November 1986

Luke, the Physician

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Recommended Citation
Available at: http://epublications.marquette.edu/lnq/vol53/iss4/7
On this feast of St. Luke the Physician, you have dedicated a window to Rex Bowater, the orderly who died earlier this year. I spoke often to him in the corridor. It is surprising, sometimes, in a big hospital to find out who is the real physician. Perhaps the orderly wheeling the patient to the theatre and talking to him or her on the way, is more of a healer than the surgeon who does the technical operation, but does not take the time to communicate with the patient. I once asked a woman who had just been through labor what had helped her the most. She didn’t mention myself, or any of the nurses, but the labor ward cleaner who would lean on her mop in the door of the patient’s room and discuss with her what it was like to be in labor and how it would not last forever.

St. Luke, the beloved physician of St. Paul, is the author of what many have described as the most beautiful book ever written, “The Third Gospel.” It is a story made attractive by its beautifully told human aspects, when one looks at some of the detail in it. For example, in the story of Mary’s visit to Elizabeth, one is struck with this detail and wonders where it came from. The tradition is that Mary told this to Luke. It is a satisfying explanation, for it is not hard to imagine these two people relating well. One could imagine Luke, the highly trained physician, marvelling at the story of the conception of Jesus and the way in which a 15-year old girl set out to walk from Nazareth to Ain Karim to the South of Jerusalem, a distance of more than 75 miles. He would realize, of course, that Mary at 15, when the life expectation was probably not much more than 30, may have been considered mature and perhaps the equivalent of a 25-year old woman today. Nevertheless, he would marvel and joy in the love and confidence that took her on this journey.

There must have been things which made this journey possible. One of the great trade routes to the East passed by Nazareth and one guesses that Mary would have joined a caravan, perhaps paying a fee to travel with it like one would pay to travel on a bus; that this caravan would have its own escort, and that Mary would have stayed at a campground each night,
perhaps even in tents provided by the caravan. It makes one wonder, if we were on a long distance bus and saw a 15-year old single mother, how we would feel about her.

**Meeting of Elizabeth and Mary**

Luke would have been greatly interested in the story from the meeting of Elizabeth and Mary, when John the Baptist, in the womb, jumped at the sound of Mary's voice, though Christ was in Mary's womb no more than two months, for she had set out as it says, immediately after the incarnation. Here John, in the womb, recognized from the voice of Mary that she was pregnant. Do we even now know that the voice of a pregnant woman tells us that she is pregnant? Elizabeth knew not only that Mary was pregnant, but that she was the mother of her Lord. Luke the physician would have marvelled at the extraordinary perception of the child in the womb, about which even now we know so little.

Luke, hearing Mary repeat the Magnificat, would have been immensely taken, scholar that he was, to hear her deep knowledge of the Old Testament and he would have wondered how a Jewish woman, not normally trained in the scriptures, quoted them with such perception and such depth.

That Luke was a physician is a constant tradition and certainly his descriptions - of illnesses which Peter's mother suffered from a high fever; that the woman with a hemorrhage had been bleeding for 12 years - have a precision about them which is the mark of the physician. They do not prove the point, but it is the way a physician would speak.

One Christmas morning, when I was delivering a baby, the mother told me that she wished it was a stable. I said “We could chuck a few bales of hay around if you would like”, to cover my embarrassment. But she embarrassed me even further by saying when the boy was born, “I wish his name was Jesus.” One imagines when Luke heard the story of the birth of Jesus in the stable, (and surely he could have been delivered only by his mother) that he would have wished to have been there to help. Luke, who knew him to be the Word made flesh, the Lord God himself, would have pondered again why poverty was so important.

Luke, the trained physician, was also a trained historian. One sees this in him starting the story of John the Baptist where he sets the historical time in six different ways, all independent.

1. It was in the 15th year of the reign of Tiberius, the Roman Emperor;
2. When Pontius Pilate was Governor of Judea;
3. Herod, Tetrarch of Galilee;
4. His brother, Phillip, Tetrarch of the land of Iturea and Trachonitis;
5. Lysanias, Tetrarch of Abilene.
6. During the Pontification of Annas and Caiphas.

Luke writes in a language thought by those who know to be both elegant and simple and it comes through with a beautiful limpidness even in English. The story of Simeon, the old man who waited for the birth of the
 Messiah and, to his enormous credit, recognized Him as that baby and Simeon's warning to Mary of what she must suffer, are among the lovely perceptive stories which only Luke tells and they can only have come from Mary.

