The 30.1 Aristotelian problem is the most comprehensive and organized analysis of the phenomenon of melancholy in Aristotelian Corpus. Although, there are serious doubts if this text, as it was survived today, was written by Aristotle (384–322 B.C.) or by one of his followers—perhaps Theophrastus (372–287 B.C.)—nevertheless it is widely accepted that reflects the authentic ideas of Aristotle. The two counterbalancing sentiments, this of mirthfulness and this of moroseness, which are attributed in the text to the “melancholic” persons, introduce the primary difficulty, in order to be understood the unclear notion of melancholy in this work. All the previous approaches understood these sentiments, as diversity in the symptomatology of melancholy that is the ancient mental disorder which is similar to modern depression. But according to our point of view, this text is a study of pathological physiology, underling the significant role of black bile as the causative factor of the above two emotions in humans under the specific influence of temperature. Humor’s overheat had as result the mirthfulness and its overcooling the moroseness. The reference to the healthy people and the graduation of the quantity of black bile in human body, as little, middle and massive, which is associated to the mentally ill persons, indicate that these two emotions were not only recognized as pathological manifestations of patients, but also as temperamental characteristics of healthy people, which arise from the same alteration of this humor, when its quantity is limited. Examining deeper the psychopathological aspect of this content, we may assume that, due to the fact mirthfulness was presented in the form of excessive enthusiasm, passion and courage and on the other hand moroseness by the distinctive elements of irrational fear, indolence and absurdity, the first one referred to mania and the second to melancholy, since their descriptions correspond to the basic features of each disease. Therefore, under the new reading, black bile should be perceived as the common source of the above two mental disorders, expressing the Aristotelian version of their correlation, which preoccupied many of the ancient Greek physicians as Themison (1st century B.C.) and his followers, Rufus of Ephesus (1st century A.D.), Galen (130–201 A.D.) and Aretaeus of Cappadocia (2nd century A.D.). This one probably derived from the difficulty to be fixed the limits...
Introduction

The most extensive and well organized analysis of melancholy in Corpus Aristotelicum is found in the work, Problemata 30.1. Although there are serious doubts if this text, as it is survived today, was written by Aristotle (384–322 B.C.) or by one of his followers — perhaps Theophrastus (372–287 B.C.) — nevertheless it is widely accepted that reflects the authentic ideas of Aristotle.

The two counterbalancing sentiments, this of mirthfulness and this of moroseness, which are attributed in the text to the “melancholic” persons, introduce the primary difficulty, in order to be understood the unclear notion of melancholy in this work. In the previous interpretations, these two contravening sentiments were considered as two different manifestations of the patients suffering of melancholy.

At this point, it should be pointed out that in antiquity the term “melancholy” was referring to the diseases which had as cause the excessive accumulation of black bile. These included the mental disorder similar to modern depression and all the diseases of the body originated from this humor.

The term “melancholy” on 30.1 Aristotelian problem

Aristotle used as pretext the introductory question, why distinguished intellectuals and politicians seem to be “melancholics”, in order to present his theory about the role of black bile and its impact in human psychology. Under the influence of temperature started the disease of mania and melancholy, as they were perceived in antiquity. Also this model was extended in healthy people, in order to explain their sentiments and comportments.

It is very important to remember that the term “melancholy” was never used in any work of Corpus Aristotelicum, nor in this one as one could expect, instead it was used the term “malancholics”. The main subject here is black bile, which is believed to be composed by heat or cold, whereas is cold by nature. The fundamental idea lies on its transformation. If becomes hooter, provokes cheerfulness and if colder, sullenness. This alteration is also reinforced by the other humor’s element, the “pneuma”, that is the air, which helps the changes of the temperature. Therefore, the comparison of black bile with wine and drunkenness was an evidential example of this theory due to their similarity in element components regarding the first one and its effect on the man regarding the second.

