

CHAPTER 1

# *The Jewish Tradition*

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The Jewish tradition traces its roots to Abraham. The patriarchal stories of the Bible reflect the migration of the ancient Hebrews from Mesopotamia to Canaan and from there to Egypt. Jewish history continues with the Exodus from Egypt; the Sinai event; the gradual conquest of Canaan during the period of Joshua, the Judges, and the Kings; the building of the First Temple and, with it, the first Jewish commonwealth under Solomon; the splitting of the Jewish commonwealth into northern and southern kingdoms around the year 930 B.C.E.; the conquest and dispersion of the northern kingdom by Assyria in 722 B.C.E.; and the conquest and exile of the southern kingdom by the Babylonians in 586 B.C.E., and with that the destruction of the First Temple and the first Jewish commonwealth. All of these events are familiar from their biblical accounts.

Jews established a strong community in Babylonia that continued to exist for another fifteen hundred years under the Persians and then the Muslims. A number of Jews returned to rebuild the temple in 516 B.C.E., and with that the second Jewish commonwealth was born. It continued to exist in Israel through Greek and Roman conquest until 70 C.E., when the Romans destroyed the Second Temple and, with it, the second Jewish commonwealth.

Jews continued to exist in Israel in fairly large numbers for the next three hundred years, but their situation became increasingly dire, and

the focus of Jewish history shifted to the community in Persia. The Persian Jewish community was at the forefront of world Jewry through the Muslim period, extending to approximately 1050 C.E., but there were sizeable Jewish communities in Israel, North Africa, and southern Europe during that time.

Beginning around the year of 1000 C.E. and extending to the fifteenth century, the Jewish communities of North Africa and western Europe became the major centers of Jewish culture. Jews, expelled from the western Mediterranean region and western Europe in the fourteenth and fifteenth centuries, moved to eastern Europe and the eastern Mediterranean basin, where they were concentrated until the late nineteenth and early twentieth centuries. At that time, because of persecution in Russia and the development of Zionism, a movement to reconstitute Jewish national life in the ancient homeland, many Jews moved to America and Israel, although the majority of them remained in eastern Europe until they were slaughtered in the Nazi Holocaust.

The largest Jewish community in the mid-1980s lives in the United States (approximately 5.7 million Jews), the second largest lives in Israel (approximately 3.3 million Jews), and the next largest lives in Russia (approximately 1.7 million Jews), although the Russian Jewish community is assimilating quickly under immense political pressure. There are also large Jewish communities numbering in the hundred thousands in France, Great Britain, Canada, and Argentina, and there are sizeable but somewhat smaller Jewish communities in Australia, South Africa, and Mexico. It can be said truthfully that Jews live in almost every country of the world, including those that are currently hostile to Judaism and Israel. That is the result of the remarkable fact that Jews lived without a homeland for close to nineteen hundred years, the only people to survive under those conditions. Although it is difficult to determine exactly how many Jews there are in the world today, demographers estimate that there are about thirteen million.<sup>1</sup>

Jewish belief centers on the revelation of God at Sinai contained in the Torah (the Five Books of Moses) and on the historical relationship of God to the Jewish people from the time of Abraham through the Exodus and on to the present day. Traditional Jews consider themselves bound by the commandments of God as articulated in Jewish law. Because Jewish law gives Judaism a distinctly activist cast, even those Jews who do not observe the law often are actively involved in many projects for the improvement of life on earth. Jewish values concentrate on the life of the family and the community, education throughout life, historical rootedness, and hope for a Messianic future in which all peoples will come to know God and follow Jewish law. In that way, Jews understand themselves as having a mission of demonstrating morality to the world and being, in Isaiah's terminology, "a light unto the nations."<sup>2</sup> For Jews, the land of Israel is the Jewish homeland not only because many of the critical events in the birth and development of Judaism took place there, but also because God gave the land to the Jews according to Scripture. Although Jews understand themselves as

having a divine mission, that mission is to be carried out by example rather than by actively pursuing converts; in fact, Judaism has historically been reluctant to accept converts. While Jewish law specifies many particulars about the actions of Jews, Jewish belief is much less determined. Consequently, Judaism has a long history of lively intellectual debate on philosophical issues, and rabbis have taken theological positions ranging from supernaturalism to naturalism, from rationalism to mysticism, and from a community-based revelational understanding of Jewish law to an individualistic, existential understanding of it.

Traditional and liberal manifestations of Judaism exist in most countries. In the United States there are four movements: the Reform Movement, the Reconstructionist Movement, the Conservative Movement, and the Orthodox Movement. Orthodox Jews believe that the Torah is the literal word of God and that Jewish law is to be determined by reference to the codes and responsa of the past. Conservative Jews believe that all Jewish sources must be understood in their historical context and that Jewish law developed historically as well. Therefore, while Conservative Jews consider Jewish law binding, they are more willing than Orthodox Jews to make changes in its content in response to modern needs. Reconstructionist and Reform Jews do not consider Jewish law to be binding, although many voluntarily choose to observe sections of it. The Reconstructionist Movement possesses a greater sense of community than the Reform Movement and hence offers more encouragement to adopt the folkways of the People of Israel. Autonomy is a central value for the Reform Movement. Thus for Reform Jews the law is at most a resource that the individual may choose to consult in making a decision; it is certainly not the authoritative command of God. These represent the positions of the rabbis of the various movements, but for the lay people, family history, convenience, and friendships are at least as important in choosing an affiliation as ideology and practice. Therefore, Jews might be members of synagogues that are affiliated with one movement or another even though their own personal philosophies and practices do not coincide with those of the institutions that they join.

