The Canons of Hippolytus and Christian Concern with Illness, Health, and Healing

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In this article I examine the theme of illness, health, and healing in the fourth-century Egyptian text, the Canons of Hippolytus. The study seeks to discover what may be distinctive in the Canons as a later reworking of the text known as the Apostolic Tradition. I explore the theme in the Canons under the headings of: (1) the general ministry to the sick by all members of the local church community; (2) the ministry to the sick by those with a charismatic gift of healing; and (3) the ministry to the sick by the bishop and other church leaders. I go on to argue in the light of this analysis that there is a stronger degree of emphasis on this theme in the community that produced the Canons than in other Christian communities outside Egypt for which we have evidence. And I suggest that when this evidence is coupled with evidence from an analysis of the theme in the Egyptian Sacramentary of Sarapion (or Prayers of Sarapion), it may indicate a feature of Christian life that is distinctive to Egypt in terms of the level of interest in, and concern for, this theme in that part of the Christian world in the third and particularly the fourth century.

INTRODUCTION

Ancient societies, as well as modern ones, reflect a concern about illness and health issues, and they developed various methods of responding to the crisis that was posed by sickness for both individual members and indeed for whole communities in the face of contagious illnesses. Early Christian communities, following models provided by Jesus, often showed a deep concern to minister to those who were ill and developed a range of both practical and liturgical responses to illness and to the goal of attaining healing.

In some earlier research on the theme of illness, health, and healing in the mid-fourth-century Egyptian text known as the Sacramentary of
Sarapion, I concluded that the interest in this theme in that text is much more prominent than in the Apostolic Tradition “or perhaps than in any other of the roughly contemporaneous liturgies or Church Orders.” I suggested that the Sacramentary of Sarapion, and therefore the community or communities behind it, reflects “a strong and consistent interest in matters of illness, health, and healing.”

In this paper I propose to explore this theme in the Canons of Hippolytus, a church order from fourth-century, northern Egypt. This text will be used to open a window into some of the contemporary attitudes, ideas, and practices of the Christian community that relate to this subject. Because this document is a reworking of the document known as the Apostolic Tradition, this study will seek to discern what may be distinc-

3. Ibid., 319.
4. An early draft of this paper was presented at the SBL International Congress on Religion held in Melbourne, July 1992, with the title “New Testament Approaches to Illness and Healing in Late Antiquity.” It has been extensively rewritten with some new conclusions.
tive in the Canons on this subject and what may therefore be indicative of fourth-century Egyptian thinking in the community or communities behind the text.

Finally, I will argue that the evidence of the Canons of Hippolytus, when added to that of the Sacramentary of Sarapion, points to an important insight about Christianity in Egypt: that during the third and fourth centuries, at least, the Egyptian Christian community generally had a highly developed interest in illness, health, and healing, perhaps more so than in any other Christian communities for which we have historical data. And papyrological evidence, while it cannot be used for comparative purposes, also testifies to the very significant interest in this theme among Egyptian Christians.6

BACKGROUND TO THE CANONS OF HIPPOLYTUS

The Canons of Hippolytus, originally written in Greek but extant only in an Arabic translation of a lost Coptic version,7 is a collection of thirty-eight canons and represents an adaptation of the Apostolic Tradition, which appears in variant forms in many liturgical documents of the period.8 Rene-Georges Coquin, who edited the Canons in 1966, argued that they come from northern Egypt and date from 336–340 C.E., a dating that had come to be widely accepted.9 More recently, Christoph Markschies has argued that the text in its final form is likely to come from the later fourth or early fifth century, even though the original may have come from about 335.10 It is perhaps a little too early to determine

6. See note 91 below.
7. Since I do not read Arabic, this study will focus on the English translation of the text by Carol Bebawi in The Canons of Hippolytus, ed. P. F. Bradshaw, Alcuin/GROW Liturgical Study 2 (Nottingham: Grove Books, 1987). All English translations in this paper are Bebawi’s.
8. For the Apostolic Tradition, see Bradshaw, Johnson, and Phillips, Apostolic Tradition. Other early Christian documents containing variant forms of the Canons include the Apostolic Constitutions (ca. 380 C.E.), the Epitome of the Apostolic Constitutions, and the Testamentum Domini (ca. 400 C.E.); as well as primary translations (in some cases with significant modifications) in Latin and Sahidic and secondary translations in Arabic, Bohairic, and Ethiopic.
10. Markschies, “Wer schrieb die sogenannte Traditio apostolica?”
whether Markschies’s arguments will be fully accepted. But the real possibility of this later dating certainly needs to be kept in mind. Although for convenience I will speak of “an author” of the *Canons*, I do not mean to exclude the possibility that there could in fact have been more than one person or persons over a period of time who were responsible for the final form of the text.

Scholarship earlier in the twentieth century had dated the *Canons* as the latest of the documents derived from the *Apostolic Tradition*. More recently, the work of Dom B. Botte and Coquin has shown that it is in fact the earliest of the derivative documents and is probably earlier than the only extant text of the *Apostolic Tradition*; therefore, it has considerable interest. And this interest in the *Canons of Hippolytus* is accentuated by the fact that there are now very significant doubts about the traditional views concerning the authorship and textual history of the *Apostolic Tradition*. Paul Bradshaw and his coauthors have already flagged the fact that the *Canons* may have a role to play in helping to determine the early text of the *Apostolic Tradition*, since it may sometimes have preserved earlier readings than the extant texts.

A comparison of the *Canons* with the *Apostolic Tradition* shows that the *Canons* has been added to and modified in a range of important ways to reflect the social and religious conditions and ideas of the Egyptian community that produced it, perhaps a century or so after the final form of the original. We shall see that some of these additions and modifications con-


cern the ministry to the sick. We should note, however, that until the textual history of the *Apostolic Tradition* is clarified further, there will remain, on occasion, some uncertainty as to the exact extent of this reworking.

**OVERVIEW OF HEALTH, ILLNESS, AND HEALING IN THE CANONS OF HIPPOLYTUS**

When we look at the document as a whole, we can observe immediately that three of its thirty-eight canons explicitly concern matters of illness and healing: Canon 8 (concerning those exercising a gift of healing); Canon 24 (concerning the visiting of the sick by the bishop and the appropriate sleeping place of the sick); and Canon 25 (a regulation that deals both with the appointment of a steward of the sick by the bishop and with times of prayer). In addition, more detailed examination indicates that thirteen additional canons contain references to matters relating to health and well-being.¹⁵

Some of these references, though certainly not all, simply repeat the parallel regulations from the *Apostolic Tradition*, as we might expect. Within this latter work, chapters 14 and 29B in Bradshaw, Johnson, and Phillips’s text (Botte’s chapter 24) refer to our theme in some detail.¹⁶

¹⁵. Canon 3 (petition for the gift of healing prayer for the bishop), Canon 5 (deacons serve the sick), Canon 9 (widows have a ministry “of” the sick), Canon 18 (regulations relating to midwives and women after childbirth), Canon 19 (visiting of the sick by catechumens and baptismal exorcisms), Canon 20 (where illness is a valid reason not to undertake the weekly Wednesday and Friday fast nor the forty day fast), Canon 21 (where the sick are encouraged to go to church to receive the “water of prayer” and the “oil of prayer” and where those seriously ill are to receive daily visits from the clergy), Canon 22 (where illness may have prevented someone from knowing the date of Easter; they are then to fast after Pentecost), Canon 27 (where it is noted that regular prayer through the day and night will ensure that one’s disposition remains unaffected by demons), Canon 30 (where provision is made for deacons to take the “reserved sacrament” to a presbyter when he is sick), Canons 33 and 34 (where in both canons clergy are to give the bread of exorcism at special services), and Canon 38 (where, among other things, service of others is enjoined and Matt 25.34–40 is quoted, including the phrase, “I was sick and you visited me”).