Tradition says that Luke was one of the 70 disciples and one of the two who met Jesus after the resurrection on the road to Emmaus. The way in which Luke writes this story, mentioning Cleophas as one of the two, but almost consciously not mentioning the other, certainly suggests that the writer was the second disciple.

A Lovely Story

What a lovely story it is and what a preparation for Luke that Christ Himself was one Who taught him what he would write in the third Gospel. Christ, meeting the two, asked them what they were talking about and they marvelled that anybody would not have known about the events which occurred in Jerusalem the day before. Emmaus is thought to be seven miles west of Jerusalem. One imagines that they spent perhaps two hours walking there with Christ, talking to Him. They pressed Him to stay with them and He agreed and told them how, starting with Moses and going through the Prophets, the revelation of the Old Testament applied to Himself. How beautifully this is put and what enlightenment to Luke's historian's mind this must have been! Perhaps when we see the relationship of the Old Testament to Christ as pointed out so frequently by Paul, we can imagine that Luke had shared some of this with Paul.

We have the startling statement that, in spite of all this, they did not know Christ. We learn how they sat down for a meal and how they recognized Christ in the breaking of the bread. What a revelation this is for us! Luke must have spent four or five hours talking with Jesus and he did not recognize Him. There must be a lesson here for us. If Luke couldn't recognize Christ, then we certainly couldn't, even if we met Him here and now. We need a long preparation which will be in purgatory, but what a lesson, too, for us that they recognized Him in the breaking of the bread. We who have often wished that we could see the real Christ, should realize that we too are meant to recognize Him in the breaking of the bread, for Luke had spent all those hours with Him and yet did not recognize Him. Christ is to be seen and recognized in the Eucharist. What a prayer, that we may see Him there like Luke!

It is an interesting question. What would a Greek physician be like if we met one now? Luke, as a Greek physician, would have been trained possibly at the great Medical School of Alexandria, where anatomical dissection was practiced and thus he would have had an excellent knowledge of anatomy. Erasius Tratos, who laid down the traditions of anatomy and physiology at Alexandria, regarded the heart as the source of both arteries and veins and postulated fine capillary anastomosis between arteries and veins. He described the semilunar valves and this tricuspid valve which he named and realized they prevented the reflux of blood. He
described the aorta, pulmonary artery, intercostal arteries, hepatic artery, renal artery, gastric arteries, pulmonary vein, venacava, azygos vein, chyliferous vessels and hepatic veins.

The Alexandria Medical School had a superb library, and was the full heir to Greek medicine and, in particular, the tradition of Hippocrates. Greek medicine looked at the whole man, at diet and drugs and manipulations of ways of thinking about medicine.

Visit to a Greek Physician

If we had visited a Greek physician as a patient, he would have looked at us carefully as we came in, noted the color of our skin, tried to decide what sort of person we were — outgoing type, or a quiet, even depressed type. He would have checked our temperature and felt our pulse. He would have tested our urine, examined us carefully, taken a full history of our complaints and symptoms, analyzed with careful questioning and added to all this the signs that his examination produced. Having done this, which is our scientific method, he would have produced a diagnosis and he was capable of diagnosing diseases like pneumonia, pleurisy, asthma and epilepsy. Prognosis was particularly important to the Greek physician and he was, by observation, often able to make a good job of it. For example he could diagnose diphtheria (the Syrian ulcer) and his prognosis, one imagines, would be all too correct.

The Greek physician had a surprising capacity for surgery; his anatomy was very good, having been based on dissection. His physiology was not so good. It did not comprehend the circulation of the blood. Greek physicians were highly thought of in the Roman army. Julius Caesar had laid it down about 40 years before the birth of Christ that the Greek physicians were to be given Roman citizenship. Seeing the fright of the Roman governor of Syria at the thought that he had scourged Paul, a Roman citizen, one can imagine the status which that brought.

Memorial pillars have been found recording the names of 1000 members of a legendary cohort with 13 officers, and of this, four were physicians whose names were almost always Greek names.

The Greek surgeon was able to do operations like cataract surgery, the removal of bladder stones and hemorrhoidectomy. He knew how to set fractures and knew about traction. A compound fracture did not do well as a rule but he knew all about healing by primary intention and how to suture — usually with sutures, occasionally with metal clamps. He knew how important it was to clean the wound well. There were some antiseptics as well and one can imagine how highly they were thought of if a large number of wounds healed by primary intention. Their surgical techniques and their understanding of fractures must have been the reason for their presence in the Roman army and Dioskoroides, one of the surgeons of this time, wrote a textbook which was used up until the 18th century. These surgeons had anesthesia — local, rectal and general anesthesia. They had

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opium which was widely used and also a substance called oil of mandragora. The Roman army had its own hospitals which were airy and widely used. These became the precursors of Roman civilian hospitals.