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While the Torah serves as the constitution of the Jewish people, Judaism is based upon the interpretation of that constitution by the rabbis in each generation. Consequently, biblical verses give some direction to Jewish medical ethics, but most of its content comes from rabbinic literature.

The primary sources of rabbinic discussions and decisions on medical matters in the ancient world were the Mishnah, edited by Rabbi Judah, the president of the Sanhedrin, in the year 220 C.E.; and the Palestinian (or Jerusalem) and Babylonian Talmuds, edited in approximately 400 and 500 C.E., respectively. Other ideational material that forms the philosophical background for rabbinic decisions appears in the various

collections of Midrash. These homilies and stories were edited during the Middle Ages, but consist of sources from the periods of the Mishnah and the Talmud.

The Mishnah and the two Talmuds were produced at a time in which there was a fairly clear line of authority within the Jewish community. That was not the case from the Middle Ages on. Consequently, two genres of legal literature—*responsa* and codes—appeared.

When a question was raised on any issue, the rabbi of a community might answer it. If he had a question, he would address it to some other rabbi whom he respected, and that rabbi would write a response. This literature is called the *responsa literature*. The Hebrew term is more explicit: Its translation is "questions and answers." There are *responsa* on all sorts of subjects from the eighth century on, during which *responsa* have served as the major source of ongoing Jewish law. Any rabbi can issue a *responsum*, and there is no mechanism within the Jewish community to determine which of several conflicting answers is the authoritative Jewish position.

Codes answered the need for a practical, summary statement of Jewish law. Aside from the Mishnah, the two codes that are most often cited are the *Mishneh Torah*, written by Moses Maimonides (Moses ben Maimon, 1135–1204) in the twelfth century, and the *Shulhan 'arukh*, written by Joseph Caro (1488–1575) in the sixteenth century with notes by Moses Isserles. The task of writing a code is a long and comprehensive one, and consequently most of Jewish attitudes on contemporary medical issues are based on modern *responsa* rather than on codes.

Although the Jewish tradition placed great emphasis on its holy texts and their exegesis, the customs of the people and the general wisdom that they heard in the streets played a crucial role in shaping Jewish practice. As one might expect, folk wisdom and practice were not always consistent with the thought and instructions of the Rabbis; consequently, we must be careful to take both elements of the tradition into account in order to understand it properly.

The point should not be exaggerated, however. Because there was no central body dispensing law during most of Jewish history, the Rabbis, who created the texts, generally lived among the people in small communities and were therefore cognizant of folk practices. More often than not they considered custom as a source of binding law. All Israel stood at Sinai, they noted, and therefore in addition to the holy texts the practices of the people could serve as an indication of revelation. As Hillel the Elder (first century) put it, "Leave it to the people of Israel: if they are not prophets, they are the children of prophets!"<sup>3</sup> Moreover, in many cases there simply was no law, and then custom was explicitly invoked to fill the void. Thus the discrepancy between Jewish folk practices and Jewish law is often not great.

## Jewish Views of the Body

God created bodies as well as minds, emotions, and wills. Therefore, for the Rabbis—the sages of the Mishnah, Talmud, and Midrash—the body was a good thing. It was, in fact, God's masterpiece, proving his infinite goodness and boundless wisdom, and the Rabbis waxed eloquent in admiring its intricate construction. The body could be abused in the process of sinning, but so could the soul. Neither was solely responsible for sin. Thus the body was not a "prison house" for the soul, as it was in many of the traditions influenced by Gnosticism and other Greek schools of thought. It was the vehicle by which God's purposes could be carried out if one used it correctly.<sup>4</sup>

Because the body was God's creation, it was right to enjoy its legitimate pleasures and wrong to deny them to oneself. In sharp contrast to elements of the Christian tradition, the Jewish tradition strongly denounced asceticism and monasticism. The Rabbis assumed that God wanted his creatures to be happy and therefore that it was sinful deliberately to shun physical happiness and material well-being. "In the Hereafter" they declared, "a man will have to stand judgment and give reckoning for all that his eyes saw but he did not eat."<sup>5</sup> Similarly they noted that the Nazirite, who had taken a vow to abstain for a time from drinking wine, had to bring a sin offering after the period had elapsed according to *Numbers* 6:11, "because he has sinned against the soul." The Rabbis then asked: "Against which soul has he sinned?" The answer:

He withheld himself from wine. And we may apply the argument *a fortiori*: If a person who withholds himself from wine is called a sinner, how much more so is he a sinner who withholds himself from all enjoyments.<sup>6</sup>

Judaism recognized limitations on the pursuit of bodily pleasures, but because God had determined the limits of that pursuit within the law, any assumption of further limits on the part of human beings was an act of both pride and ingratitude.