¹⁶. Ch. 14, Concerning the Gift of Healing (Bradshaw, Johnson, and Phillips, *Apostolic Tradition*, 80; Botte, *Tradition apostolique*, 32) and ch. 29B, Concerning Gifts for the Sick (Bradshaw, Johnson, and Phillips, *Apostolic Tradition*, 154; Botte, *Tradition apostolique*, 62). We should note, however, that the text of ch. 29B is very uncertain and only exists in the Ethiopic version. Dix, *Apostolic Tradition*, 83, believed that it was probably original, in light of support from the *Canons of Hippolytus* and the *Testamentum Domini*. The textual uncertainty of the *Apostolic Tradition* in its concluding chapters (where there are ch. 42A & B and 43A & B)
Eight other chapters make some reference to it in the course of discussion of other matters. At a very superficial level, then, we can see that the Canons picks up ideas concerning illness and healing in sixteen of its thirty-eight regulations, while in the Apostolic Tradition the number is ten out of forty-three chapters. In percentage terms, forty-two percent of the regulations in the Canons have something to say about health, illness, and healing, but only twenty-three percent of the chapters in the Apostolic Tradition (about half as many) speak in some way of the subject. Furthermore, five of the title headings in the Canons refer explicitly to our theme, but only two of the chapter headings in the Apostolic Tradition do so. However, this needs to be treated with caution, as the Latin text does not have chapter headings.

I have argued in some detail elsewhere that the Apostolic Tradition reflects a serious concern with ministry to sick members of the community. What is clear from the foregoing brief overview of the Canons of Hippolytus and the Apostolic Tradition is that reference is made to the subject of health, illness, and healing considerably more frequently in the former work than in the latter. At face value this seems to indicate that these issues were of significantly greater concern to the community that adapted this document in fourth-century, northern Egypt. And this is a thesis that, as I hope to show, is borne out by detailed analysis and comparison of the two texts. Before beginning this analysis, however, it will be useful to note that from the time of the churches of the New Testament period, ministry to the sick was taken very seriously, and we can identify several dimensions to this approach.

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17. Ch. 5 (oil for the sick); ch. 15 (demon possession); ch. 20 (catechumens—have they visited the sick?—and the exorcism of catechumens); ch. 21 (exorcisms at baptism); ch. 26 (catechumens given exorcised bread at the agape); ch. 28 (catechumens to eat exorcised bread in an orderly way at the agape); ch. 34 (deacons to inform the bishop of the sick so he may visit them if he pleases); and ch. 39 (illness the sole reason why deacons may fail to be at church each day).

18. As noted earlier, there has been considerable debate as to whether the Apostolic Tradition may be taken as representative of the early third-century Roman tradition. In 1986/87 while working on this text, I had been persuaded by the affirmative arguments (see Barrett-Lennard, *Christian Healing*, 236–38). However, there is now a growing consensus emerging that this is not likely to be so. A very high degree of caution is now warranted in relation to how this text is used.

The first dimension was an all-member, general obligation to care for the sick. Passages such as Matthew 25.36, 43–44 provide evidence that the early Christian communities saw it to be a responsibility for all members to visit those who were sick. Such a ministry to the sick was seen to be a calling for all Christians, while at the same time some members were recognized as having a particular charism relating to prayers for healing of the sick.

Paul’s references in 1 Corinthians 12 (vv. 9, 28, 30) to people with “gifts of healings” (χαρίσματα ιαμάτων) point to a second dimension of the church’s ministry to the sick. These verses provide evidence of the existence of a charismatic tradition in which individual Christians were understood to have received a particular charism of healing that they exercised among members of their local congregation.20 These references indicate that such was the case at least in Corinth, and it was probably true of other Pauline Christian communities as well, since nothing in Paul’s language suggests that it was unique to the Corinthian community.

And we can see evidence of a third dimension to the church’s care for sick members in the Palestinian community or communities reflected in the Epistle of James. Here the leadership of the church is regarded as having a special responsibility for the sick and a duty to pray for the healing of sick members.21 And as C. H. Harris noted long ago, the commission of Jesus in Matthew 10.1 points to the likelihood that from the earliest times, leaders of the Christian community saw themselves as having a responsibility for ministry to the sick among their members.22

There is a significant body of evidence, then, indicating that ministry to the sick was an important aspect of the overall ministry of many early Christian communities. And we have identified three dimensions to this ministry: (1) ministry by the whole community to the sick; (2) ministry by

21. See, e.g., the articles by Eduard Cothernet, “Healing as a Sign of the Kingdom, and Anointing the Sick” and Elie Mélia, “The Sacrament of the Anointing of the Sick: Its Historical Development and Current Practice,” both in Temple of the Holy Spirit: Sickness and Death of the Christian in the Liturgy, trans. Matthew J. O’Connell (New York: Pueblo, 1983); and Thomas, Devil, Disease, and Deliverance, 17–37. Mélia brings out in this article the fact that in some of the eastern churches it is still the practice to have a number of clergy (ideally seven) available for the sacrament of anointing the sick, if possible.
22. Harris, “Visitation of the Sick,” 475: “Then Jesus summoned his twelve disciples and gave them authority over unclean spirits, to cast them out, and to cure every disease and every sickness” (Matt 10.1).
particular individuals with a charism of healing; and (3) ministry to the sick by the leadership of the churches. And all three operated alongside one another. I have argued elsewhere that a similar pattern—albeit a more developed one than we see in the New Testament—is to be seen in the *Apostolic Tradition.* Likewise, this framework of approach to ministry to the sick by early Christians will be a useful tool in understanding the material in the *Canons.*

In the remainder of this article, I will analyze the material concerning ministry to the sick in the *Canons* as it relates to each of these three dimensions. The third dimension will constitute the greater part of this analysis. Finally, we will briefly observe some evidence of steps that the sick themselves may have taken in relation to availing themselves of the church’s resources for healing.

**DIMENSION 1: GENERAL MINISTRY TO THE SICK BY ALL MEMBERS OF THE CHURCH, AS WELL AS BY PARTICULAR GROUPS WITHIN THE CHURCHES**

The references to this generalized ministry to the sick are not extensive in either the *Apostolic Tradition* or the *Canons of Hippolytus.* There is, however, some evidence of this pattern. For example, the concluding homily to the *Canons* (unparalleled in the *Apostolic Tradition*) points to the importance of visiting the sick among other duties of all Christians when it cites Matthew 25.34–40.

