

## Acedia in Late Classical Antiquity

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The sudden appearance during the fourth century of the enervating spiritual condition sometimes termed *acedia*<sup>1</sup> evokes abiding fascination.<sup>2</sup> Its appearance, however, raises more questions than can be satisfied: What was *acedia*? Was it a spiritual or psychological condition? Why was it so dangerous? Why was it treated as a sin rather than as a dangerous illness? Why does it so suddenly appear? Why did it become so contagious? Does it have classical antecedents?

The issue, for better or worse, has narrowed in on definitions: Does the condition represent a form of depression, or (without canvassing the grades in between) does it represent, simply, a type of boredom? Starobinski<sup>3</sup> and the influential Kristeva<sup>4</sup> see it as a type of depression. For Kuhn<sup>5</sup> and Bouchez<sup>6</sup> *acedia* is an enervating form of boredom, albeit one with

<sup>1</sup> The following works are cited by author's name and date of publication: M. W. Bloomfield, *The Seven Deadly Sins* (East Lansing, MI 1952) (= Bloomfield 1952); O. Chadwick, *John Cassian*<sup>2</sup> (Cambridge 1968) (= Chadwick 1968); S. W. Jackson, *Melancholia and Depression: From Hippocratic Times to Modern Times* (New Haven 1986) (= Jackson 1986); R. Klibansky, E. Panofsky, and F. Saxl, *Saturn and Melancholy: Studies in the History of Natural Philosophy, Religion, and Art* (London 1964) (= Klibansky 1964); R. Kuhn, *The Demon of Noontide: Ennui in Western Literature* (Princeton 1976) (= Kuhn 1976); G. Rosen, *Madness in Society* (London 1968) (= Rosen 1968); J. Starobinski, *History of the Treatment of Melancholy from the Earliest Times to 1900* (Basel 1962) (= Starobinski 1962); F. Wemelsfelder, "Boredom and Laboratory Animal Welfare," in *The Experimental Animal in Biomedical Research*, ed. by B. E. Rollin (Boca Raton, FL 1989) (= Wemelsfelder 1989), and "Animal Boredom: Is a Scientific Study of the Subjective Experiences of Animals Possible?" in *Advances in Animal Welfare Science 1984*, ed. by M. W. Fox and L. S. Mickley (Boston 1985) 115-54 (= Wemelsfelder 1985); S. Wenzel, *The Sin of Sloth: Acedia in Medieval Thought and Literature* (Chapel Hill, NC 1967) (= Wenzel 1967).

<sup>2</sup> And in the most unexpected of places. See, for example, Aldous Huxley, *On the Margin: Notes and Essays* (London 1923) 18-25, or Evelyn Waugh's comments reproduced in D. Gallagher (ed.), *The Essays, Articles and Reviews of Evelyn Waugh* (London 1983) 538-41 and 572-76, or Alan Judd's recent novel, *The Noontide Devil* (London 1986), rev. *TLS* (June 26, 1987) 697.

<sup>3</sup> Starobinski 1962, 31-34.

<sup>4</sup> J. Kristeva, *Soleil noir: Dépression et mélancholie* (Paris 1987) 17.

<sup>5</sup> Kuhn 1976, 39-64.

<sup>6</sup> M. Bouchez, *L'ennui de Sénèque à Moravia* (Paris 1973) 31-34.

psychological ramifications. Klibansky, Saxl, and Panofsky,<sup>7</sup> after seeming to describe acedia as a severe form of depression, refuse to name the state. Following their lead Jackson,<sup>8</sup> who delivers the latest treatment of the problem, steers the middle course. Finally there is Siegfried Wenzel who, concentrating on the word "acedia" itself, maintains that there is no single definition.<sup>9</sup>

We cannot hope to cover all of the issues raised by the appearance of this strange mental state. It may be possible, however, to reexamine and to adjudicate some of the problems. I would like to concentrate here on two related questions: first, the difficulties involved in identifying and defining this condition (which will require a brief survey of the evidence), and second, the possibility of identifying classical antecedents for the condition.<sup>10</sup>

## I

In 382 Evagrius (A.D. ?346–399)<sup>11</sup> quit Constantinople for the deserts south-west of Alexandria. Here he joined the hermit colonies gathered at Nitria, Scete, and the "Desert of Cells." During the seventeen years that Evagrius passed in these hermetic communities he developed a formulation of acedia which, to some extent, remains canonical. It is also a formulation which may respond to the conditions of this "Desert of Cells."

Acedia for Evagrius represents a "psychic exhaustion and listlessness."<sup>12</sup> On the face of things it seems probable that acedia was the product of the extreme monotony, the harshness, and the solitude of anchoritic life.<sup>13</sup> Consideration of the conditions in which these North African monks lived gives a better idea of the likelihood of this contention. On Mount Nitria, for example, there were nearly 5,000 monks. Through the heat, the lack of sleep (acedia was the "demon of noontide"), the paucity of food, they lived in their separate cells. Their spiritual programme lacked elaboration. They practised a common form of work, probably shared meals, and on Saturday and Sunday shared worship. But apart from work and meals the day was silent, especially in Cellia and Scete.<sup>14</sup> Small wonder that they fell into a state which produced symptoms of dejection, restlessness, dislike of the cell, resentment of fellow monks, a desire to quit the cell to seek salvation

<sup>7</sup> Klibansky 1964, 75–78.