Rome had 10 aqueducts bringing in 300,000,000 gallons of water a day. This was 100 gallons per citizen, half of which went to the Roman baths, the other half to households. Rome had a large sewer, the cloaca maxima, which was underground and which discharged into the Tiber. Rome, at present, uses only two of these aqueducts. A modern city which allotted 50 gallons of water per person per day would be thought to be very generous indeed. The clean water supply would have reduced the number of water and food-borne diseases such as cholera and hepatitis.

**Good Treatment in Rome**

One concludes that it would have been better to have been treated by a Greek physician in a city like Rome anytime in history up to the discovery of bacteria by Pasteur and the application asepsis by Lister. It is an interesting question to ask what a Greek physician like Luke has left as a legacy for us. He, of course, has left the whole idea of analysis by symptoms and signs and making a diagnosis and basing the treatment on that.

The drugs, whose whole idea of treatment he had, were largely plant-derived. He understood anatomy and had the idea of the post-mortem examination, but one of the things we found so compatible with him was that he upheld the tradition of the great Hippocrates where the doctor's role was to heal and not to kill, the tradition of never using death as a solution.

Recently I had a patient who developed very severe fetal distress in labor. We rushed to get a Caesarean section done. When the child was born, it took us six minutes to get the heart started, but at six weeks this child was fully breastfed and had no residual neurological defect at all. The physicians in the country where the grandmother lived told her that we were unethical to risk producing a brain damaged child. I don't think that Luke would have acted without such hope and it is a sad commentary on the modern physician that he has lost his drive to heal, replacing it sometimes with a timid acquiescence to those who want to use his status and skill to kill. The old, the unborn, the handicapped, the terminally ill would have been safe and lovingly cared for by Luke the Greek physician, but they are not as safe today with all modern physicians.

Another interesting notation about Luke is that he was many things - a trained physician, trained philosopher, linguist, historian, man of letters. Why is it that none of the apostles were men of this calibre? Why was Luke, who had a great reputation as a preacher, not among the apostles? He must have been a wonderful comfort to Paul who, tradition has it, had an illness which may have been epilepsy and Luke travelled with him to Rome where Paul spent his first two years chained to a legionary. His case was never brought and it was dropped, but it is still an interesting question. Part of
the answer could be that the Jews, as the chosen people, had to be given a chance to accept their true Messiah and so all the original followers would be Jewish. Perhaps Christ wanted to emphasize as He did by His conception and by His birth, and by the very fact that He became man, that He came to save the poor and indeed only the poor could be saved because only they would accept Him.

Supremacy of Greek Thought

In the non-Jewish world, Greek thought reigned supreme. The challenge was to present a new face to these questioning minds, that Christ was the Messiah, belonged to the Jewish tradition. John met the challenge when he equated the Logos, the principle of order, a more supreme intelligence when equated the Logos with God and then in a most sublime statement ever made by man with Christ when he said The Logos, the Word became flesh. The brilliant Greek contribution of their Logos, the principle of order in the world, had been made by Heraclitis 600 years before Christ in Ephesus and it was in Ephesus that John made this sublime correlation.

One can imagine that, when the Ephesians heard this for the first time from Paul that it would indeed cause a riot. Luke, the Greek man, was the international man and all the more readily accepted that Rome was the world power, for the citizens of the most powerful nation in the world are denied the consolation of knowing that they are liked.

One Friday evening recently, while I dealt with a secondary hemorrhage, six victims of a road accident were brought in, two of them mangled in the end beyond repair. Two orthopedic surgeons, two vascular surgeons and four anesthetists worked on these two all night. The resident medical officer said to me, "They were drunk." And I thought how the poorest of our poor are those who are sick through their own fault. It is probably impossible to go on doing this sort of work unless one sees people as Christ. Could a drunk, hopelessly destroyed body be Christ? Luke, I think, would say he could be no "other". Most of us frontline physicians will meet AIDS sooner or later, myself perhaps in a mother and baby in the womb. How will I deal with this if I do not see them as Christ? It is a good thought, because I cannot withstand a rigorous judgment even if they can.