The Rabbis assumed that human bodies were God's property, which he leased for the duration of one's life. If a person were to rent an apartment, he or she would not have the right to destroy it, but would have the responsibility to take reasonable care of it. In the same way, because a person's body was on loan, one did not have the right to destroy it by suicide, but rather had the responsibility to take care of it. This was taken very seriously: One was even required to violate any commandment except those prohibiting murder, idolatry, and incest in order to save one's life. Consequently, according to the Talmudic rabbis, "it is forbidden to live in a city in which there is no physician,"

for doing so would expose a person's body to an unacceptable degree of risk and would prevent the person from fulfilling his or her responsibility to care for it.<sup>7</sup> Moreover, matters of hygiene, diet, exercise, and sleep were subjects for legal obligations within Judaism, not just matters of sensible living. So, for example, the following story was told about Hillel, one of the most important Jewish leaders of the early first century:

When he had finished the lesson with his students, he accompanied them part of the way. They said to him, "Master, where are you going?" "To perform a religious duty." "Which religious duty?" "To bathe in the bath-house." "Is that a religious duty?" He answered them, "If somebody appointed to scrape and clean the statues of the king which are set up in the theatres and circuses is paid to do the work and furthermore associates with nobility, how much more so should I, who am created in the divine image and likeness, take care of my body!"<sup>8</sup>

Similarly, Maimonides, both a rabbi and a physician, devoted several chapters of his code to the obligations of diet, exercise, hygiene, and sleep, thereby indicating that these were legal obligations, not just practical advice.<sup>9</sup> He indicated the theological motivation for these rules explicitly:

He who regulates his life in accordance with the laws of hygiene with the sole motive of maintaining a sound and vigorous physique and begetting children to do his work and labor for his benefit is not following the right course. A man should aim to maintain physical health and vigor in order that his soul may be upright, in a condition to know God. . . . Whoever throughout his life follows this course will be continually serving God, even while engaged in business and even during cohabitation, because his purpose in all that he does will be to satisfy his needs so as to have a sound body with which to serve God.<sup>10</sup>

This theological context also governed the corollaries of the Jewish view of the body in matters of diet, hygiene, and exercise. In each case it was the religious, not the pragmatic, motivation that was primary.

Judaism imposed a number of restrictions on the foods that Jews could eat. Any animals, fowl, or fish that Jews ate were to come from the limited list that the Bible allows (*Lv.* 11; *Dt.* 14); animals and fowl were to be slaughtered in a specific way designed to minimize the animal's pain; blood was to be drained from meat (*Lv.* 17:10-12; *Dt.* 12:23); and meat and dairy foods were to be separated in preparing, serving, and eating meals.

Many Jews and non-Jews have assumed that Jewish dietary laws were designed to maintain health. Some modern Jews even use that

explanation in order to justify their abandonment of those rules, reasoning that the work of the United States Food and Drug Administration makes the health measures involved in Jewish dietary laws unnecessary. The truth of the matter is that health was never given as the principal rationale for the dietary rules. Maimonides came closest. He thought that observing the dietary rules would benefit one's health by prohibiting dangerous and dirty foods and, more importantly, by curbing one's lust for food so that one did not take the desire for food as an ultimate end.<sup>11</sup> Even for him, however, the maintenance of health was not a necessary nor even a sufficient reason to observe the dietary rules; it was rather that God commanded them.

The Bible specifically indicated several times that the rationale for restricting the number of animals that could be eaten was to make the people of Israel holy (*Lv.* 11:43-45; *Dt.* 14:1-3, 21). The Rabbis carried this further:

What does God care whether a man kills an animal in the proper way and eats it, or whether he strangles the animal and eats it? Will the one benefit Him, or the other injure Him? Or what does God care whether a man eats impure animals or pure animals? "If you are wise, for yourself are you wise, but if you scorn, you alone shall bear it" (*Prv.* 9:12). So you learn that the commandments were given only to purify God's creatures, as it says, "God's word is purified, it is a protection to those who trust in Him" (*2 Sm.* 22:31).<sup>12</sup>

Part of the confusion may well have resulted from the Bible's terminology in describing the dietary rules, for its Hebrew words *tahor* and *tameh* are often rendered "clean" and "unclean." They have nothing to do with sanitation, however, and are more properly rendered "pure" and "impure." The dietary restrictions probably began as a method to mark off the priests as special people. The rules were later extended to all Israelites to make them "a kingdom of priests and a holy nation" (*Ex.* 19:6), "a people consecrated to the Lord" (*Dt.* 14:21).

Similar remarks apply to hygiene. Thus the Talmud, commenting on the biblical verse "Sanctify yourselves and be holy" (*Lv.* 11:44) says, "Sanctify yourselves—i.e. wash your hands before the meal, 'and be holy'—i.e. wash after the meal."<sup>13</sup> This was an application of priestly practice to the masses, for the meal was considered to be like a sacrifice on the altar; and consequently priestly rituals appropriate to handling sacrifices were also appropriate to eating an ordinary meal.<sup>14</sup> Similarly, it was forbidden to live in a town that had no public bathing facilities, because "physical cleanliness is conducive to spiritual purity," and the required morning ablution was seen as a reenactment of the priestly practice of washing hands before performing the Temple service.<sup>15</sup>

In addition to diet and hygiene, a third area that the Rabbis treated in distinctly religious terms was athletics. While they did not object to sports for purposes of physical exercise or as part of military training, until the modern period they largely frowned upon competitive sports "for the sake of the game." Their opposition was based upon two considerations. First, participation in athletics would rob time from what was really important, that is, study. Thus Salo W. Baron in his book on Jewish communities of the Middle Ages says:

Sporadic voices in favor of recreational pauses [in the daily and yearly schedule of classes] were as ineffective as those which advocated physical exercises. Northern [European] Jewry, especially, had little use for physical education or sports, and paid little heed even to the demand of a talmudic sage that a father give his son instruction in swimming as a life-saving precaution.<sup>16</sup>

Even for Maimonides, the rabbi-physician, maintaining a healthy body was a religious obligation because it was a prerequisite for the well-being of the soul, which "alone is the source of eternal life."<sup>17</sup>

Moreover, athletics carried extremely negative connotations for Jews for historical reasons. Athletics were a central feature of the process of hellenization against which the Maccabees revolted in 168 B.C.E. (the Hanukkah story),<sup>18</sup> and ever since athletics have symbolized the essence of Gentile values that Jews should shun.