<sup>8</sup> Jackson 1986, 67.

<sup>9</sup> Wenzel 1967.

<sup>10</sup> Some attempt at this may be found in Toohey, "Some Ancient Notions of Boredom," *ICS* 13 (1988) 151–64, and "Some Ancient Histories of Literary Melancholia," *ICS* 15 (1990) 143–63.

<sup>11</sup> Περὶ τῶν ὀκτῶ λογισμῶν πρὸς Ἀνατόλιον (PG 40. 1271 ff.). The best discussion is by Wenzel 1967. See also R. Arbesmann, "The *Daemonium Meridianum* and Greek Patristic Exegesis," *Traditio* 14 (1958) 17–31.

<sup>12</sup> Wenzel 1967, 5.

<sup>13</sup> The discussion of acedia in the Περὶ τῶν ὀκτῶ λογισμῶν is quite explicit on this.

<sup>14</sup> Chadwick 1968, 22–23.

elsewhere, and even a rejection of the value of anchoritic practices (PG 40. 1273). Wenzel, perhaps the best commentator on Evagrian acedia, observes that "in the end *acedia* causes the monk either to give in to physical sleep, which proves unrefreshing or actually dangerous because it opens the door to many other temptations, or to leave his cell and eventually the religious life altogether."<sup>15</sup>

Counter-measures for acedia existed. Endurance, patience, a resolute refusal to quit one's cell, insistent prayer, the reading and recitation of psalms, the remembrance of, and meditation on relevant verses from Scripture, keeping to the fore the thought of one's death and heavenly rewards, even the shedding of tears were all felt to be helpful practices. Above all manual labour was believed to be a most powerful measure against the sin. In spite of the dangers there were decided benefits to be derived from an onslaught of acedia. The monk who was capable of withstanding it grew immeasurably in strength.<sup>16</sup>

In its earliest formulations, therefore, acedia gives the appearance of being the disease par excellence of the hermit. Indeed, the very conditions in which the hermit lived would be conducive to the illness. St. John Chrysostomos (A.D. ?347–407), also a North African but an erstwhile hermit, provides us with another important outline of the illness. In his *Exhortations to Stagirus*<sup>17</sup> St. John attempts to assist an anchorite, Stagirus, who suffers a destructive spiritual condition. Although this is termed *athumia*, the condition is usually interpreted as acedia.<sup>18</sup> Stagirus, after his entry into monastic life, began to suffer frightening nightmares, bizarre physical disorders, and a despair that bordered on suicide (PG 47. 425–26). What interests most in St. John's discussion is the extremity of the illness. The description of Stagirus suffering an attack is startling. Stagirus' symptoms were "twisted hands, rolling eyes, a distorted voice, tremors, senselessness, and an awful dream at night—a wild, muddy boar rushed violently to accost him."<sup>19</sup>

St. John's description modifies the Evagrian portrait in two important ways. First, *athumia*, or acedia, was far more violent than anything described by Evagrius. The second important modification concerns the epidemiology of acedia. The disease is not restricted to the anchoritic community. He compares the attack suffered by Stagirus to those suffered by individuals living *delicate* (in Greek they are τρυφῶντας) in the world: "Many, while they live in a debauched fashion, are taken by this plague. But after a little time they are freed from the illness, and regain perfect

<sup>15</sup> Wenzel 1967, 5.

<sup>16</sup> Qualities listed by Wenzel 1967, 5 f.

<sup>17</sup> Λόγος παραινετικός πρὸς Σταγείριον ἀσκητὴν δαιμονῶντα (PG 47. 423 ff.), written in A.D. 380 or 381.

<sup>18</sup> Klubansky 1964, 75.

<sup>19</sup> PG 47. 426. See also Kuhn 1976, 47.

health and marry, and have many children, and enjoy all the benefits of this life" (PG 47. 425).

Acedia became the eighth of the vices in the famous list of John Cassian (A.D. c. 360–435). Cassian, born in Bethlehem but finally resident in Transalpine Gaul, is the key figure for the Western tradition of acedia.<sup>20</sup> In his work discussing monastic habits, *De institutis cenobiorum*, he stresses its dangers. He links it especially with the hermetic life: it is characterised by laziness and inertia, by an unwillingness to pursue spiritual exercises, by a desire to escape present circumstances, by tiredness, hunger, the slowing of time, by a desire to escape oneself through sleep or company (PL 49. 366–67). His cure is labour—which discussion occupies the largest part of *Instituta* 10.<sup>21</sup> Cassian's use of the word acedia in *Instituta* 10 evinces a shift away from anchoritic dejection or depression to something more closely resembling idleness (*otium* or *otiositas*), even sloth.<sup>22</sup> The reason for this, implies Chadwick and argues Wenzel, is the changed circumstances in the lives of the religious for whom he wrote.<sup>23</sup> Ascetics such as those addressed by Evagrius lived harsh lives, in spite of their community clusters in the North African deserts. Acedia, in their cases, is exacerbated by solitude and deprivation. Cassian created a new audience. After a period of wandering from Palestine to Constantinople to Egypt and finally to Marseilles, he established his own cenobitic community. Here the ascetic individualism of the North African hermit was tempered by the demands of a religious community. The individual must contribute to the whole. Idleness, therefore, is a particular danger. Work is of paramount importance—hence the stress of the *Instituta*. "It was basic to the cenobitic life," maintains Wenzel, "that the individual monastery be a self-sustaining unit for whose support the individual monk had to contribute his share."<sup>24</sup> Laziness endangered its existence.