Having in mind that the two counterbalancing sentiments are attributed in the text to “melancholics” and also that black bile is considered as “ēthopoios” (the factor which defines human moral), we lead to the conclusion that the term “melancholics” should not be confused with the similar one used by ancient doctors for those who suffer from the mental disorder of melancholy. In this case, we believe that on 30.1 Aristotelian problem are described the men, whose psychology is influenced by black bile, which under the above specific procedure will induce the two different results either in the form of the above two mental diseases, regarding ill people or as two counterbalancing temperaments, regarding the healthy.

The fact that mirthfulness was mainly presented in the text by over excitation and uncontrolled lust or grit and on the other hand moroseness between these two diseases, because anger and fear could be present in both situations provoking the confusion. Finally, we should reject the hypothesis of bipolar disorder’s presentation, because text’s generality does not allow the limitation to only one pathological phenomenon, while the absence of particular data on the duration and sequence of the two different emotional states acts as a deterrent for such a conclusion.

Key words: Aristotelian Problem 30.1, melancholy, bipolar disorders.
by irrational fear, indolence and absurdity, which were the basic distinctive features in mania and melancholy, allows us to conclude that Aristotle by the term “melancholics” meant mania and melancholy (depression) too, having also in mind that he characterized these comportments as “manic” and “melancholic” manifestations. According to the above, all the mythical or historic personages mentioned in the text, can be classified in each disease (Hercules, Ajax, Sibyllai, Bacchics, Marakos the Syracusian, Archelaos of Macedonia in mania and Bellerephon, Empedocles, Plato, Socrates in Melancholy).

Very useful was the example of suicide by hanging of young and elderly, which served as an explanatory lesson simultaneously for these two diseases and for the pathological mechanism of heat and cold, paralleled too to the analogous activity and effect of wine and drunkenness. That is the association of youth to heat and therefore mania and of old age to cold and melancholy. Besides, it was widely accepted by the ancient Greek doctors that these two mental disorders were related to these groups.

On the other hand, the resemblance of the above elements to the proportional feelings and the consecutive comportments presented in the personality of healthy people probably led to the acceptance that there is a common cause for both ill and healthy men, this of black bile. But this correlation entailed the risk of confusing healthy people with patients. Therefore it was necessary their distinction, which was achieved by the gradation of the quantity of black bile in the human body, as small, middle and massive. Limited amounts of the humor were linked to milder manifestations and associated to healthy people and on the other hand greater to acute symptoms and the patients.

This new interpretation convinces the discrepancy that can be raised in the birth or the understanding of these antithetical sentiments, if they are assigned only to melancholy. Besides, we should not forget that melancholy was distinguished from the other mental disorders by the moroseness which characterized the patients.

The only question in this different approach concerns the absence of a definite declaration that overheated black bile can generate mania. But this idea, which in this text derives inferentially, was not out of the Aristotelian though, since it is declared in the Aristotelian work, Problemat 1.12. About the introductory question, we assume that it was used as pretext, in order to be expounded the theory of the action of the black bile in human body, which was believed to have a fundamental role in the indissoluble relation of body and soul-mind. In addition, this new reading comes in analogy with the problem of interrelation of mania and melancholy, which had preoccupied many ancient Greek doctors. This probably derived from the difficulty to be fixed the limits between these two disorders, because although the special clinical image of each disease indicated a different illness, the observation of anger and fear, which were probable in both situations and differentiated from the predominant characteristics in each case, even if they did not override them, provoked the confusion.

This one was expressed in many ways. The followers of Themison (1st century B.C.) had considered melancholy as a form of mania as Caelius Aurelianus (5th century A.D.) informs us. Rufus of Ephesus (1st century A.D.) and Galen (130–201 A.D.) tried to describe a mechanism that produced black bile according to the principal that overheat of yellow bile, which was the main factor for mania, gave this result. Rufus of Ephesus added also overheating, while pointing that melancholic humor can be present by nature to some people, letting us to believe that this Aristotelian Problem was his prototype, but replacing black bile with yellow. Aretaeus of Cappadocia (2nd century A.D.) combined these two main ideas, thinking that melancholy is the start or part of mania presenting a pathological mechanism having as tool the dryness, which was an obvious result of overheat. In conclusion, we should reject the hypothesis of bipolar disorder’s presentation, because text’s generality does not allow the limitation to only one disease, while the absence of particular data on the duration and sequence of the two different emotional states acts as a deterrent for such a conclusion.
Η προσέγγιση της μελαγχολίας στο 30.1 Πρόβλημα του Corpus Aristotelicum