We should also observe that in the *Canons,* as in the *Apostolic Tradition,* catechumens at the time of baptismal preparation are asked (or, more correctly, their sponsors are asked) whether the candidates have kept the commandments, visited the sick, and given to the needy. This is a significant reference because it indicates that from the beginning of their Christian formation, members were taught that this was an important aspect of their ministry and calling as members of the Christian community.

Ministry to the sick was also seen as a responsibility of the order of widows. Canon 9 refers to three functions of the widows, one of which

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23. Barrett-Lennard, *Christian Healing,* 244–51. In that work I identified two primary dimensions to the church’s ministry to the sick, whereas now I would want to identify a third dimension—that of the general obligation on all members of the Christian community to care for the sick.


was “ministry to the sick,”\textsuperscript{26} and we know from other church orders that this was an important function of the minor order of widows.\textsuperscript{27} It is also significant that this function of the order of widows is not mentioned in the parallel regulation in the \textit{Apostolic Tradition}, as Bradshaw noted.\textsuperscript{28} There is no reference here to the specific ministry of widows to female members of the Christian community, but typically this was one of their responsibilities in early Christian communities, and we could safely assume that it was also one in Christian communities of northern Egypt in this period.

In summary, in the \textit{Canons} specific evidence of this ministry to the sick by the whole community and by particular groups is not extensive. However, the pointers we have been given, in the context of evidence from elsewhere that the early Christian communities took this ministry very seriously, suggest it is highly likely that it was a marked feature of this community.

We should note that the social dimensions of such a program of visitation for the sick by general members of the Christian community, as well as by particular groups within them such as the catechumens and widows, were potentially very significant.\textsuperscript{29} Modern research in psychology and other fields has provided a scientific basis for understanding something of the therapeutic benefits of a positive, caring, and hope-inducing environment.\textsuperscript{30}

\begin{enumerate}
\item Testamentum Domini 1.40 (J. Cooper and A. J. Maclean, \textit{The Testament of Our Lord} [Edinburgh: T&T Clark, 1902], 107); Didascalia 15 (\textit{The Didascalia Apostolorum in Syriac}, ed. and trans. A. Vööbus, CSCO 401–402, 407–408 [Louvain: Secrétariat du CorpusSCO, 1979], 407:150). While this role seems to be recognized, the extended nature of this chapter on the role of widows may suggest that, due to what was seen as inappropriate visiting, visitation by widows was being curtailed and deacons and deaconesses were being encouraged in the role of visiting and caring for the sick (cf. \textit{Didascalia} 16 [CSCO 407:158]). Bradshaw, \textit{Canons of Hippolytus}, 16, notes that it is also a function of widows in the \textit{Apostolic Church Order} 21. See also Bonnie B. Thurston, \textit{The Widows: A Women’s Community Ministry in the Early Church} (Minneapolis: Fortress, 1989).
\item Rodeney Stark, \textit{The Rise of Christianity} (San Francisco: Harper Collins, 1997), ch. 4, has drawn attention from a sociological viewpoint to the very significant impact that Christian ministry to the sick may have had.
\end{enumerate}
DIMENSION 2: MINISTRY TO THE SICK BY THOSE WITH A CHARISMATIC GIFT OF HEALING

In the *Apostolic Tradition* we are given only a glimpse of the existence of the charismatic tradition of healing, and this is also true of the *Canons of Hippolytus*, where we find reference to it in Canon 8. It is very likely that during the third and fourth centuries this charismatic tradition was in the process of being subsumed into the structures of an increasingly institutionalized church.

A comparison of the parallel regulations from our two documents will be helpful:

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<th><em>Canons of Hippolytus</em>, Canon 8</th>
<th><em>Apostolic Tradition</em>, Chapter 14</th>
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<td>Concerning the Gift of Healing</td>
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If someone asks for his ordination saying, “I have received the gift of healing,” he is to be ordained only when the thing is manifest and if the healing done by him comes from God.31

[δέ] If one says, “I received gifts of healing through a revelation,” hand shall not be laid on him, for [γάρ] the work itself will reveal if he speaks [the] truth.32

These regulations occur in the context of an outline of ordination procedures. And when we compare the ordination sections in the extant form of the two documents generally, it is clear that the author of the *Canons* feels some freedom to adapt the original text of his model here, as he does elsewhere. As Bradshaw observes, he has a concern to make the document speak more contemporaneously to the conditions of his own church.33

The author of the *Canons of Hippolytus* retains this regulation concerning those with a gift of healing but modifies it from the form in the *Apostolic Tradition*,34 while at the same time he omits all reference to

31. Bradshaw, *Canons of Hippolytus*, 16. It concludes with the words, “A presbyter, when his wife has given birth, is not to be excluded,” the meaning of which is rather obscure.

32. Bradshaw, Johnson, and Phillips, *Apostolic Tradition*, 80 (Botte, *Tradition apostolique*, 32). The Latin text is missing for this chapter (along with other chapters—see Bradshaw, Johnson, and Phillips, *Apostolic Tradition*, 15, 80), and this section is taken from the Sahidic.


34. It should be borne in mind that quite a number of scholars have now argued that the ordination prayers in the *Apostolic Tradition* may represent different strata that have undergone modification over the third and fourth centuries (see Baldovin, “Hippolytus,” 535–38, who summarizes some of the recent conclusions). In the light of this, very considerable caution is needed about the ordination prayers of the *Apostolic Tradition* and possible original strata within them. We should note, though,
another minor order (virgins). And this editorial activity seems to suggest that the basic regulation was seen as having relevance but that some adaptation of it was necessary.

There is some uncertainty as to exactly what the regulation in the *Apostolic Tradition* concerning those with a gift of healing means. Bradshaw, Johnson, and Phillips suggest that it is resisting the creation of a separate, officially appointed order of healers. That may indeed be so, but it also points to the likelihood that there were some members in the community from which it came who believed that a gift of healing was a sufficient ground for ordination of some kind and that the matter had caused some tension and hence required regulation.

And the regulation as it stands now in the *Canons* has moved from the general statement of the *Apostolic Tradition* (“If one says, ‘I received gifts of healing . . .’”) to the more specific statement: “If someone asks for his ordination saying, ‘I have received the gift of healing. . . .’” The nature of this altered language suggests that the task of regularizing the ministry of those with a gift of healing may have become even more of an issue for the community behind the *Canons*. And if this implies that those with a gift of healing were either more prominent or more numerous, this would accord in a general way with evidence from a variety of sources suggesting that ministry to the sick and prayer for healing were very important to the Christian community in Egypt.

Paul Bradshaw has suggested that the regulation in the *Canons* seems to be indicating that the gift of healing is now seen to belong exclusively

that Bradshaw, Johnson, and Phillips, *Apostolic Tradition*, 15, include ch. 14 in a possible original “core” document, which they believe may go back as early as mid-second century.


36. We might note here Bradshaw’s ten principles for interpreting early Christian liturgical evidence (Paul Bradshaw, *The Search for the Origins of Christian Worship* [New York & Oxford: Oxford University Press, 1992], 56–79). Principle number 9 (ibid., 76) indicates that “only particularly significant, novel, or controverted practices will tend to get mentioned” and principle number 4 (ibid., 68) that “legislation is better evidence for what it proposes to prohibit than for what it seeks to promote.”