Cassian's acedia may be described as a type of sloth. Another monkish vice, described in Book 9 of the *De institutis cenobiorum*, is *tristitia*. It bears a slight resemblance to Evagrius' and Stagirus' illnesses.<sup>25</sup> Cassian outlines the origins of this state as follows (cap. 13, PL 49. 360–61): it could arise from past anger, a loss of money, an unspecified disappointment,

<sup>20</sup> Cassian wrote *De institutis cenobiorum* (PL 49. 53 ff.), published in 425, a description of monastic life as he knew it from Palestine and Egypt; Books 5–12 treat the eight vices; Book 10 (PL 49. 359 ff.) is written "de spiritu acediae." Translations are: E. C. S. Gibson (trans.), in *A Select Library of Nicene and Post-Nicene Fathers*, 2nd ser., XI (New York 1894) and Jean-Claude Grey (trans.), *Jean Cassien, Institutions cénobitique* (Paris 1965). Cassian also wrote the *Collationes patrum* (CSEL XIII—pretended reports of "conferences" with the most famous desert fathers). This was published about 426–28. Generally on Cassian there is Chadwick 1968.

<sup>21</sup> Kuhn 1976, 50–54 provides a useful discussion of Cassian.

<sup>22</sup> Wenzel 1967, 22.

<sup>23</sup> Chadwick 1968, 46; Wenzel 1967, 22.

<sup>24</sup> Wenzel 1967, 22.

<sup>25</sup> Cassian seems to have adapted Chrysostomos PG 47. 489. On the relation of Chrysostomos and Cassian, see Chadwick 1968, 9.

an unprovoked injury, irrational confusion of the mind, or the sorts of things such as cause one to despair of salvation and life itself (Cassian compares Judas). *Tristitia* can be cured simply by directing one's attention steadfastly on the afterlife. Cassian's category is, however, a jumble. That it was not well thought through is indicated, perhaps, by the brevity of this ninth book. *Tristitia* may signify mental derangement, although Cassian is more concerned with the other categories. These might best be characterised as frustration, although they may represent a frustration that can become so extreme as to be lethal. In general *tristitia* has none of the severity of Stagirus' *athumia*.

Rutilius Namatianus was a pagan, a contemporary of Cassian and also a Gaul.<sup>26</sup> In A.D. 416 or 417 he made his famous voyage home to a ravaged Gaul. North of Corsica, near the island of Capraria, he mentions passing a community of monks. He remarks (*De reditu suo* 1. 439 ff.): "As we crossed the ocean Capraria reared up in front of us. The island is polluted by a plenitude of men who flee the light. They give themselves the Greek name of *monachi* [monks] because they want to live alone, without a witness . . . Perhaps they seek their cells [*ergastula*] as punishment for their actions? Perhaps their mournful hearts are swollen with black gall? A superfluity of black bile was the cause Homer assigned to the troubles of Bellerophon [*Iliad* 6. 200 f.], for the human race is said to have displeased the young man after he was made ill by the attacks of cruel depression [*saevi post tela doloris*]."

It is uncertain whether Rutilius is describing a monastic community or a loose confederation of anchorites. He identifies the psychological state of these men as depression or, as he would have termed it, melancholia. The *nigra fellis* to which Rutilius refers is black bile (indicated in the next line also by *bilis*). This substance was believed in humoralist medicine (into which class falls Galenic medicine) to have been responsible for the condition of melancholia. Bellerophon, whose malaise is compared to that of the *monachi*, is said to have suffered from melancholia (Aristotle, *Problemata* 30. 1). For Rutilius, then, these monks were the victims of a clinically defined condition, melancholia. Even allowing for hostility and exaggeration, Rutilius' remarks test the veracity of Wenzel's East-West schema. Rutilius' descriptions seem to present us with an acedia of a destructiveness of the Evagrian or Stagirian type. Its context may as well be Cassianic as Evagrian.

St. Jerome (A.D. c. 348-420) gives us some idea of how severe was the malady alluded to by Rutilius. An inhabitant, as Cassian had been, of Bethlehem, Jerome observes amongst cenobites what can only be termed acedia. He is describing a community which more resembles that of Cassian than of Evagrius. But the acedia he speaks of matches that of Evagrius or Stagirus. Jerome does not use the circumlocutions of Rutilius.

<sup>26</sup> J. Vessereau and F. Préchac (edd.), *Rutilius Namatianus: Sur son retour*<sup>2</sup> (Paris 1961) v ff.