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Το 30.1 Πρόβλημα του Corpus Aristotelicum (Αριστοτελικό Σύνταγμα) αποτελεί την πιο καλά δομημένη ανάλυση της μελαγχολίας που υπάρχει σε αυτή τη συλλογή. Παρά τις σοβαρές αμφιβολίες που γεννώνται για το αν το συγκεκριμένο κείμενο, όπως διασώθηκε, είναι γραμμένο από τον ίδιο τον Αριστοτέλη (384–322 π.Χ.) ή κάποιον από τους οπαδούς του –με πιθανότερο τον Θεόφραστο (372–287 π.Χ.)– εντούτοις θεωρείται ότι εκφράζει τις πραγματικές αριστοτελικές αντιλήψεις. Τα δύο αντιρροπά συναισθήματα, της ευθυμίας και της δυσθυμίας, που αποδίδονται στους «μελαγχολικούς», συνιστούν την κύρια δυσκολία στο να γίνει αντιληπτή η ασαφής έννοια της μελαγχολίας σε αυτό το έργο. Σε όλες τις προηγούμενες προσεγγίσεις τα παραπάνω έγιναν αντιληπτά ως πολυμορφία στη συμπτωματολογία της μελαγχολίας, δηλαδή της ψυχικής νόσου στην αρχαιότητα που προσομοιάζει στη σύγχρονη κατάθλιψη. Κατά την άποψή μας, το κείμενο αυτό στην πραγματικότητα αποτελεί μια μελέτη παθολογικής φυσιολογίας, στην οποία παρουσιάζεται η αριστοτελική ιδέα για τον καταλυτικό ρόλο της μέλαινας χολής ως αιτιολογικού παράγοντα διαμόρφωσης των δύο αντιρροπών συναισθημάτων στον άνθρωπο. Ο μηχανισμός γέννησής τους στήριχθηκε στη μεταβολή της θερμοκρασίας του χυμού, ώστε η υπερθέρμανσή του να προκαλεί την ευθυμία και η ψύξη τη δυσθυμία. Ωστόσο, η αναφορά στους υγιείς και η διαβάθμιση της ποσότητας της μέλαινας χολής στο ανθρώπινο σώμα σε μικρή, μεσαία και μεγάλη, με την τελευταία να αναγνωρίζεται στους ψυχικά πάσχοντες, υποδεικνύει ότι τα δύο συναισθήματα δεν περιορίζονταν μόνο ως παθολογικές εκδηλώσεις των ασθενών, αλλά λειτουργούσαν ακόμα και ως γνωρίσματα της ιδιοσυγκρασίας των υγιών, τα οποία προέκυπταν από το ίδιο σχήμα. Όπως αναφέρονται στις προηγούμενες μελέτες, η οργή και ο φόβος που αποτελούσαν συνήθως γνωρίσματα της μανίας και της μελαγχολίας αντίστοιχα, ήταν δυνατό να εμφανίστουν και στις δύο αυτές κατάστασες, προκαλώντας σύγχυση. Τέλος, θα πρέπει να απορρίψουμε την υπόθεση της διπολικής διαταραχής, γιατί η γενικότητα των αναφορών φανερώνει ότι δεν αναφέρονται σε ένα μόνο παθολογικό φαινόμενο, ενώ η απουσία σαφών στοιχείων για τη διαδοχή των δύο διαφορετικών συναισθηματικών καταστάσεων λειτουργούν ανασταλτικά ως προς αυτή την ταύτιση.

Λέξεις ευρετηρίου: Αριστοτελικό πρόβλημα 30.1, μελαγχολία, διπολική διαταραχή.
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