When cruelty to either humans or animals was involved in a sport, it was opposed for that reason as well as for the two general considerations just mentioned. Thus Josephus, a first-century Jewish historian, noted that to the Jews the Roman contests to the death between men and beasts were "a palpable breaking up of those customs for which they had so great a veneration."<sup>19</sup>

Despite these objections, there is some evidence of the participation of Jews in competitive sporting events in Wiesenfeld, Germany, in 1386 and in German and Italian games in the fifteenth century. These tourneys included running, jumping, throwing, and bowling. Ball games were popular in the sixteenth century—so much so that Moses Isserles specifically permitted them on the Sabbath and festivals "even for pure sport."<sup>20</sup>

It was not until the nineteenth and twentieth centuries, however, that Jews actively engaged in competitive sports. In western Europe this change resulted from their participation in the full culture of modern societies. In eastern Europe, it was the product of the new mood of self-assertion fostered by the Zionist movement. Even so, in many Jewish minds athletic prowess continued to carry the taint of being a Gentile value.<sup>21</sup>

A corollary of the requirement to take care of one's body was the obligation not to endanger it unduly. There are varying twentieth-century responsa on whether smoking is such an undue risk, with several Orthodox rabbis claiming that smoking is permissible in Jewish law and some Orthodox, Conservative, and Reform rabbis claiming that it is not.<sup>22</sup> Similar remarks apply to drugs. One may instruct the physician to use whatever experimental drugs have any chance of saving a life, however risky they may be, but one may not use addictive drugs simply for the purposes of achieving some kind of psychological or emotional high.<sup>23</sup> No Jewish source saw coffee, tea, or alcohol as a prohibited drug, but a number of contemporary respondents have prohibited the use of marijuana and, all the more so, harder drugs.<sup>24</sup> Alcohol, used in many Jewish rituals, has always been regarded as one of the legitimate pleasures of life. Intoxication, however, has been frowned upon, and alcoholism among Jews was rare until the last decade.<sup>25</sup>

Thus Jewish views on diet, hygiene, exercise, and protection of the body have distinctively religious roots apart from any pragmatic results they may foster. God gave life to be enjoyed, but pleasure must yield to health as a value because health is necessary for one to function as the servant of God.

### The Etiology of Illness

Because God is the creator of everything, according to the Bible, he is ultimately the author of health and disease: "I deal death and give life; I wounded, and I will heal; none can deliver from My hand" (*Dt.* 32:39). The biblical authors depicted God as visiting illness on people as punishment for sins and as a means of expiation (for example, *Dt.* 28), and the Talmud followed suit: "There is no suffering without iniquity."<sup>26</sup> A tenth-century commentary put it graphically: "If a subject sins against his ruler, a blacksmith is commanded to fashion chains in which the ruler imprisons the sinner. When a man sins against the Lord, his limbs become his fetters."<sup>27</sup>

While this linkage between sickness and sin has been sustained in Jewish sources to this century, it has also been challenged throughout the ages. The *Book of Job* forcefully challenged this tenet, as does a popular, contemporary book by Rabbi Harold Kushner, *When Bad Things Happen to Good People*.<sup>28</sup> As difficult as it was to understand the suffering of individuals according to the calculus of sin and sickness, it was even more difficult to explain the suffering of the People of Israel on that basis. Consequently, Judaism developed a broad range of theodicies, but generally they addressed the degradation, death, destruction, and exile that Jews suffered rather than physical illness.

Wounds and dismemberment suffered in the course of persecutions were all seen as part of the broader question of how God could allow human beings to inflict suffering of all sorts on his covenanted people in the apparent absence of sin.

The causative properties of sin did not prevent the Rabbis of the Talmud from identifying physical causes of illnesses or from seeking to cure them. The most widely held view was that "blood is the chief cause of disease." Therefore they advised bloodletting once every thirty days for those under forty and less frequently for older people so that the bad blood could flow away.<sup>29</sup> Other carriers of disease mentioned in the Talmud include bile, the air, contaminated foods or beverages, bodily discharges, clothing, bath water, animals, and insects (especially flies and worms).<sup>30</sup> Lack of fluids was believed to lead to digestive disturbances; neglecting one's health, to fevers and colds. Injury to the spinal cord caused paralysis.<sup>31</sup> Excessive eating, fasting, drinking of liquor, and sexual activity were also thought to cause disease. Psychological causes were recognized too: "Three things weaken the strength of man: fear, trouble, and sin." Fear, by accelerating the pulse, had reportedly "slain many a person." The Rabbis also recognized the physiological implications of the psychological upset attendant upon changes in routine: "A change in habit is the beginning of illness."<sup>32</sup>

But sometimes sickness was not connected to sin or physical or psychological causes, but was rather attributed to the work of demons. Because of the difficulties in identifying divine or natural causes for disease, demons were the most commonly designated agents in Talmudic and medieval times, and belief in them continued until the twentieth century among the majority of Jews untouched by the Enlightenment.