He defines the *acedia* as *melancholia*. It is, he avers, best treated by a physician: "There are those who, because of the humidity of their cells, because of excessive fasting, because of the tedium of solitude (*taedio solitudinis*), because of excessive reading, and because day and night they talk to themselves, become melancholic (*vertuntur in melancholiam*). They need Hippocratic treatments (*Hippocraticis . . . fomentis*) rather than our advice" (*Ep.* 125. 16 "ad rusticum").<sup>27</sup>

Cassian seems to underestimate the force of *acedia*. This is surely indicated by the independent testimony of Rutilius and St. Jerome. Is it not likely that the *acedia* within Cassian's two monasteries may compare to that described by Chrysostomos—doubtless the severe melancholia which is discussed repeatedly in medical literature? A recent observation made of Stagirus' illness may also be made of that described in Cassian's *De institutis cenobiorum* 10: Stagirus' condition is termed *athumia* (despondency), "but quite apart from the fact that despondency had always been the main symptom of melancholy illness, both the aetiology and semeiology in this case (which gives us a deep insight into early Christian asceticism) agree so completely with the definitions in medical literature on melancholy that Johannes Trithemius was fully justified in rendering the expression *athumia* as it occurs in the epistle to Stagirus by 'melancholische Traurigkeit.'"<sup>28</sup>

Why should Cassian have underestimated the force of the illness? At a guess there is more to the *Instituta* than mere practical advice for monks. Cassian, for personal reasons, may have been keen to advertise the salubrity of his own establishments. But perhaps too Cassian was selective in which attacks he sketched. An attack of *acedia*, that is, may have varied in intensity like many another viral onslaught. Cassian may have only been cognisant of or, more likely, have chosen to be cognisant of the milder forms.

Later witnesses to the *morbus* suggest that this second explanation is probable. Their sketches of the sickness veer wildly between the extremes of the Stagirian and the domesticity of the Cassianic. For example, Abba Isais (died c. 480)<sup>29</sup> believed that *acedia* was the most dangerous of all vices (PG 40. 1148). Yet elsewhere he could change his mind and nominate

<sup>27</sup> Elsewhere (*Ep.* 130. 17 "ad Demetriadem") St. Jerome discusses the mental derangement which arises from poor surroundings: "novi ego in utroque sexu, per nimiam abstinentiam cerebri sanitatem . . . fuisse vexatam . . . ita ut nescirent quid agerent, quove se verterent, quid loqui, quid tacere deberent."

<sup>28</sup> Klibansky 1964, 75 f. For discussion of medical knowledge in the early church see S. D'Irsay, "Patristic Medicine," *Annals of Medical History* 9 (1927) 364-78. Wenzel 1967, 191-94 provides a useful compilation of links between *acedia* and the Galenic humoral theories of the origin of illness; cf. p. 193: "That *acedia* is sometimes related to melancholy (1), sometimes to a phlegmatic disposition (2), illustrates the fact brought out repeatedly in our survey of its history: that by 1200 *acedia* comprised two essentially different vices, grief and indolence."

<sup>29</sup> Bloomfield 1952, 54 and 346 n. 87 has some useful comments on *acedia* in Isais.

avarice (PG 40. 1143).<sup>30</sup> Isais, like Evagrius, lived in the hermetic tradition. The comments of Nilus (died 450?), an early fifth-century abbot of a monastery near Ankara and an erstwhile pupil of St. John Chrysostomos, seem also to reflect both traditions. In one letter he responds to Polychronius, who requests advice on how to overcome demonic attacks of *acedia* and *athumia* (PG 79. 449: 3. 142). But Nilus can urge another young man to persist like a soldier, "for even those who have been wounded by the enemy, as long as they will not grow weary [verb ἀκηδῖαν] of the hardships of penance . . . will finally triumph" (PG 79. 112: 1. 67).<sup>31</sup> Elsewhere he urges persistence and an avoidance of negligence in prayer (PG 79. 537: 3. 319). The verb used for "negligence" is ἀκηδῖαν.

Gregory the Great (A.D. c. 540–604) dramatically modifies the position of even Isais and Nilus. He may mark a new phase in the history of *acedia*. In Gregory's scheme of things, to judge from his language, *acedia* is an unimportant evil—notwithstanding his certain knowledge of it from Cassian. There were now only seven vices, likely, *vana gloria*, *ira*, *invidia*, *tristitia*, *avaritia*, *gula*, and *luxuria*. In the *Morals on the Book of Job* Gregory seems to have lumped together *tristitia* and *acedia* to call them the diseases of the solitary.<sup>32</sup> Wenzel argues against simple merging or mere name changing: "It is possible, if Gregory knew Cassian at all, to think of his *tristitia* as a combination of traces from both the *tristitia* and the *acedia* of the Cassianic–Evagrius scheme of eight vices. The new concept should, however, be considered, not as the result of a simple fusion, following the mathematical rule that two and two make four, but rather a new creation from parts of the old vices."<sup>33</sup>

Gregory offers the impression that *acedia*, though well known in theory, had as an illness lost its virulence. The disease has reached an epidemiological balance. Commentators subsequent to Gregory bear out this contention. For example Eutropius, a near contemporary of Gregory, provides a sin sequence which seems to blur the Cassianic and Gregorian tradition. Both *tristitia* and *acedia* appear. In his *De octo vitiis* the list is: *superbia*, *acedia*, *vana gloria*, *ira*, *tristitia*, *avaritia*, *gula*, and *luxuria*.<sup>34</sup> Similarly Isidore of Seville (born c. 560–70).<sup>35</sup> In the *De differentiis verborum et rerum* 2. 40 he reverts to the Cassianic octad: "The inclusion of *invidia* and the merging of *tristitia* and *acedia* under the former name,

<sup>30</sup> Kuhn 1976, 45.