37. Note, for example, both the prominence of prayers for healing for the sick in the *Sacramentary of Sarapion* and the evidence of a number of papyrus texts, such as some of the letters in the Paphnutius and Nepheros archives; as well as literary texts indicative of traditions within the ascetic/monastic movement, such as the *Vita Antonii* of Athanasius. These texts are examined in Barrett-Lennard, *Christian Healing*, though no attempt is made in that study to argue that ministry to the sick was more prominent in Egypt than in other Christian centers.
to the ordained ministry. However, this is not the only way of interpreting the wording of the regulation. In my view, Canon 8 in fact shows that there were nonordained people who were exercising a gift of healing and doing so apparently with the support of the church leadership.

This is suggested first by the fact that a request for ordination on the basis of a gift of healing implies that there were already some people not ordained who were exercising such a gift. Second, there is nothing to suggest that everyone who had received a gift of healing would ask to be ordained. It could well be that only some of those with such a gift made this request, and hence there may well have been a number of general members of the community exercising a gift of healing. For those among this group who made a request for ordination, the regulation insists that the authenticity of the gift already being exercised be established first.

This way of understanding the regulation may be supported by the rather radically revised regulation as it appears in Apostolic Constitutions 8.26, which reads: “An exorcist is not ordained. The gift of healing is a grace of God, and is revealed by God; if an exorcist wishes to become a bishop, presbyter, or a deacon, he must be ordained as such.” This text comes from about 380 C.E., and although it is believed to be of Syrian and not Egyptian origin, it does indicate that in another Christian community in the later fourth century, those with a gift of healing—here equated with exorcists—were not necessarily ordained.

This is also the case in the regulation, modified yet again, in the Testamentum Domini (1.47), a text that comes from slightly later than the Apostolic Constitutions. In the Testamentum Domini, the exercise of a
gift of healing is clearly associated with those who are not ordained and is not regarded at all as a ground for ordination.41

These texts suggest that in the East in this period, there was a tradition of individual members of the communities continuing to exercise a gift of healing. It should also be noted, however, that Canon 8 of the Canons of Hippolytus, in contrast to the Apostolic Constitutions and the Testamentum Domini, indicates that possession of an authentic gift of healing is apparently a ground—perhaps even a sufficient ground—for ordination for someone who seeks that office. It is not certain whether this means ordination to the presbyterate or to a minor order of healers. It has usually been taken to mean ordination to the major orders, and that may well be so.42 If this is correct, it suggests at face value that the gift of healing was held in high regard, presumably because it was seen to be of divine origin and perhaps also because of a high value placed on the ministry of caring for the sick in the community.

This analysis suggests, then, that some form of a charismatic healing tradition still existed in the church community that produced the Canons of Hippolytus, despite the fact that a greater institutionalization of the ministry to the sick was occurring in churches during the fourth century. We know that the charismatic tradition of healing does eventually cease altogether in the western church.43 C. H. Harris notes that in the East, however, exorcists were not ordinarily ordained, and this continued to be the case.44

The evidence of the Canons points to the fact that some Christians in Egypt in the fourth century, who were not ordained, could still exercise a charismatic gift of healing but that such an authentic healing gift was also a ground—possibly a sufficient ground—for ordination to a major order.

41. The text reads: “If any one appear in the people to have a gift of healing or of knowledge or of tongues, a hand is not laid on him for the work is manifest. But let them have honour” (Cooper & Maclean, Testament of Our Lord, 114).
42. See Harris, “Visitation of the Sick,” 475; and Bradshaw, Canons of Hippolytus, 16: “The gift of healing now seems to be thought of as belonging exclusively to the ordained ministry.”
43. We know from the letter of Bishop Cornelius of Rome written in about 251 C.E. (cited in Eusebius, Ecclesiastical History 6.43.11) that there was a minor order of exorcists in Rome at that time. It appears now that those with a gift of healing are being seen as exorcists, and as noted above, this is also suggested by the form of the regulation in Apostolic Constitutions 8.26.1–3.
44. Harris, “Visitation of the Sick,” 475.
DIMENSION 3: MINISTRY TO THE SICK BY THE BISHOP AND OTHER CHURCH LEADERS AND OFFICERS

The third dimension of the churches’ ministry to the sick to which I referred above was that of the more official ministry under the leadership of the bishop. Several regulations in the Canons of Hippolytus highlight this role and at some points go significantly beyond what is said in the Apostolic Tradition and beyond the parallel section of this prayer in the Epitome and the Testamentum Domini.45

In the ordination prayer for the bishop in Canon 3, there is a strong statement, unparalleled in the Apostolic Tradition, that concerns the bishop’s role in ministering to the sick: “Give him power to loosen every bond of the oppression of demons, to cure the sick and crush Satan under his feet quickly. . . .”46 This prayer is a central petition in the ordination of the bishop. At the point of being consecrated, a bishop may not necessarily be someone who already had a recognized gift of healing, but this petition in his consecration prayer suggests that curing the sick was one of the roles associated with the episcopal and presbyteral orders.

We should also note that Canon 4, following some confusion in the parallel Apostolic Tradition chapter 7, states that the same prayer as used in the consecration of the bishop is used for the ordination of the presbyter. Canon 4 accordingly omits the whole prayer for the ordination of the presbyter. And this presumably means that this petition, with its exorcistic emphasis and request that he may have the power to “cure the sick,” was also used in relation to ordaining presbyters.47 This suggests that presbyters as well as bishops were seen to have a role in relation to the curing of the sick, although their role here, as in other matters, is under the oversight of the bishop.

Canon 24 focuses on the official role of the bishop’s ministry to the sick in some detail. It represents a significant reworking of the original in the Apostolic Tradition. The two regulations read as follows:

45. These prayers, including that from the Epitome, can be conveniently compared in Bradshaw, Johnson, and Phillips, Apostolic Tradition, 30–31.
46. Canon 3 (Bradshaw, Canons of Hippolytus, 12–13; Coquin, Canons d’Hippolyte, 352–53).
47. Canon 4 (Bradshaw, Canons of Hippolytus, 13; Coquin, Canons d’Hippolyte, 354–55).
Canons of Hippolytus, Canon 24
Concerning the Visit of the Bishop to the Sick; When a Sick Person Has Prayed in Church and Has a Home, He Is to Go There.

A deacon shall accompany the bishop at all times to inform him of everyone’s condition. He is to inform him about each sick person, because it is important for the sick person that the high-priest visits him. He is relieved of his sickness when the bishop goes to him, especially when he prays over him, because the shadow of Peter healed the sick, unless his lifespan is over. The sick are not to sleep in the dormitory, but rather the poor. That is why he who has a home, if he is sick, is not to be moved to the house of God. Rather he is only to pray and then return home.48

Apostolic Tradition, Chapter 34
That It Is Proper for the Deacons to Assist the Bishop.

