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St. Paul's Infirmary.

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The following is a new and independent investigation of a well-worn theme. The nature of the apostle's illness was no secret to the Galatians, Corinthians, and others in his day. But his reticence on the subject has baffled the inquiries of later ages. Our information is meagre and couched in obscure language. Competent scholars have made the most of it, and their labours have been supplemented by the results of travel. Yet the enigma remains. Ingenious theories have been often evolved from what is little more than a single phrase or symptom. It is still customary to speak of Paul's 'infirmity' as if it were co-extensive with the conventional 'thorn in the flesh.' No opinion will be satisfactory which fails to take account of the whole evidence available. That has not been by any means exhausted. There are still hints and suggestions which may be turned to good account. There remains also one of the most promising fields of research really unexplored. We refer to the diseases, endemic and epidemic, prevalent in the regions traversed by Paul. When these and other points are scrutinized, the problem assumes an aspect altogether new. It may not attain finality, but it approaches thereto. The treatment of the subject must be in part retrospective. Previous opinions must be considered and their merits tested. The fundamental facts are those furnished by the apostle himself in the two classical passages: 'That I should not be exalted over much, there was given to me a σκόπος for the flesh, an angel of Satan to buffet me, that I should not be exalted overmuch. Concerning this thing I besought the Lord thrice, that it might depart from me. And He has said unto me, My grace is sufficient for thee: for power is perfected in weakness. Most gladly therefore will I rather glory in my infirmities, that the power of Christ may overshadow me' (2 Co 12:7-9); 'Ye know that because of an infirmity of the flesh I preached the gospel unto you the first time: and that which was a trial to you in my flesh ye despised not, nor rejected; but ye received me as an angel of God, even as Christ Jesus. Where then is that gratulation of yourselves? For I bear you witness, that, if possible, ye would have plucked out your eyes and given them to me' (Gal 4:13-18).

These two passages have generally been taken as referring to one and the same 'infirmity'
Lightfoot remarks that they 'so closely resemble each other, that it is not unnatural to suppose the allusion to be the same in both.' In the last analysis, this opinion will be found to justify itself; but at present there is in fact no exegetical bond betwixt them. The two descriptions differ in detail; but they will ultimately be found to refer to different stages or aspects of one disease. The traditional modes of interpreting the apostle's 'infirmity' must be briefly glanced at.

1. External Persecutions.—So thought Chrysostom, Theodoret, Theophylact, and others. To this opinion there are many objections, one of which at least is invincible. The first incidence of this 'infirmity' precedes the writing of the Second Epistle to the Corinthians by some fourteen years. But some ten years intervened between that event and the conversion of Paul, and these years had their own tale of persecution.

2. Spiritual Trials.—So thought Gerson, Luther, Calvin, and others. The list of these trials is tinted by the fancy or experience of individual authors. Among the items in this catalogue are suggestions of Satan, blasphemous thoughts, stings of conscience, failure in duty, proneness to despair, and similar defects. Such weaknesses could not have been an occasion of glory, but rather of shame, to the subject of them.

3. Carnal Thoughts.—So thought Gregory the Great, Aquinas, Bellarmine, and others. The Vulgate translates the σκόλοψ τῆς σαρκός by stimulus carnis, and the suggestion was welcome to the vexed ascetic mood. This view has been rightly repelled as 'an outrage on the great apostle.' Paul claimed for himself the charisma of continuance, and the lofty spiritual tenor of his life amply justifies his claim in this respect.

4. Bodily Disease.—That is the only version which gives due weight to the fact that the 'infirmity' was in the flesh, and therefore something inseparable from the body of the apostle. It is not possible to assign off-hand an exact meaning to σκόλοψ. Etymologically, it might signify either a thorn or a stake. The former is more frequent in the Septuagint; the latter in classical writers. But the context is itself decisive. The mediating term between the thorn and the stake is the buffeting of an angel of Satan, or angel of punishment (cf. Book of Enoch, 56). That buffeting is metaphorically the measure of the pain inflicted by the σκόλοψ. A thorn is clearly too weak a rendering; for a thorn may be removed with ease, or may remain without discomfort. But the buffeting of an angel of Satan has for its counterpart the agony of impalement. For Paul, therefore, the σκόλοψ was no trifling prickle, but a ghastly stake.

From the first of the preceding passages we learn that the features of the apostle's 'infirmity' were the following:—

(a) Agonizing bodily pain.
(b) Corresponding mental depression.
(c) Certain residual effects of this illness.