The willingness of even the Rabbis to accept demonic etiologies despite the obvious conflict that they posed to the omnipotent rule of God indicates the perplexity and fear that people had in the face of disease. If pushed, Jewish leaders might claim that the demons were not as independent as they seemed and actually operated under God's overarching authority. It is notable, though, that Jewish sources seldom linked the work of demons to the previous sins of their victims, and thus Jews apparently acquiesced to the inconsistency of believing in both an omnipotent God and independent demons. The power of pain and fear was clearly greater than the quest for consistency.

### **The Agents of Cure**

As mentioned earlier, the Talmud prohibited living in a city in which there was no physician.<sup>33</sup> This rule, eminently plausible on pragmatic grounds, represented a major historical and philosophical development.

Prior to the Hellenistic period, there is no evidence of a medical profession among the Hebrews. The Bible never uses the word "physician" (*rofeh*) to refer to human beings, except in describing foreign doctors whose treatments were being mocked.<sup>34</sup> The biblical objection to these practitioners was a theological one: Their treatments used magic and religious tenets and practices that were inconsistent with belief in God. Involvement in such practices, even as a patient, was therefore tantamount to idolatry. The Greeks, however, introduced a form of secular, "scientific" medicine that was not based upon such beliefs and acts. Thus Ben Sira, writing in the third century B.C.E., not only condoned the new medical art and its practitioners, but praised them as the fulfillment of God's will: "Honor a physician with the honor due to him for the uses which you may have of him, for the Lord created him. . . . The Lord created medicines out of the earth, and he who is wise will not abhor them."<sup>35</sup>

Scientific methods removed Jewish objections to medicine based on its former pagan associations, but there still remained a major theological problem in accepting the work of physicians to cure illness. God, after all, announced himself as healer in many places in the Bible, suggesting perhaps that medicine was an improper human intervention in God's decision to inflict illness.<sup>36</sup>

The Rabbis were aware of this line of reasoning, but they counteracted it by pointing out that God himself had authorized healing, in fact required it. They found that authorization and that imperative in two biblical verses: *Exodus* 21:19–20, according to which an assailant must insure that his victim is "thoroughly healed," and *Deuteronomy* 22:2, which instructed "And you shall restore the lost property to him." The Talmud understood the *Exodus* verse as giving "permission for the physician to cure." On the basis of an extra letter in the Hebrew text of the *Deuteronomy* passage, the Talmud declared that that verse included the obligation to restore a fellow man's body as well as his property; hence there was an obligation to come to the aid of another person in a life-threatening situation. On the basis of *Leviticus* 19:16 ("Nor shall you stand idly by the blood of your fellow"), the Talmud expanded the obligation of providing medical aid to encompass expenditure of financial resources for that purpose.<sup>37</sup> The commandment "And you shall love your neighbor as yourself" (*Lv.* 19:18) was used to exempt physicians from any liability for injuries they caused in the process of healing, for presumably the patient, like the physician himself, would be willing to take some risk to be healed.<sup>38</sup> In sum, Joseph Caro, author of the *Shulhan 'arukh*, said:

The Torah gave permission to the physician to heal; moreover, this is a religious precept and is included in the category of saving life; and if the physician withholds his services, it is considered as shedding blood.<sup>39</sup>

The following story from a tenth-century collection of Midrash indicates that the famous second-century Rabbis of whom it speaks recognized the theological issue involved, but it also indicates the clear assertion of the Jewish tradition that the physician's work was legitimate and, in fact, obligatory:

It once happened that Rabbi Ishmael and Rabbi Akiva were strolling in the streets of Jerusalem accompanied by another person. They were met by a sick person. He said to them, "My masters, tell me by what means I may be cured." They told him, "Do thus and so until you are cured." The sick man asked them, "And who afflicted me?" They replied, "The Holy One, blessed be He." The sick man responded, "You have entered into a matter which does not pertain to you. God has afflicted, and you seek to cure! Are you not transgressing His will?"

Rabbi Akiva and Rabbi Ishmael asked him, "What is your occupation?" The sick man answered, "I am a tiller of the soil, and here is the sickle in my hand." They asked him, "Who created the vineyard?" He answered, "The Holy One, blessed be He." Rabbi Akiva and Rabbi Ishmael said to him, "And you enter into a matter which does not pertain to you! God created the vineyard, and you cut His fruits from it." He said to them, "Do you not see the sickle in my hand? If I did not plow, sow, fertilize, and weed, nothing would sprout." Rabbi Akiva and Rabbi Ishmael said to him, "Foolish man! Have you never in your life heard that it is written, 'As for man, his days are as grass; as a flower of the field, so he flourishes' (*Ps.* 103:15)? Just as if one does not weed, fertilize, and plow, the trees will not produce fruit, and if fruit is produced but is not watered or fertilized, it will not live but die, so with regard to the body. Drugs and medicants are the fertilizer, and the physician is the tiller of the soil."<sup>40</sup>

Jews were obligated to heal non-Jews as well. This duty was based partly on a homiletic interpretation of *Leviticus* 25:35 and partly on the consideration that failing to do so would jeopardize friendly relations and bring about profanation of the Divine Name.<sup>41</sup> Some sources limited this obligation to Gentiles who accepted the seven Noahic laws, which were considered the minimal standards of humanity,<sup>42</sup> while others extended the obligation even to those who have not accepted those laws.<sup>43</sup> In practice, Jewish physicians during the Middle Ages commonly served Jews and Gentiles alike, even if it required desecration of the Sabbath.<sup>44</sup> This practice has been even more common in modern societies.