Let each deacon, with the subdeacon, attend on the bishop. Let it also be told to him who are sick, so that, if it is pleasing to the bishop, he may visit them. For a sick person is greatly consoled when the high priest remembers him.49

The regulation in the Apostolic Tradition is primarily concerned with the general role of the deacons and subdeacons in waiting on the bishop, and it merely notes the particular task of reporting to the bishop the names of any who are ill. But in the Canons the directive is now not primarily about the role of the deacon and subdeacons in waiting on the bishop, although this is mentioned.50 Rather, the focus of the ordinance is now on the sick, and particularly the bishop’s ministry to the sick. What we seem to be observing here are indications of the existence of a carefully organized program to ensure that the bishop, as leader of the Christian community, is advised promptly when any members of the

50. We might note that Bradshaw, Johnson, and Phillips, Apostolic Tradition, 177, have drawn attention to a reference in a third- or fourth-century text known as Pseudo-Clementine Epistula 12 that indicates that deacons have the responsibility of discovering any who may be sick and reporting this to the whole congregation.
community become sick. After the opening sentence, the focus shifts quite markedly to the sick. Clearly the author was concerned not only to delineate the various roles of the clergy in this program, but also to underline the importance for the sick of the community expressing its care of the sick through the bishop, and receiving the benefit of the prayers of the bishop. The bishop’s ministry is seen as pivotal for the restoration of health. The episcopal visit is expected to bring relief—presumably both as a result of a psychological and emotional “lift” resulting from the visit of the community leader and more specifically as a result of the healing prayer which the bishop would make for the sick person.

Clearly the bishop himself is seen as a healer in this text. He is understood to be given a healing power in the course of his ordination as bishop. As we noted earlier, the relevant section of Canon 3 reads: “Give him power to loosen every bond of the oppression of demons, to cure the sick and crush Satan under his feet quickly.” Paul Bradshaw has drawn attention to the fact that in eastern episcopal ordination prayers there is, in contrast to western prayers, an emphasis on the role of the bishop as a healer (see his “Ecumenical Ordination Prayer,” 204, and Canons of Hippolytus, 12).

In chapter 34 of the Apostolic Tradition, which concerns the ministry of the deacons in attending on the bishop and in keeping him informed about the sick, the concluding statement reads: “For a sick person is greatly consoled when the high priest remembers him.” The parallel text in the Canons states: “He [the sick person] is relieved of his sickness when the bishop goes to him, especially when he prays over him, because the shadow of Peter healed the sick, unless his lifespan is over” (Canon 24).

The reference in Acts 5.15 to the shadow of Peter falling on the sick has

51. As we noted earlier, the relevant section of Canon 3 reads: “Give him power to loosen every bond of the oppression of demons, to cure the sick and crush Satan under his feet quickly.” Paul Bradshaw has drawn attention to the fact that in eastern episcopal ordination prayers there is, in contrast to western prayers, an emphasis on the role of the bishop as a healer (see his “Ecumenical Ordination Prayer,” 204, and Canons of Hippolytus, 12).

52. Bradshaw, Johnson, and Phillips, Apostolic Tradition, 176 (Botte, Tradition apostolique, 80).

53. Bradshaw, Canons of Hippolytus, 27 (Coquin, Canons d’Hippolyte, 390–91). It is interesting to note that there is another reference to the shadow of Peter healing the sick in the context of referring to the bishop and his role in the Canons of Athanasius, Canon 14 (The Canons of Athanasius of Alexandria, ed. W. Riedel & W. E. Crum [London: Williams & Norgate, 1904], 26).
been taken by some commentators to border on the magical, and it is interesting that the author of the *Canons* echoes this verse here. Luke himself does not actually say that any healings occurred as a result of Peter’s shadow, nor does he endorse the practice. It is a report of how some people at the popular level were responding to the person of Peter in view of actual healings he was believed to have carried out. However, it does seem clear that the author of the *Canons* believed that healings were effected through Peter’s shadow. The point of the allusion seems to be that Peter was a powerful healer and so is the bishop, thought of as the successor to the apostles. And so this concept of the bishop’s healing role is more dominant in the *Canons*.

We might also note that there is a subtle shift in focus between the parallel phrases in the two documents. In the *Apostolic Tradition* the focus is more on the bishop, whereas in the *Canons* it is on the position of the sick person. In the *Apostolic Tradition* the sick person may receive a visit from the bishop, if the bishop is so inclined. In the Egyptian document this is amended so that the importance of an episcopal visit to a sick individual is stressed. And it goes on to clarify that this importance lies especially in the possibility of the person being “relieved of [his] sickness”—in other words, being healed. This is accomplished, we are told, particularly as a result of the bishop praying over the sick person. And this statement in the *Canons* leads to another aspect of the bishop’s ministry that is of interest.

While the *Canons* conceives of the bishop as a powerful healer, it envisages him primarily using prayer to bring about the healing of the sick. Whereas the *Apostolic Tradition* says in a rather generalised statement: “For a sick person is greatly consoled when the high priest remembers him”, the *Canons* states: “He is relieved of his sickness when the bishop goes to him, especially when he prays over him.” There is a greater expectation of healing in the latter, and the reference to prayer is quite explicit now. There may also be an implied reference to the ritual of

54. But note that Stewart-Sykes, *On the Apostolic Tradition*, 155, argues that it is not clear from the existing text in the *Apostolic Tradition* whether it is the bishop himself who visits or a deacon on his behalf. Nor, he suggests, is the purpose of the visit clear. I would argue on the basis of the importance of the ministry to the sick in the early church that the purpose involved specifically prayer for the sick person in addition to “consolation.” Certainly the reworked statement in the *Canons of Hippolytus* suggests that in the Egyptian community behind this document, the focus was on the bishop visiting the sick person, and the purpose of the visit involved the bishop “praying over” the sick person.

the laying on of hands here in the phrase “prays over him.” In the *Apostolic Tradition*, on the other hand, there is no reference to what the bishop might do, if it “pleased him” to visit a sick person. Very likely he would have prayed and possibly used the laying on of hands. But the *Canons of Hippolytus* is much more explicit about the bishop’s role and about the therapeutic impact of such a visit.

We might note that a limit on the healing power of the bishop is recognized in the situation where a person’s “lifespan is over.” The author of the *Canons* includes an “exception clause” to allow for the possibility of a person not experiencing a restoration of health when their “lifespan is over.” This amounts to a significant recognition that death may be a kind of healing—an “eschatological healing” in the phrase of B. Sesboüé. On occasion, then, death may be understood as a natural outcome to the ministry of healing by the bishops.

*The Use of Therapeutic Agents Blessed by the Bishop*

In the second part of Canon 21, there is a regulation directed at the sick themselves that provides information about some of the therapeutic agents the Christian community made available for the benefit of the sick to assist their healing. The heading of this canon would suggest that it primarily concerns the regular meeting of the Christian community for daily devotions, but the second paragraph reads: “The sick also, it is a healing for them to go to the church to receive the water of prayer and oil of prayer, unless the sick person is seriously ill and close to death: the clergy shall visit him each day, those who know him.”