From the second of the preceding passages we learn that the features of the apostle's 'infirmity' were the following:—

(a) It was a trial to the Galatians.
(b) It was provocative of contempt and loathing.
(c) It was something crippling or repulsive, or both.

These passages, either singly or in combination, must be held to exclude such loose imaginations as are conveyed in the suggestions of mere baldness or earache or haemorrhoids or animalcula capitis. Findlay mentions 'some obscure form of hysteria.' That is an unfortunate conjecture. As a matter of fact, hysterical men are rare, and hysterical heroes are chimerical! Other theories are acute ophthalmia, epilepsy, malarial fever, headache, insanity, and melancholy. Some of these are at least plausible, and none of them without a claim to attention.

1. Acute Ophthalmia.—This view has been favoured by Howson, Lewin, Farrar, Plumptre, and many others. The general argument in support of it is cumulative. Thus the trouble is traced to the 'light from heaven, above the brightness of the sun,' that shone round Paul on the way to Damascus. That excess of light is believed to have left his eyes weak and inflamed; a condition aggravated by the sojourn in Arabia. Weakness of the eyes is also discovered in the use of the 'large letters' to the Galatians (Gal 6:11), and in the employment of an amanuensis (2 Th 3:17 etc.). Positive evidence of defective eyesight is found in Paul 'earnestly beholding' (ἀρεσκόντως) the council, and in his failure to recognize the high priest at his trial, though he must have seen him a few days previously. It is further pointed out that acute ophthalmia suits the pain implied in the σκόλοψ, and the deformity contained in the loathing (ἐξονθεν).
But this view cannot be accepted. It assumes a twofold cause for the ‘infirmity.’ On the one hand, it is ascribed to ‘the light from heaven;’ on the other, to the buffeting of ‘an angel of Satan.’ But what fellowship have these with each other? This theory is based on a misconception to begin with. The blindness of the apostle was really temporary, and was completely cured. That is stated in the use of the verb ἀναβλέπειν, which is used twice in this connexion (Ac 9:18 22:18). It is the regular term for denoting perfect recovery from blindness, whether that be congenital or acquired (Jn 9:11, Mk 8:25). Further, the term ἀναβλέπειν is so far from denoting feeble sight, that it is constantly applied to keenness or clearness of vision. It occurs in the following under various disguises—

‘The eyes of all were fastened on Jesus’ (Lk 4:20).

‘A certain maid earnestly looked on Peter’ (Lk 22:66).

‘They looked steadfastly toward heaven’ (Ac 1:10).

‘Peter fastened his eyes on the lame man’ (Ac 3:4).

‘They said, Why look ye so earnestly on us?’ (Ac 3:19).

‘The council looked earnestly on Stephen’ (Ac 6:15).

‘Stephen looked up steadfastly into heaven’ (Ac 7:56).

‘Cornelius looked on the angel’ (Ac 10:1).

‘Peter fastened his eyes on the sheet’ (Ac 11:9).

‘Paul set his eyes on Elymas (Etoimas)’ (Ac 13:9).

‘Paul steadfastly beheld the cripple’ (Ac 14:9).

‘Paul earnestly beheld the council’ (Ac 23:1).

‘Israel could not steadfastly behold the face of Moses’ (2 Co 3:7).

‘Moses veiled his face that Israel might not steadfastly look’ (2 Co 3:18).

Acute ophthalmia is thus a baseless conjecture, opposed to the statements of Scripture. The ‘large letters’ and the use of an amanuensis are easily explained without the help of this hypothesis. The mistake about the high priest was not unnatural, seeing that he wore no distinctive dress, except when on duty in the temple. The reference to the Galatians as ready to ‘dig out’ their eyes is in essence proverbial (Ps. 17:8, Pr 7:2, etc.). It recalls an impulsive enthusiasm which spurned conventional restraints. It was no weak-eyed adventurer who frightened Elymas out of his wits, nor a blear-eyed pretender who called for the ‘books but especially the parchments’ from Troas (2 Ti 4:13). On many grounds the theory of acute ophthalmia must be discarded as untenable.