The result of these historical and philosophical developments was that Jews embraced medicine and ministered to both Jews and non-

Jews. Medieval Jews in southern Europe benefitted from, and contributed toward, the scientific advances of the Arabs. Jews in northern Europe, closed off from that enlightened spirit, contributed little to developments in medicine. Moreover, Jewish medical practitioners in the North mixed their medicine with a healthy dose of magic and folk remedies. Even so, Jewish physicians throughout Europe gained great popularity because of their medical expertise. Arabic and Greek medical works were available in Hebrew translations, but not in most European languages, and the Jews' propensity for travel and study made them aware of discoveries in other lands.

Paradoxically, because of the popular view that demons and magic were responsible for disease, the Jews' medical reputation enhanced the Christian perception of Jews as sorcerers, a development that later had both positive and negative consequences. On the one hand, Jewish doctors were very popular in northern Europe throughout the Middle Ages, despite stringent church prohibitions against consulting them and despite the constant warning of Christian clerics that Jews would turn their magic against their patients. On the other hand, every time a Jewish physician tried to help a Christian, he risked his life. If the Jew was successful, his reputation as a magician was enhanced along with the fear, respect, and animosity attendant thereto; if he failed, he often lost his own life. This was true of the very first Jewish physician on record in the West. Tzedkeiah, court physician to Emperor Charles the Bald, was accused of poisoning the emperor in 877 and undoubtedly was executed.

Beyond the Jews' medical knowledge, their involvement in international commerce further added to their reputation for sorcery, because most of the exotic elements of the medieval pharmacopoeia were imported from the East, and drugs and poisons were synonymous in the medieval mind. Thus in 1267 church councils in Breslau and Vienna forbade Christians to purchase foodstuffs from Jews lest they be poisoned, and during the fourteenth century thousands of Jews were massacred, accused of causing the Black Plague by poisoning the wells. One important element of Martin Luther's anti-Semitism was his belief about the superior medical knowledge and practices of the Jews:

If they could kill us all, they would gladly do so, aye, and often do it, especially those who profess to be physicians. They know all that is known about medicine in Germany; they can give poison to a man of which he will die in an hour, or in ten or twenty years; they thoroughly understand this art.<sup>45</sup>

Luther aptly summarized the late medieval Christian view of both the positive and the negative implications of Jewish medical knowledge and practice.

Normally Jewish law permitted a physician to charge a fee for his services.<sup>46</sup> At the same time, there was great concern that medical services be available to the poor. The Talmud approvingly held up the example of Abba, the bleeder, who

placed a box outside his office where his fees were to be deposited. Whoever had money put it in, but those who had none could come in without feeling embarrassed. When he saw a person who was in no position to pay, he would offer him some money, saying to him, "Go, strengthen yourself [after the bleeding operation]."<sup>47</sup>

The Middle Ages provided similar examples of the charity of Jewish physicians. The ethic must have been quite powerful, because it was not until the nineteenth century that a rabbi ruled that the communal court should force physicians to give free services to the poor if they did not do so voluntarily.<sup>48</sup>

The obligation to heal the poor devolved upon the community as well as the physician. Therefore the sick enjoyed priority over other indigent persons in their claim to private or public assistance. Joseph Caro recorded the view that while contributions to erect a synagogue were to take precedence over ordinary forms of charity, even the synagogue's needs must give way to the requirements of the indigent sick. And the sick could not refuse such aid if they required it to get well.<sup>49</sup>

Reliance on the generosity and ethical sensitivity of physicians for the care of the poor was the norm, but there were cases where Jewish communities organized medical care in a form of socialized medicine. In medieval Spain, for example, Jews played a prominent role in the state's program of socialized medicine, and in other places Jewish communities on their own hired surgeons, physicians, nurses, and midwives as salaried servants.<sup>50</sup> Whatever the arrangement, the community as well as the individual doctor was under the obligation to heal, and that was taken very seriously.

There is no evidence of hospitals in biblical or talmudic times, but there were "houses set apart" for lepers and, during the talmudic period, there were also marble operating rooms where surgeons did their work.<sup>51</sup> During the Middle Ages, Jewish communities had inns that served primarily to house poor or sick travelers and secondarily to nurse the ailing poor of the community itself—although the poverty and political insecurity of medieval Jewish communities made both types of service primitive.