<sup>31</sup> The translation is from Wenzel 1967, 10.

<sup>32</sup> *Moralia* 31. 87. Kuhn 1976, 54.

<sup>33</sup> Wenzel 1967, 24.

<sup>34</sup> Bloomfield 1952, 73. The text is PL 80. 10 ff. See also Bloomfield 1952, 358 n. 50 where, quoting Chadwick on Cassian, he notes that Eutropius may depend for his listing on Cassian's *Collationes* 5. 2. 10–16.

<sup>35</sup> According to Klibansky 1964, 76 n. 23, a discussion of his views on *acedia* may be found in F. Paget, *The Spirit of Discipline*<sup>7</sup> (London 1896) 8 ff.

however, reveal the Gregorian influence."<sup>36</sup> Johannes Climacus<sup>37</sup> approves of Gregory's list of seven vices, but in all cases bar one follows the Cassianic octad.<sup>38</sup>

## II

Several conclusions may be drawn from this brief survey. First, acedia seems to have represented something of an epidemic.<sup>39</sup> The *morbis*, we could speculate from St. John Chrysostomos and from Gregory the Great, seems to have had an outbreak, a period of intense affectivity, then an increasingly dormant period. Acedia varied in intensity. It could range from a severe clinical depression to a milder form which more resembled boredom. Acedia (though not always designated by that name) seems in this early period to have been understood in at least two, possibly three ways. First there was the Evagrian condition—a specific, perhaps mildly depressive illness brought on by an excess of solitude and physical deprivation. This malaise seems not unlike an acute form of frustration (compare Cassian's *tristitia*). Second there was the state of—what we might term—malicious boredom. This is represented by the Cassianic conception of *otiositas*. Third there was the formulation of St. John Chrysostomos,<sup>40</sup> Rutilius Namatianus, and St. Jerome—acedia here was linked with the clinically defined notion of severe melancholia. It also appears probable that Cassian was correct in maintaining that the solitary life-style of the hermit exacerbated the malady.

But it is of crucial importance to note that acedia was not confined to the monastery. Monks were not alone in the predisposition to the illness. This is indicated by an aside of St. John Chrysostomos. He states that acedia is a condition also suffered by those living outside monasteries. But for them it was less dangerous (PG 47. 426). Thus the malady suffered by Stagirus has its parallel even in the comfortable world beyond the cave or the monastery. It is hard not to conclude that acedia represented something of a pandemic. It affected lay and religious, hermit and monk alike. The

<sup>36</sup> Bloomfield 1952, 77. The text is PL 83. 95–98.

<sup>37</sup> *Scala paradisi*, PG 88. 631 ff. (also translated: C. Luiheid, *John Climacus: The Ladder of Divine Ascent* [New York 1982]). Step 13 (PG 88. 857–61) provides an extended treatment of "despondency." According to Klibansky 1964, 76 n. 23, a discussion of his views on acedia may be found in F. Paget (above, note 35) 8 ff. Wenzel 1967, 18 maintains that although Climacus gives long descriptions of the vice, they are "mostly borrowed from earlier desert fathers."

<sup>38</sup> Bloomfield 1952, 76–77.

<sup>39</sup> John Chrysostomos calls it a λοιμός (or *pestis*) and an ιός (or *virus*, PG 47. 491) and compares it to a fever (πυρετός or *febris*, PG 47. 489).

<sup>40</sup> Chrysostomos, however, did not see it that way. He lists *melancholici* along with a variety of other sinners at PG 47. 451.

viral analogy of St. John Chrysostomos is indeed a useful one.<sup>41</sup> It makes comprehensible that the force of the attack, like that of many diseases, could vary in intensity (Evagrius' acedia blurs into a clinical melancholia; Rutilius' melancholia blurs into Cassian's *otiositas*), and that the disease had periods when it was dormant (the Gregorian era) and periods when it was widespread (Chrysostomos' era).

Definitions, the first of the concerns of this essay, are therefore not easily formulated. Because the intensity of acedia could vary from region to region, from sufferer to sufferer, and from era to era no single set of symptoms will accurately sum it up. The disease is best represented on a sliding scale. Acedia could vary from a harmless, though debilitating frustration (Evagrius or Cassian's *tristitia*), through oppressive boredom (Cassian's acedia), to an acute, delusory melancholia (Chrysostomos). Acedia represents a continuum. It encompasses the conditions we would describe as frustration, boredom, and depression.<sup>42</sup> It is also apparent that, as Wenzel suggests, the physical conditions of the sufferers may have some importance in regulating the severity of the malady.<sup>43</sup> But that will not explain why the pestilence broke out in this particular era. Explanation for that would require more knowledge of shared psychological states than we possess.<sup>44</sup>

### III

Were there classical precedents for the deadly condition of acedia? The claim is sometimes made, but frequently implied, that acedia lacked a parallel within the classical world—as if it sprang to birth fully formed in the deserts of North Africa, rather like Athena from Zeus' head. If, however, we adopt the type of definition I have urged above—that acedia represents a continuum embracing frustration, boredom, and depression—it will be apparent that the various aspects of the condition have ample parallels within the literature of classical antiquity. What was new in North Africa was a proper term for this *morbus*. The invention of this label, I suspect, is an indication of the ferocity of the onslaught.