2. Epilepsy.—This view is associated with the names of Holsten, Ewald, Hausrat, v. Hofmann, Klöpper, Lightfoot, Schaff, Schmiedel, Krenkel, and others. Its acceptance may seem to some to be fraught with danger to dogmatic interests. That fear may be instantly dismissed. Epilepsy is not of necessity incompatible with a vigorous intellectual life. Among distinguished epileptics may be named Julius Caesar, Mohammed, King Alfred, Savonarola, Peter the Great, and Napoleon I. It is clear that Paul was of a nervous temperament, but from that fact alone no inference of epilepsy is permissible. Strauss is not to be followed here. Farrar would even attach the hypothesis of epilepsy to that of acute ophthalmia, because connected with the cerebral disturbances in severe cases. That conclusion requires the support of analogous cases, but these are not forthcoming. It finds no corroboration whatever from the narrative of Paul’s career. It would make him a prodigy, unmatched even by the much-enduring and crafty Ulysses. As good as blind and a confirmed epileptic! Yet he weathered every storm!

Lightfoot takes the case of King Alfred as a close parallel to that of Paul. This ruler in his youth is said to have suffered from some kind of eruption which caused him such torture that he began to despair of life. He feared that his bodily infirmities, or perhaps leprosy or blindness, might render him incapable of exercising the royal power or despicable in the sight of the world. From such a plague he prayed to be delivered, and all signs of his malady disappeared not long afterwards. But at the very moment that he had taken to himself a wife in the midst of the marriage festivities, the evil against which he had prayed overtook him. ‘He was suddenly seized with fear and trembling; and to the very hour that Asser wrote, to a good old age, he was never sure of not being attacked by it. There were instants when this visitation seemed to render him incapable of any exertion, either intellectual or bodily; but the repose of a day, a night, or even an hour would always raise his courage again.’
Asser’s confused account shows that the youth of Alfred was marred by a complication of disorders, and his manhood by a form of epilepsy (petit mal). Lightfoot singles out certain features in the preceding description as analogous to the case of Paul. These are the despair of life, the fear of blindness or becoming contemptible, the prayer for deliverance, the sudden seizure with fear and trembling, the liability to recurrences, and the consequent prostration. The diagnosis of epilepsy must here rest on these three last symptoms. But while fear and trembling, repeated attacks, and temporary incapacity are mentioned likewise in the connexion with the apostle’s ‘infirmity,’ the sequel shows that these must bear quite another meaning and belong to a wholly different disease. No real analogy exists between the two cases. The attempted comparison is indeed vitiated by the arbitrary selection of special symptoms.

Krenkel has sought a new basis for the theory of epilepsy in the peculiar remark of Paul concerning his ‘infirmity:’ ‘Ye did not set it at naught, nor did ye spit it out’ (οὐκ ἐξουθενήσατε οὐδὲ ἐξεπτύσατε, Gal 4:14). This at first sight seems to press the latter term unduly; but it is always found in its literal sense of spitting out. Krenkel therefore emphasizes the fact that persons witnessing an epileptic seizure were accustomed to spit out. But more precisely we note that Plautus regards the epileptic himself as the object of the spitting: ‘Et illic isti qui insputatur morbus interdum venit. Et eum morbum mi esse ut qui me opus insputarier. Ne verere, multos iste morbus homines macerat, quibus insputari saluti fuit’ (Cap. iii. iv. 18, 19, 22, 23). Pliny explains the Roman antipathy to the eating of quails by alleging the liability of these birds to epilepsy: ‘Comitalem propter morbum despi sui etum’ (H. N. x. 23). But he knew of many occasions for the superstitious practice of spitting; epilepsy being the chief: ‘Despuimus comitiales morbos, hoc est, contagia regerimus’ (H. N. xxviii. 7). Fascinations were thus repelled, and portents attendant upon meeting a person lame in the right foot. Those who indulged extravagant hopes appeased the gods by spitting into their lap. Those taking medicine thrice spat on the ground. Pliny's additional examples, some amusing and others unsavoury, need not be quoted. It is evident that, if the Galatians were like the Romans in these matters, lameness in the right foot not less than epilepsy would claim their attention. Krenkel, however, would strengthen his thesis by dragging in the case of the lad at the Mount of Transfiguration. The result is unwittingly most grotesque. It makes Paul an epileptic idiot! For the ailment of the boy was undoubtedly epileptic idiocy. Krenkel’s theory thus fails entirely.

But a theory of epilepsy can never maintain itself. In the first place, it is contradicted by the σκόλοφ. The unconsciousness of the epileptic state is void of pain. On recovery from an attack there may be some headache or some complaint of bruising. But there is nothing corresponding to the intense and prolonged agony of a ‘stake for the flesh.’ In the second place, it is impossible to find room in the history of the apostle for such an impetuous disorder. Had there been any taint of this sort in the constitution of Paul, that was bound to have manifested itself on many occasions, as when stoned at Lystra, mobbed at Jerusalem, or pleading repeatedly for his life. Yet under these most trying circumstances, there arises not the remotest suspicion of a disabling attack of illness. Certain uncharitable Corinthians declared that Paul was beside himself, and Festus called him mad. But no one ever ventured to make what was in some respects a more damaging charge by asserting that he was the victim of the disease which Greek and Roman called ‘sacred’ and deemed accursed.