The first Jewish hospitals designed exclusively for the sick were built in the last half of the eighteenth century in the enlightened countries of western and central Europe, where Jews could look forward to permanent settlement and better economic prospects. By 1933, Jewish hospitals existed in most countries in Europe; Poland alone had 48—nine percent of all of the hospitals in the country—with over 3,500 beds. This pattern of establishing hospitals continued in North America, although the rationale changed over time. The original motivation was to provide hospital care for Jewish patients in a Jewish atmosphere. After about 1920, when an increasing percentage of American Jews had become Americanized and consequently less interested in a specifically Jewish hospital environment, the justification for building and maintaining hospitals was increasingly to afford professional opportunities to Jewish physicians, who suffered severe discrimination in gaining appointments to the staffs of other hospitals. After 1950, when such discrimination subsided and when less than a quarter of the patients in Jewish hospitals were Jewish, the rationale shifted once again: Jewish hospitals simply served the general community.<sup>52</sup>

The obligation to heal in Judaism extended beyond medical professionals to laypersons, who were required to visit the sick. That duty was seen specifically as a means of helping to cure the patient; therefore it was not only encouraged, but prescribed. In fact, one who refused to perform this duty was likened to a shedder of blood, because he thereby withheld a source of cure from the patient.<sup>53</sup> In their prayers every morning Jews recited a passage from the Talmud that depicted visiting the sick as one of ten ethical duties that had no specific limits and that gave "fruits which a person enjoys in this world while the stock remains for him in the World to Come."<sup>54</sup> In addition to being a legal and moral duty, it was "a religious precept" in the sense that it enabled one to imitate God.<sup>55</sup> The obligation devolved equally upon every Jew, even the old and the great, who were to visit their juniors and subordinates.<sup>56</sup>

Especially during the Middle Ages, Jews formed local societies to visit the sick, a practice modern congregations are beginning to revitalize.<sup>57</sup> It is the lay people who participate in these groups; rabbis simply do an equal share with the other members of the society. For the promotion of good neighborly relations, Jews are also obligated to visit non-Jewish patients.<sup>58</sup> Jewish law even provides some guidance as to what one is to do during the visit in order to maximize its good effects.<sup>59</sup>

Thus physicians, hospitals, and visitors all became important human agents of cure, but ultimately God was recognized as the Healer. Physicians were to be consulted only because they functioned as God's partners in treatment, not as his substitutes. Because of God's crucial

role in curing, Jews were supposed to pray to God as part of the treatment; indeed, in the traditional liturgy even a healthy Jew was supposed to recite a prayer three times each weekday asking God to heal the sick. Similarly, before the prescribed monthly bloodletting, the Jew of Talmudic times was supposed to say:

May it be your will, O Lord my God, that this operation be a cure for me, and may you heal me; for you are a faithful healer, and your cure is certain, since it is not the way of human beings to cure, but so they are accustomed.

After the bloodletting, the patient was to say: "Blessed be He Who heals without fee."<sup>60</sup> Moreover, because the ultimate cause of illness was presumed to be sin, the Talmud advised the sick to ask a sage to pray for them on the assumption that the sage's relatively unblemished record would aid them in pleading their case before God.<sup>61</sup> Thus Jews sought cure from both divine and human agents, assuming that the latter would succeed only if God willed them to do so.

### Methods of Cure and Prevention

Using materials similar to a disease in order to cure it was widespread in both Talmudic and medieval times. As the English treated dog bites by applying "the hair of the dog that bit them," so the Mishnah prescribed using the lobe of the dog's liver.<sup>62</sup> The only Talmudic cure that Rabbi Jacob Mollin (1365-1427) endorsed was this:

"When a bone sticks in one's throat, he should place a similar bone on his head and say, 'One, one, gone down, swallowed, swallowed, gone down, one, one.'" This cure is tested and proven, and so we may use it.<sup>63</sup>

To stop bleeding, Talmudic sources recommended parching some of the shed blood over a fire and then applying the dry, powdery product to the wound. They also suggested using contrary treatments: cold to cure fevers, and heat to cure chills.<sup>64</sup>

Among the treatments mentioned in the Talmud are diets, warm and cold compresses, sweating, rest, sunbaths, change of climate, hydrotherapy, psychotherapy, massages, and exercises.<sup>65</sup> Medicinal powders, liquids, and herbs were used, including even opium, but the Rabbis were wary of using drugs and cautioned against their overuse.<sup>66</sup> Meat, eggs, vegetables, and water were considered nourishing, but wine was placed at "the head of all medicine": "Only where there is no wine are drugs required."<sup>67</sup> Clean air and sunlight were considered the best cures.<sup>68</sup>

Medieval Jewish physicians rarely used Talmudic remedies. Some rabbis justified this by claiming that Talmudic cures were outdated. Rabbi Jacob Mollin, for example, suggested these reasons for abandoning them:

One should not try any of the medicines, prescriptions or exorcisms recommended in the Talmud because no one today knows how they should be applied. If they should be tried nevertheless and found ineffective, the words of our sages would be exposed to ridicule.

Joseph Caro also advised against using Talmudic remedies because the medicines and personal habits recommended in the Talmud differed from those of medieval European communities. In seventeenth-century Poland, Rabbi Abraham Gombiner went even further, saying that many things mentioned in the Talmud were dangerous and ineffective "today because conditions and ways of living have changed."<sup>69</sup>

In place of Talmudic therapies, Jewish physicians used whatever was accepted medical procedure in their times, reasoning that the religious imperative was to cure and that the Talmudic prescriptions were simply suggestions based upon the medicine of that time. The one non-Jewish medical practice Jews consistently rejected for religious reasons was the use of human and animal blood. According to one scholar, "there is not a single instance in all of Jewish literature of the prescription of blood for internal medicine, and the very rarity of the suggestions that horse's blood, or the menses, may be applied externally serves only to bring out in bold relief the sharp prejudice against these usages."<sup>70</sup> In view of the medieval blood-libels against Jews, this is indeed ironic.