56. The phrase “prays over him” translates the Arabic *sala aliebe*, which Coquin in his French translation of the *Canons* rendered as “(il) prie sur lui” and W. Riedel in his German translation of the Arabic MSS translated as “(er) über ihm betet” (Coquin, *Canons d’Hippolyte*, 391; W. Riedel, *Die Kirchenrechtsquellen des Patriarchats Alexandrien* [Leipzig: 1900; repr. Aalen: Scientia Verlag, 1968], 216). The Arabic preposition *ali* (linked here with the pronoun *ehe* [“him”]) can variously mean “over,” “on,” or “for.” (I am grateful for assistance with the Arabic text at this point generously given by Mr. Khaled El-Tarabily, an Egyptian and former PhD student at Murdoch University, Perth.) It is hard to avoid the conclusion that the original Greek used the phrase *ἐπ’ αὐτὸν* at this point. Is this an echo, despite the translations, of Jas 5.14 when a sick member of the church is to call the elders καὶ προσευξάσθωσαν ἐπ’ αὐτὸν (“and let them pray over him”)? It may well be. There is no specific reference to the laying on of hands either in the James passage or in Canon 24. But this physical action seems often to have accompanied prayer for healing in the gospels and is an element of the domirical commission to heal as recorded in the longer ending of Mark (Mark 16.18).

57. The phrase is cited in Cothernet, “Healing as a Sign,” 51.

This regulation is also unparalleled in the *Apostolic Tradition* (though it contains a prayer for the offering of oil used for anointing the sick\(^59\)) but the phrases “water of prayer” and “oil of prayer”\(^60\) are illuminated by several prayers in other fourth-century liturgical texts. The *Sacramentary of Sarapion*, a text that is roughly contemporaneous with the *Canons of Hippolytus* and is also from northern Egypt, contains a prayer “for oils and water that are offered” and a prayer “for oil of the sick or for bread or for water.”\(^61\) These elements were offered within the context of the liturgy, and prayer was offered that they would become effective therapeutic agents through the healing power of Christ. And from the prayer “concerning the offering of oil” of the *Apostolic Tradition* (chapter 5), it seems clear, as Eric Segelberg has noted, that the blessed oil was drunk as well as used for anointing, at least in the third and fourth centuries.\(^62\)

The *Apostolic Constitutions* 8.29 also contains a prayer for the blessing of water and oil by the bishop. It states: “... and grant them the power to restore health, to drive away diseases, to put demons to flight. ...”\(^63\) The *Apostolic Constitutions* is probably of Syrian origin, and it would appear that by the mid- to later fourth century, such blessing and use of oil and water for therapeutic purpose had become quite widespread in many Christian communities.

I think we can conclude, therefore, that the phrases “water of prayer” and “oil of prayer” in Canon 21 of the *Canons of Hippolytus* refer to

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61. *Sacramentary of Sarapion* 5 and 17, respectively (Johnson, *Prayers of Sarapion*, 52–53, 66–67; and Barrett-Lennard, *Sacramentary of Sarapion*, 30, 47). We might note that if the *Canons* in final form are to be dated rather later than 336–340, then in fact the *Sacramentary of Sarapion* (ca. 350) may be a little earlier than the *Canons*.


water and oil that had been blessed by the bishop in the Eucharist for use in both drinking and in anointing of members who were sick.64 Both the Canons and the Sacramentary of Sarapion suggest that this took place at the church, if the sick person was well enough to attend.65 If this was not the case, almost certainly, the water and oil would have been taken to the sick member at home,66 and the Canons directs that the clergy should visit daily those who are seriously ill. This was to be done especially by those who knew the person concerned—a rather personal touch.

The reference here to “daily visits” by the clergy is unparalleled in the Apostolic Tradition, and once again we are observing evidence that very significant resources of the Christian community were directed to the ministry to the sick. And the importance of ministry to the sick for the community or communities behind the Canons is further reinforced by the fact that this whole paragraph relating to the sick is unparalleled in the Apostolic Tradition, and therefore seems to reflect innovative practices in parts of the Egyptian church.

Other Ministries to the Sick

(1) The Steward of the Sick. Canon 25 of the Canons of Hippolytus refers in its title to the appointment of a “steward of the sick” by the bishop, as well as to times for prayer.67 Actually, only the first two lines of the ordinance concern the sick; the remaining thirteen lines deal with prayer times. And though this reference to our theme is brief, it is an important point both by virtue of its subject matter and because it has no parallel in the Apostolic Tradition.

64. The Apostolic Tradition (ch. 5) contains a specific prayer used by the bishop for blessing the oil for healing. In the Canons, somewhat surprisingly, there is now no separate prayer for blessing the oil, but it is mentioned briefly in Canon 3, which concerns “Prayer over him who becomes bishop, and Order of the liturgy” (Bradshaw, Canons of Hippolytus, 12; Coquin, Canons d’Hippolyte, 354–55).

65. Canon 21 implies that the sick should come to the church very regularly—perhaps daily—for healing ministrations. But what about the procedures at Sunday worship? Were the sick also ministered to by prayer and the use of “oil of prayer” and “water of prayer” during the Sunday Eucharistic worship? We cannot be certain, but in view of how important the ministry to the sick was, it would be very surprising if this did not occur. This does seem to be the pattern that bishop Sarapion, for example, was familiar with in the Sacramentary.

66. We know from Justin Martyr, 1 Apology 67 (ANF 1:186), writing in the mid-second century, that in the Christian communities with which he was familiar, bread and wine from communion were carried to the sick after the celebration of the liturgy.

67. Canon 25 (Bradshaw, Canons of Hippolytus, 28; Coquin, Canons d’Hippolyte, 392–93).
The title and first two lines of the regulation read:

*Canons of Hippolytus, Canon 25*

Concerning the Appointment of the Steward of the Sick by the Bishop, and Concerning Times of Prayer.

The steward is the one who has care of the sick. The bishop is to support them; even the vessel of clay necessary for the sick, the bishop is to give it to the steward.68

It is very difficult to be sure about the exact meaning of all this.69 And having to work with translations three steps from the original language compounds the difficulty.70

At face value the directive suggests that the community behind the *Canons* had developed a system whereby a particular official with the designation “steward of the sick” was appointed by the bishop to have a specific role in caring for the sick. It should be noted that, after the title of Canon 25, the two additional references to this officer both simply describe him as “the steward.” This reference to the bishop’s appointment of an official with some position of oversight in relation to the sick reflects a more organized system of caring for the sick than we see in the *Apostolic Tradition*.

Some questions come to mind: What was the specific role of this officer? Was he ordained? Was the “steward of the sick” a general *oikonomos* for the church or a particular kind of *oikonomos*? There are two pieces of evidence that may shed some light on these questions. The first comes from the *Didascalia*, chapter 9. This is an exhortation to the people in a section dealing with the giving of monetary gifts to the bishop so that he can provide relief to the needy. Here the writer notes: “For the bishop is well acquainted with those who are afflicted and dispenses and gives to each one as it is right for him. . . .”71 He continues: “For whoever the priest and the steward of God knows to be much afflicted, to him he does good as it is required of him.”72 Here the phrase “steward of God” is used in relation to ministry to the needy, including presumably the sick. And this steward of God is also a priest.