3. Malarial Fever.—This is Ramsay’s conjecture. He holds that Paul was overtaken in Pamphylia by a species of chronic malarial fever. Any constitutional weakness was liable to be brought out by the sudden plunge into the enervating atmosphere of Pamphylia, after the fatigue, hardship, and excitement of the work in Cyprus, culminating in the supreme effort at Paphos. The natural treatment for such an illness was removal to the higher ground of the interior, Antioch being a suitable place. In some constitutions, malarial fever tends to recur in very distressing and prostrating paroxysms whenever one’s energies are taxed for a great effort. Such an attack for the time being absolutely incapacitating; the sufferer can only lie and feel
himself a shaking and helpless weakling, when he ought to be at work. He feels contempt and loathing for himself, and believes that others feel equal contempt and loathing. In the publicity of Oriental life, Paul could have no privacy. In every paroxysm he would lie exposed to the pity or contempt of strangers. If he were first seen in a Galatian house or village, lying in the mud on the shady side of a wall for two hours shaking like an aspen leaf, the gratitude that he expresses to the Galatians, because they did not despise nor reject his infirmity, was natural and deserved. Ramsay finds strong corroboration of this view in the phrase, 'a stake in the flesh.' That is the peculiar headache which accompanies the paroxysms, and described by several persons as 'like a red-hot bar thrust through the forehead.'

But against this interpretation of Paul's 'infirmity' there are several decided objections. Self-abhorrence on the part of a patient suffering from chronic malarial fever is a novel symptom, unknown to clinical medicine. Headache also is not at all the constant and aggravated feature of this fever which the theory demands. Another clamant question is whether this illness could reasonably have called forth the contempt and loathing of the Galatians. The answer must still be in the negative, unless something very exceptional be put in evidence. In Eastern lands the spectacle of a wayfarer struck down in circumstances similar to the preceding is by no means uncommon. The sufferer may be treated at worst with indifference; never with contempt and loathing. The latter sentiment would be intelligible, could it be shown that the Galatians regarded malarial fever as a sacred disease; for it is not in itself repulsive. Ramsay quotes the suggestion of Hogarth to the effect that this ailment was often inflicted by the God on those approaching the sanctuary in impurity. But it is extremely doubtful if malarial fever were endemic in the Galatian highlands at all. Pisidian Antioc, the scene of the incident, is about 3600 feet above the sea, and that ought to have placed it well beyond the dangerous zone. Its immunity in this respect is to be inferred in the choice of it as a health resort by these travellers. If Paul were suffering from malarial fever, he was not in the least likely to seek recovery in a fever-haunted district. This theory, anyhow, is inadequate to the occasion, as it gives too slight a meaning to the 'stake for the flesh,' and fails to account for the suppressed contempt and loathing of the Galatians. It also overlooks other points of importance to be dealt with in the sequel.

(To be continued.)

Contributions and Comments.

The Confusion of Tongues.

In the 11th chapter of Genesis we have a primeval account of a yet more primeval occurrence, viz. the confounding of human language, by a stroke from which mankind has never yet recovered. Generation after generation of Bible readers has taken for granted that this stroke was a miraculous one, yet there is nothing whatever in the narrative to say so. 'Go to, let us go down, and there confound their language,' does not necessarily imply the use of supernatural means to effect the purpose. It was more probably accomplished by a natural process. May we not consider the matter in the light thrown in recent years on such subjects by the progress of historical and linguistic study?

Can we not imagine that the human race, possessing in its comparative infancy one homogeneous speech, became in the course of its wanderings separated into various tribes or peoples, inhabiting districts divided from one another by mountain chains or broad rivers, with few facilities for trade or intercourse, and no literature whatever? In these circumstances, would not each separate tribe or nation develop the original speech into forms which its inaccessible neighbours could not comprehend? We know how this has gone on of old time in the British Isles; how a Highlander and an East Anglian and a Yorkshireman and a Cornishman have difficulty in talking together. We detect our Transatlantic cousins at once by their accent, despite the glorious literary heritage to which they and we are alike heirs. Geographical