<sup>41</sup> W. M. McNeill, *Plagues and Peoples* (Harmondsworth 1976) is very helpful on the notions of pestilential infection and spread. For the viral analogy applied to psychological conditions there is E. Showalter, *The Female Malady: Women, Madness, and English Culture, 1830–1980* (London 1985).

<sup>42</sup> The continuum is probably the result of the interconnection of the emotions themselves. This has been demonstrated with great force in the work of the Dutch researcher into animal behaviour, Dr. Françoise Wemelsfelder. Wemelsfelder convincingly explains the connections between frustration, boredom, and depression (termed "helplessness") in animal behaviour. The human analogy seems inevitable. See Wemelsfelder 1985 and 1989.

<sup>43</sup> So too St. Jerome (*Ep.* 125 "ad rusticum" and 130 "ad Demetriadem"), who alludes to the melancholy which arises from poor surroundings.

<sup>44</sup> Perhaps the incidence of acedia has parallels in such bizarre phenomena as Maenadism?

Precedents for the depressive condition suffered by Stagirius, or that described by Rutilius Namatianus and St. Jerome have been amply documented by Jackson, by Klibansky, Saxl, and Panofsky, and by Starobinski.<sup>45</sup> There is, in the classical period, a reasonably large medical literature on melancholia, depression, and related problems. For the sake of thoroughness I will mention a few outstanding examples.

Melancholia was the ancient medical term for depression.<sup>46</sup> In the earliest Hippocratic writers<sup>47</sup> it seems to be linked with "an aversion to food, despondency, sleeplessness, irritability, restlessness." (The Evagrian parallel suggests itself at once.) Sometimes it is also added that "fear or depression that is prolonged means melancholia."<sup>48</sup> These theorists were probably humoralists and believed that melancholy was the result of an excess of black bile.<sup>49</sup> (Thus the comments of Rutilius Namatianus.) Such an interpretation was followed, with only small modifications, by most of the later medical writers. Celsus interpreted it as such;<sup>50</sup> so did Rufus of Ephesus (who worked during the Trajanic and Hadrianic periods),<sup>51</sup> Aretaeus of Cappadocia (fl. A.D. 150),<sup>52</sup> and Galen (fl. A.D. 160).<sup>53</sup> The

<sup>45</sup> Respectively Jackson 1986, Klibansky 1964, and Starobinski 1962.

<sup>46</sup> The popular conception of melancholia seems to have followed a position first outlined by pseudo-Aristotle, *Problemata* 30. 1. According to the *Problemata* there are two kinds of melancholics: those in whom the black bile becomes very hot and those in whom the black bile becomes very cold. Where the black bile is cold one would expect depression. Where it is very hot one would expect mania (anger, volatility, violence, and destruction). The authority of the Aristotelian version seems to have held sway, in non-medical circles, as late as Plutarch.

<sup>47</sup> W. Müri, "Melancholie und schwarze Galle," *MH* 10 (1953) 21-38, is very helpful on Hippocratic notions of melancholy and black bile. Useful generally on the Hippocratics is W. D. Smith, *The Hippocratic Tradition* (Ithaca, NY 1979). For the larger view see M. Neuberger, *History of Medicine* I, trans. E. Playfair (London 1909).

<sup>48</sup> See Jackson 1986, 30-31, quoting from W. H. S. Jones and E. T. Withington, *The Works of Hippocrates* (Cambridge, MA 1923-31) I 236 and IV 185.

<sup>49</sup> Jackson 1986, 30 cites Jones (previous note) IV 3-41 in support of this view.

<sup>50</sup> Klibansky 1964, 45 f. for a discussion of Celsus and a bibliography. Klibansky et al. point out that Celsus bases his work on that of Asclepiades of Bithynia, who came to Rome in 91 B.C. and went on to become a friend of Cicero. Jackson 1986, 33 believes that Celsus may have been influenced by humoral theory.

<sup>51</sup> Klibansky 1964, makes this statement as part of the general discussion (48-55) of Rufus of Ephesus. Rufus' work on melancholy is reconstructed from fragments and citations: see Klibansky 1964, 49. The text for the remains of Rufus of Ephesus is now H. Gärtner, *Rufus Ephesius: Quaestiones medicales* (Stuttgart 1970). Jackson 1986, 407 refers to the following translation: C. Daremberg and C. E. Ruelle, *Oeuvres de Rufus d'Éphèse* (Paris 1879).

<sup>52</sup> Jackson 1986, 407 mentions the following translation: F. Adams, *The Extant Works of Aretaeus, the Cappadocian* (London 1856) and discusses Aretaeus on pp. 39-41. The Greek text by K. Hude is contained in *CMG* II<sup>2</sup> (Berlin 1958).