68. Ibid.
69. I have not been able to find any scholarly discussion of these details. Bradshaw, the editor of the recent English translation, does not discuss the point.
70. Bradshaw, *Canons of Hippolytus*, 5, notes that there is general agreement that the Arabic version derives from a lost Coptic version, itself translated from a Greek original.
72. Ibid.
The second piece of evidence is from a document known as the *Canons of Athanasius*, which the editors W. Riedel and W. E. Crum believe comes from mid- to later fourth-century Egypt and therefore may be roughly contemporaneous with the *Canons of Hippolytus*. In his introduction to the work, Riedel even suggests that there are some “points of contact” between the *Canons of Athanasius* and the *Canons of Hippolytus*. In his introduction to the work, Riedel even suggests that there are some “points of contact” between the *Canons of Athanasius* and the *Canons of Hippolytus*. Canon 80 of the *Canons of Athanasius* states:

> As for the sick which are in the holy place, if they have wherewithal to live, they shall not be a burden upon the church. But if they be poor, the steward of the church shall care for them, which sleep therein like his children, he shall watch over them as it were the vessels of the church, knowing that God shall enquire of him concerning them more than concerning the holy vessels for they are His image and likeness, and for their sake He became man, that He might save and deliver them, especially when they dwell with Him in His house that He may heal them. Likewise unto others also, when they need cure and sustenance, he shall give in compassion, rejoicing at their healing. And thou knowest O steward, that mankind are His beloved; do good unto them, according as thou canst, and especially unto the sick.

This canon, therefore, specifically concerns the ministry to the sick and refers to a “steward of the church,” whose duties in part involve providing for the sick and the poor. The role of “steward of the church” is a prominent one in the *Canons of Athanasius*, and he obviously held considerable authority in administrative matters of the church. There is a good likelihood that the phrase here may be referring to the same office as the “steward of the sick” in the *Canons of Hippolytus*. The *Canons of Athanasius* also refers to a “chief steward” who might be appointed in a community that needed more than one steward. Riedel refers to this figure as an *oikonomos megas* and notes that he is a colleague of the bishop. It is unlikely that the “steward of the sick” from the *Canons of Hippolytus* is an *oikonomos megas*. However, it is difficult to be sure whether he is a single figure who manages all the administrative affairs of his community or whether he is an understeward with specific responsibility for the sick.

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74. Ibid., Introduction, 23. I do not think that he is actually suggesting dependence of one text on the other, though if he were, he would have understood this to be dependence of the *Canons of Hippolytus* on the *Canons of Athanasius*, as at that time it was believed the former text was a fifth- or sixth-century document.
75. Ibid., 49. The translation is also by Riedel and Crum. Part of this passage is cited in Bradshaw, *Canons of Hippolytus*, 27.
Let us note now a further point of connection between these two texts. As we have seen, Canon 25 of the *Canons of Hippolytus* begins: “The steward is the one who has care of the sick. The bishop is to support them; even the vessel of clay necessary for the sick, the bishop is to give it to the steward.” 77 Unfortunately, as René-Georges Coquin notes, the Arabic manuscript for the second sentence is awkward at this point. 78 The point of connection with the *Canons of Athanasius* is that in that text considerable attention is given to the fact that the steward is responsible for the vessels belonging to the church, and it is perhaps reasonable to assume that this would have included “the vessel of clay necessary for the sick,” if indeed they had one. And this also seems to be the case for the “steward of the sick” in the *Canons of Hippolytus*. In both texts, then, the steward has a responsibility for oversight of the vessels, and in the *Canons of Hippolytus* this specifically included the “vessel of clay necessary for the sick.” We might note that the very need for this prescription requiring the bishop to give the vessel of clay to the steward suggests that there may have been some tension at times between the bishop and the “steward of the sick.” 79 Certainly the resources managed by the “steward of the church” and the high degree of authority he holds in the *Canons of Athanasius* suggest the possibility that there may occasionally have been conflict between the bishop and steward over aspects of this management in the communities reflected in that text.

But what is the “vessel of clay necessary for the sick” to which Canon 25 of the *Canons of Hippolytus* refers? This is rather obscure, but one possibility is that it may be a container in which food supplies available for the sick were stored. It is clear from the *Canons of Athanasius* that some of the tithes and offerings of first fruits made to the church were

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77. Bradshaw, *Canons of Hippolytus*, 28. In a quotation of Canon 24 in 1900, Riedel, *Canons of Athanasius*, Introduction, 23, translated it this way: “The steward who hath the care of the sick shall cause the bishop to bear the cost of them, even unto the earthen vessels; because the sick have need thereof. Let the bishop give the same unto the steward.”


79. It would be possible to read the details of the first part of this regulation as being essentially directed against the bishop—or against a particular bishop—attempting to impose a greater personal control over some traditional aspect of the ministry to the sick carried out by someone other than the bishop. If such a person had normally been a senior presbyter, it would be easy to imagine a situation arising where there was conflict between such a presbyter and a particular bishop, a scenario this regulation might be seeking to address. Coquin, *Canons d’Hippolyte*, 50–53, was convinced that the work as a whole was the work of a priest rather than a bishop; and although Bradshaw, *Canons of Hippolytus*, 8, discounts this, if Coquin is correct in his argument, it would lend support to the sort of scenario I have raised as a possibility here.
used to assist with ministry to the sick and poor. Canon 82 states: “Whatsoever remaineth over for the bishop of the first fruits and tithes in the church, beyond the portions for priests and the sick, he shall take the remainder every year and give it to the poor.” And it may be that the “vessel of clay necessary for the sick” is a vessel in which supplies for the sick, in kind, were stored.

It is quite likely, therefore, that these offices we have observed in the Didascalia and the Canons of Athanasius have some real similarity to one another and to the office of the “steward of the sick” of the Canons of Hippolytus. It does not appear to be stated in the Canons of Athanasius whether the steward is ordained, but it is highly likely that he would be in view of his authority in the church. The “steward of God” in the Didascalia clearly is ordained, and so together this evidence, coupled with the fact that the clergy generally were seen elsewhere to have the primary pastoral responsibility for the sick, points to the likelihood that the “steward of the sick” in the Canons of Hippolytus was ordained. It is also evident that he had a ministry of providing support of a practical kind to the sick, involving the oversight and management of resources for them, and possibly for the poor as well.

