Christian doctrine and in the changing of social attitudes towards life as such, as well as towards fellow humans. Ferngren specifies four main consequences: first, *imago dei* had an impact on the doctrine of philanthropy and was an impulse for individual charity; second, it was a crucial point for the sacralization of life (and therefore rejection of abortion, infanticide, euthanasia and suicide); third, it formed a new image of human body as a union of physical body and soul (which was opposite to dualistic ideas); and last, but not least, it represented a change in attitude towards the lower classes and the poor. These observations, well documented by Ferngren, show that Christian religious doctrine played a major role in the development of medical philanthropy and in the emergence of charity health care. It is an interesting idea, but limiting the reasons for such broad changes to only one religious concept is disputable.

Ferngren also points out that for early Christians the process of *caring* was more important than the actual *healing* of the patient's body. The religious imperative to look after one another said nothing about the efficiency of the treatment. Early Christians concentrated their efforts mainly on the healing of the soul (which we recognize in the term 'salvation'), and caring about others was part of the duty to become a better believer. Ferngren stresses that for Christians, the cleansing of individuals from disease was not as important as cleansing them from their sins. This statement leads him to conclude that Christianity cannot be called a 'religion of healing', because it did not promise physical healing to its converts. To the contrary, the spirit of compassion – which has spread through Europe along with the teachings of Jesus Christ – played a major role in the development of institutional medicine. This is the author's closing argument, which is unfortunately not quite coherent with a previous idea expressed regarding the independence of medical thought from religion.

Generally, reading this book gives one the impression of discovering something new. One can see how some medical and social ideas were born, and how mutual relations between religion and medicine were developing. Ferngren's arguments and assumptions about the New Testament (Chapter 1) are obviously debatable, but the effort put into research and documentation (including a valuable bibliography for those interested in the topic) is remarkable, and this is chiefly what makes the book worth reading.

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David Pinault, *Notes from the Fortune-Telling Parrot: Islam and the Struggle for Religious Pluralism in Pakistan*. London and Oakville, CT, Equinox Press (2008). xii + 240 pp., \$34.95 (paperback), ISBN 978 1 845 53346 5.

David Pinault's book on religious pluralism in Pakistan reflects his years of fieldwork with everyday Pakistanis, as well as his interests in story-telling and Shia rituals. The prominence of anecdotes throughout the book, illustrating both the possibilities and pessimism for pluralism in contemporary Pakistan, create an engaging and personal tone. The 12 chapters, however, do not create a linear argument or a comprehensive analysis of the experiences of religious minorities or intrareligious conflicts, as each chapter addresses different aspects of contemporary religious differences broadly construed. The primary theme that unites these various chapters, beyond religious disagreements, is Pinault's promotion of religious freedom and mutual respect, which he sees as key elements in the heritage of Pakistan.