<sup>53</sup> Galen's comments on melancholy may be found in Book 3 of *On the Affected Parts*. The Greek text is contained in vol. VIII of C. G. Kühn, *Claudii Galeni opera omnia*, (repr. Hildesheim 1965). For a translation see R. E. Siegel, *Galen: On the Affected Parts* (Basel 1976). On Galen and melancholy see Jackson 1986, 41-45 and "Galen—on Mental Disorders," *J. Hist. Behav. Sci.* 5 (1969) 365-84, R. E. Siegel, *Galen's System of Physiology and Medicine* (Basel 1968) 300-04, and Klibansky 1964, 57 ff.

contemporary of Rufus, Soranus, agreed on the symptomatology, but differed on aetiology.<sup>54</sup> He rejected the humoralist interpretation.

An examination of some of the ways in which depression seems to have been depicted in classical texts indicates reasonable similarities between it and some of the versions suffered under the banner of *acedia*. Compare, for example, the following descriptions of melancholia (the first drawn from Aretaeus of Cappadocia, the second from Soranus) with those of St. John Chrysostomos or Evagrius above: "In certain of these cases, there is neither flatulence nor black bile, but mere anger and grief, and sad dejection of the mind; and these were called melancholics, because the terms *bile* and *anger* are synonymous in import, and likewise *black* with *much* and *furious*,"<sup>55</sup> or "mental anguish and distress, dejection, silence, animosity towards members of the household, sometimes a desire to live and at other times a longing for death, suspicion . . . that a plot is being hatched against him, weeping without reason, meaningless muttering and . . . occasional joviality."<sup>56</sup>

Also of considerable significance may be the traditional link between the desert (the haunt of the early anchorite), uninhabited places, and melancholia and madness. This nexus has a distinguished medical parentage. In the pseudo-Aristotelian *Problemata* 30. 1 it is stated: "There are also the stories of Ajax and Bellerophon: the one went completely out of his mind, while the other sought out desert places [τὰς ἐρημίας] for his habitation; wherefore Homer says [*Iliad* 6. 200–02]:

And since of all the gods he was hated  
Verily over the Aleian plain he would wander  
Eating his own heart out, avoiding the pathway of mortals."<sup>57</sup>

Aretaeus of Cappadocia, according to Rosen,<sup>58</sup> makes a similar parallel and links madness with the desert: "Aretaeus speaks of some madmen who 'flee the haunts of men and, going to the wilderness, live by themselves.' Also, in discussing melancholia, he refers to 'avoidance of the haunts of men' as characteristic of those severely afflicted with this condition." It is also doubtless correct to adduce the Gerasene demoniac in the Gospels. According to Luke, the demon who possessed this individual drove him into the desert after he had broken the bonds used to fetter him.<sup>59</sup>

<sup>54</sup> Soranus survives in a Latin translation made at the end of the fourth century by Caelius Aurelianus (*De morbis acutis et chronicis*). For a text see: I. E. Drabkin (ed. and trans.), *Caelius Aurelianus: On Acute Diseases and on Chronic Diseases* (Chicago 1950).

<sup>55</sup> The translation is drawn from Jackson 1987, 40.

<sup>56</sup> See Drabkin (above, note 54) 19.

<sup>57</sup> The translation is that of Klibansky 1964, 18 f.

<sup>58</sup> Rosen 1968, 98.

<sup>59</sup> Pointed out by Rosen 1968, 98. The New Testament references are *Luke* 8. 26 and 29, *Mark* 5. 3, and *Matthew* 8. 28.

Melancholics of the depressive variety, therefore, are not uncommon in ancient medical literature.<sup>60</sup> There seems to be every reason to assume that early Christian writers were familiar with the medical traditions,<sup>61</sup> and, further, when they attempted to describe or to formulate aspects of *acedia*, that they utilised, consciously or unconsciously, these traditions.

There was more to *acedia* than melancholia. In the Cassianic scheme of things it resembles boredom. Does Cassian's formulation of *acedia* as *otiositas* have classical parallels? References to the notion of boredom are less easy to isolate than those to melancholia.<sup>62</sup> (The difficulty is partly lexical. A variety of terms—nearly all of them metaphorical—may be used to describe the condition. Even then it is not easy to be sure whether unambiguous "boredom," "annoyance," or even "socially inept" is intended.) The use, however, of one of the Greek words for boredom, ἄλυσ, may offer some insights. In its earliest uses (nominal and verbal) it seems to mean "distracted" or "grieved." It can also, in its verbal forms, mean to wander. The first unambiguous use<sup>63</sup> of ἄλυσ with which I am familiar, to suggest "boredom," comes from Plutarch, *Pyrrhus* 13. Pyrrhus, after becoming regent of Epirus and later of Macedonia, withdrew from the latter possession in disappointment at the disloyalty of his subjects. "Ἄλυσ or boredom—to the point of nausea—did not allow him to enjoy his retirement. He was only content, according to Plutarch, when doing or receiving mischief. To alleviate the boredom Pyrrhus launched himself on a new round of military activities at the end of which he lost his life. This is not quite Cassianic, perhaps, but the restlessness and dissatisfaction may offer some similarity. So too Pyrrhus' cure—activity, the very prescription of Cassian. Comparable references occur in Diogenes of Oenoanda (fr. 25 Chilton), Aelian (*VH* 14. 12), and Marcus Aurelius (*Meditations* 2. 7). Aelian repeats the theme of activity as a remedy for boredom—he mentions the king of Persia who, to avoid boredom when travelling, kept a knife and a piece of linden wood for whittling.