Christian Midwives. We might also note the reference to midwives in Canon 18 of the Canons of Hippolytus, although this category does not fit neatly into the pattern of this analysis. This is the only reference in

80. Riedel and Crum, Canons of Athanasius, 50.
81. It is possibly of some significance that the author of the Canons of Hippolytus may have drawn upon the Didascalia. This is the view of R. H. Connolly, Didascalia Apostolorum (Oxford: Clarendon Press, 1929), Introduction, 86.
82. Another interesting line of inquiry would be to see if there is some link between the “steward of the sick” and the parabolani—a group of people who emerged in Alexandria with a ministry to care for the sick. They were responsible to the bishop; but later in the fourth and fifth centuries, the character of the group declined, and they became more of a kind of bodyguard of the bishop rather than a group ministering to the sick. On the parabolani, s.v. “Parabolani,” in Oxford Dictionary of the Christian Church, ed. E. A. Livingstone, 3rd ed. (Oxford: Oxford University Press, 1997); and E. Venables, in Dictionary of Christian Antiquities, ed. W. Smith and S. Cheetham (1881), 2:1551.
83. In Canon 18 the mention of midwives is in a sense incidental. The author wants to delineate the purificatory procedures that were applicable to both midwives and new mothers. But the references to the midwives make it clear that they were in some sense thought of as a group within the Christian community with health-related duties. The inclusion of “midwives” in this section concerning “Other ministries to the sick” is certainly not meant to imply that pregnancy and childbirth are in any sense concerned with “illness.” They are included here as a matter of convenience, but this important distinction should be noted.
the document to a person with what may be thought of, from the modern Western point of view, as a recognizably medical role. It is unparalleled in the *Apostolic Tradition*. There is evidence that in antiquity pregnancy was often dealt with not by physicians but by women experienced in assisting at birth. For example, in one papyrus text, a man’s pregnant wife has been attacked and injured; and in lodging a petition against the attack, he calls not for a visit by a physician but for a midwife to examine her. In Canon 18 of the *Canons of Hippolytus*, although there is some confusion in the text, it is noted that there should be numerous midwives in the church so that they can share the role and not regularly have the same women abstaining from “the mysteries” because of the ritual purification requirements that accompanied the exercise of the midwife role.

**EFFORTS BY THE SICK TO AVAIL THEMSELVES OF THE CHURCH’S RESOURCES**

We noted above that those in the community who were sick were encouraged to come to the church, if they were able to do so, in order to receive the “oil of prayer” and the “water of prayer,” which were the therapeutic agents blessed by the bishop. In addition to this statement, there is also a tantalizingly brief (and unparalleled) reference in Canon 24 to what was probably a form of incubation—sick members sleeping in the church, as was done in the Asklepian cult, with a view to a divine visitation effecting a cure. C. H. Harris, in discussing this section of the *Canons of Hippolytus*, has stated that: “In primitive times, Christian churches were regarded as temples of healing [his italics], and as such rivalled and excelled the heathen temples of Aesculapius, especially in the treatment of mental disorders. . . .” Canon 24 reads: “The sick are not to sleep in the

84. See *P. Oxy* 3620 and a further reference to a midwife in *P. Oxy* 1586. These texts are discussed in my unpublished essay, “Illness and Health in the Oxyrhynchus Papyri” (1985), 77–79.

85. Bradshaw, *Canons of Hippolytus*, 20; Coquin, *Canons d’Hippolyte*, 372–75. We might note that the ordinance directs that midwives must refrain from the Eucharist for up to forty days in the case of assisting the birth of a female child and twenty days for assisting a male child.

86. It probably would not have been an issue for the community associated with the *Apostolic Tradition* if the core of that text dates from the early third century or earlier, as there would not yet have been purpose-built Christian churches.

87. Harris, “Visitation of the Sick,” 476. We might note that Harris does not identify the version of the *Canons of Hippolytus* from which he cites, and his rendering in English of the final paragraph of Canon 21 is significantly different from
dormitory, but rather the poor. That is why he who has a home, if he is sick, is not to be moved to the house of God. Rather he is only to pray and then return home.” The fact that this regulation was necessary probably indicates that there were some among the sick who wanted to sleep either in the church or perhaps in what may have been an almshouse for the poor attached to the church. It would appear that this practice, with its pagan associations, particularly in relation to the healing cult of Asklepios, was unacceptable to the ecclesiastical authorities or at least to the author(s) of the Canons, and this part of Canon 24 seems to be expressly forbidding it.

It is interesting to note that W. Riedel believes that the pattern reflected in the Canons of Athanasius is that sick people of all classes, and not just the poor, did sleep in the church. We might note too that Mary Hamilton’s classic work indicates that “incubation” was to become a common practice in churches in the Middle Ages. The Canons of Hippolytus may therefore reflect an attempt to suppress this practice, but an attempt that ultimately did not succeed.

SUMMARY AND CONCLUSION

This analysis of the Canons of Hippolytus and comparison with its parent document have provided us with a range of insights into the ideas and practices concerning illness, health, and healing in an Egyptian community (or communities) from around the middle of the fourth century.

Becoming ill in a world and a society with no centrally organized system of welfare and very limited medical resources exposed people to significant crises. The evidence from this document suggests that considerable resources of the Christian community in Egypt were devoted to assisting and caring for those who became vulnerable in this way. Ministry to the sick was taken very seriously by the Christian community or communities behind this text, and a variety of approaches was employed to assist in the provision of this ministry.


90. Mary Hamilton, Incubation or the Cure of Diseases and Pagan Temples and Christian Churches (St Andrews: W. C. Henderson, 1906). See also Stewart-Sykes, On the Apostolic Tradition, 195 n. 166.
We have observed that there is a much greater priority given to this ministry in the *Canons of Hippolytus* than in the *Apostolic Tradition*. It is clear that a more organized program for this purpose had evolved in at least some sections of the Egyptian church. The bishop is now seen to have a considerably more central role in this ministry than in the earlier text, especially in relation to prayer for sick individuals. He is assisted not only by the deacons and presbyters, but also by a church official unattested in the *Apostolic Tradition* known as the “steward of the sick.” Visitation by clergy and laity has a more central role in the ministry to the sick, and indeed there seems to have been an expectation that the clergy would make daily visits to the sick. We have also observed that the sick were resorting to one method of seeking healing that had clear pagan parallels (sleeping in churches), and an attempt was apparently being made to suppress this practice.

When we add the evidence of this document about the concern for illness, health, and healing to what we can learn from the *Sacramentary of Sarapion*, it points to what I am inclined to believe is something distinctive about the Egyptian church. This matter certainly requires further research. But as compared with the evidence from liturgical texts and church orders from elsewhere, there is a considerably greater interest in, and focus on, illness and healing issues in the church of Egypt in the third and fourth centuries.

Considerable caution is needed in relation to the use of papyrological evidence to support this argument, in view of the fact that it is so particularly associated with the location of Egypt. However, if I am correct in arguing that a high level of focus on illness, health, and healing was a distinctive feature of the Egyptian church, we would expect to find some evidence of this reflected in the many Christian papyri (particularly from the fourth century); and this is indeed the case, especially in some of the private letters of the papyri such as the Paphnutius and Nepheros archives.91

If this conclusion is correct, it raises a host of other questions: Why was this so? Was there something distinctive in Egyptian culture and history that contributed to this? To what extent did the Egyptian attitudes and practices influence other Christian communities, particularly via the

91. The theme of illness and healing in the private letters of the papyri is explored in my study, *Christian Healing*, 7–86. The theme is also examined there in relation to some of the writings of Athanasius and Irenaeus. One aspect of this theme is also analysed in an unpublished paper completed during my doctoral studies entitled, “Did Christians Respond to Illness Distinctively?” (1985), which compares the theme within all the positively identified Christian and pagan private letters of the papyri.
medium of visitors to Egyptian monasticism? We know that some of these visitors, such as St. Basil, later became ecclesiastical leaders in their own communities and brought a strong focus upon illness, health, and healing to their ministries. But these questions are a subject for another paper.

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