<sup>60</sup> Depressives in literature are less common. The first mild depressive with whom I am familiar is M. Annaeus Serenus, the addressee of Seneca's *De tranquillitate vitae*. While Serenus' condition is perhaps too mild to be described as full-blown depression, his symptoms do seem to match. Some of the terms describing his illness are: *displacentia sui, fastidium [vitae], fluctus animi, inertia, maeror, oscitatio, taedium, tristitia*, and so forth. The addressee of Persius' third satire may suffer real depression. His condition, designated in v. 8 as *vitrea bilis*, may be interpreted as μέλαινα χολή. The cure, given in v. 63, is hellebore, a standard treatment for melancholy.

<sup>61</sup> For discussion of medical knowledge in the early church see D'Irsay (above, note 28).

<sup>62</sup> For a partial discussion of the history of the notion see Toohey, "Some Ancient Notions of Boredom" (above, note 10).

<sup>63</sup> The earliest uses of the word as "boredom" may be Hellenistic. But these could just as easily be taken to mean "annoyance." See Toohey, "Boredom" (above, note 10) 155.

An important aspect of Cassianic acedia is *horror loci*, a restless dissatisfaction which drives monks from their cells to annoy and to harass (and to pass on the infection to?) others.<sup>64</sup> There are ample references to this condition: in Lucretius 3. 1060–67 and in Horace, *Sat.* 2. 7. 28–29, *Ep.* 1. 8. 12, 1. 11. 27, and 1. 14.<sup>65</sup> Horace, however, does not seem to see anything especially sinister in this emotion. Seneca repeats this theme in *Ep. Mor.* 28 and at *ad Helv.* 12. 3. 4. Indeed it is Seneca who provides, as with depression, many of the most useful references to this emotion. He could almost be said to have “spiritualised” it. Typical of this tendency are comments such as those at *Ep. Mor.* 24. 26: of the sufferers he notes *multi sunt qui non acerbum iudicent vivere, sed supervacuum*. “Spiritualised” boredom verges on fully fledged acedia.<sup>66</sup>

#### IV

The conclusions to be drawn from my discussion ought now to be apparent. The variety of definitions for acedia in scholarly literature is symptomatic of the actual nature of the affliction. Depending on the era, depending on the sufferer, depending on his or her health acedia could vary in intensity. It could resemble a mild form of frustration, a deeper form of boredom, or a psychotic type of depression. The disease affected religious and lay people alike. Its severity, however, seems to have been predicated upon historical, geographical, and physiological peculiarities. Perhaps the best analogy for acedia is that of a severe viral illness.

The variety of the forms which acedia could take, furthermore, allows a more satisfactory examination of its antecedents. The depressive manifestations of the illness and those manifestations exhibiting symptoms of boredom appear to have ample parallels in the literature of pagan antiquity. There was, then, little that was new in acedia, except perhaps the name itself. Its formulation may be the result of the severity of the epidemic in the fourth and early fifth centuries.

There remains one aspect of the problem which I have avoided. What is the aetiology of acedia? No satisfactory answer can be provided for this query. It may not be unreasonable, however, to offer a few tendentious speculations. There appears to be some scientific evidence for claiming that the emotions of frustration, boredom, and depression result from circumstances of confinement.<sup>67</sup> That such circumstances manifest

<sup>64</sup> *Instituta* 10, cap. 2: “qui [*sc.* acedia] . . . horrorem loci . . . gignit.”

<sup>65</sup> This topic is discussed in Kuhn 1976, 23.

<sup>66</sup> There remains a third aspect of acedia for which I have not offered parallels. This is frustration. It has been argued by Wemelsfelder 1989 that frustration precedes boredom. As far as the literary condition is concerned this is a less easy concept to pin down. To avoid the attendant imprecision I have omitted its consideration. It could be observed that *horror loci* may be as good an example of frustration as one is likely to find.

<sup>67</sup> Wemelsfelder 1989 and 1985.

themselves in the anchoritic and cenobitic world is obvious, notwithstanding the fact that the confinement was freely chosen: it cannot have been easy to abandon Rutilius' island of Capraria. But such an explanation, though useful for the religious, is less so in the example of the lay victim. My suggestion in this case is based upon a not entirely subjective observation that, in the classical period, boredom and depression, the congeners of acedia, seem particularly prevalent in the post-Senecan lay world. The "confinement" of that world is less physical (although we ought not ignore the dramatic increase in urbanisation within the period) than emotional (for the traditional elite in the early empire options, traditional certainties, and even physical freedoms were severely curtailed). Perhaps it was so for the lay person in the late fourth and early fifth centuries. Was "confinement," of an emotional variety, ascendant in this era? The experience of Rome in 410 offers one corroboration. The rapid spread of Christianity itself may offer another.<sup>68</sup>

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<sup>68</sup> My thanks to Dr. John Dearn for a variety of assistance.