Biblical and Talmudic medicine proved more effective in preventing illness than in curing it. As the third-century Rabbi Samuel said, "Washing one's hands and feet in the morning is more effective than all the lotions in the world." Some of the preventive measures that the Bible and Talmud prescribed were remarkably advanced for their time. In cases of communicable diseases, Jews of biblical times disinfected clothing and objects by washing, fumigation, or fire. They also knew about the preventive significance of isolation (see *Lv.* 13-15). The rabbis similarly advised the public to avoid crowds and narrow streets during epidemics. Flies were to be avoided as carriers of disease. It was forbidden to dig wells near dumps and cemeteries. Water that had been left standing uncovered was considered unfit for human consumption, and water suspected of being contaminated had to be boiled before use. Food had to be served fresh and in clean dishes, and meat had to be cooked sufficiently to destroy any parasites it might harbor.<sup>71</sup>

Sages of the biblical and rabbinic periods roundly criticized faith healing. Anyone who consulted exorcists was cut off from the community (*Lv.* 19:31, 20:6), and the exorcists themselves were stoned to death (*Lv.* 20:27), because any form of magic was viewed as an "abomination to the Lord" (*Dt.* 18:10-12). Even the suggestion of sorcery was abhorred. Thus Moses' use of a copper serpent to heal the people from snakebites (*Nm.* 21:9), was easily misconstrued as cure through sorcery, and so—much to the delight of the later sages—it was destroyed by King Hezekiah (*2 Kgs.* 14:4). The Rabbis strongly condemned the use of incantation as part of treatment, especially when it involved biblical verses.<sup>72</sup>

As time went on, however, the Rabbis increasingly bowed to the fear and pain involved in being sick or wounded and ignored injunctions against magical cures. The fourth-century disputants Rava and Abayae agreed that "nothing done for the purposes of healing is to be forbidden as superstitious," and indeed the Talmud contains scores of references to the use of charms for healing.<sup>73</sup> During the Middle Ages, Rabbi Israel Isserlein (d.1460) faced the issue squarely. In answering a questioner, he wrote, "regarding your questions as to whether an invalid may consult a magician, know that we have found no explicit prohibition of such a course, for the biblical strictures against sorcerers do not apply in this case." Influenced by that advice, Rabbi Solomon Luria (1510-1573) ruled even more permissively that "if a serious illness is caused by magic or evil spirits, one may resort to a non-Jewish magician for a cure."<sup>74</sup>

But it was not necessary to consult a magician because Jewish physicians employed the entire range of magical remedies as a matter of ordinary practice, often with rabbinic sanction. Medieval remedies might have had therapeutic value, but it was the incantations that invariably accompanied them that the masses and, for that matter, many of the physicians regarded as the effective agent in the cure. Biblical verses and forms of God's name were used extensively,<sup>75</sup> and medieval Jews often borrowed both the form and content of incantations from neighboring Christian sources. Thus the ethical manual *Sefer Hasidim* (thirteenth century) specifically employed the German usage: "To cure a person who has been harmed by a demon, the charm must be repeated nine times, as they do in Germany."<sup>76</sup> Normally, Jews substituted a Jewish form for the Christian incantations they borrowed, but sometimes they acquiesced to the use of unaltered Christian incantations by non-Jewish doctors ministering to them. Rabbi Menahem of Speyer (fifteenth century) offered a justification for this: "The sounds effect the cure, and not the words of the incantation; therefore a Christian may be permitted to heal a Jew even if he invokes the aid of Jesus and the saints in his spell."<sup>77</sup>

Aside from incantations, physicians regularly employed other forms of magic for both cure and prevention. Medieval Jews who fell ill often changed their names and sometimes even adopted new parents so that their parents' names might be different as well. Eastern European Jews of the last several centuries improved on this scheme: They regularly chose some form of the Hebrew word for life (*hayyim*) for their new names in order to both hide the identity of the sick from the demons of the disease and also to force God, as it were, to sustain them through the power of the meaning of the new name.<sup>78</sup> To counteract the demons that inflict illness at night, before retiring one was to recite the "anti-demonic psalm" (generally identified as Psalm 91, but sometimes as Psalm 3), *Numbers* 6:24–27, and *Deuteronomy* 32:10–12.<sup>79</sup> Amulets were permitted with rabbinic approval; those written by a recognized physician were approved automatically. Jews commonly tied red ribbons to the beds of women who had just given birth to ward off the evil eye from both mother and child. When the plague devastated a community, its leaders inspected the *mezuzot*, the traditional signs on the doorposts containing two sections of the Torah, to determine if one was improperly written and therefore responsible for the infestation. Astrology also played a major role in medieval Jewish medicine. The planet Saturn governed illness and death; thus its movements and the waning and waxing of the moon were especially scrutinized in medical matters.<sup>80</sup>

Jewish curative and preventive medicine in Talmudic and medieval times was thus a combination of the empirical, the religious, and the magical. While some of the specific forms were distinctly Jewish (for example, the use of *mezuzot* to ward off disease), the substance of these measures was undoubtedly the product of the interaction between Jews and the non-Jews among whom they lived, who used similar empirical, religious, and magical measures.

## Mental Health

If it was difficult to discover effective medications for the body, it was all the more difficult to treat illnesses of the mind. The Bible describes in detail the paranoid psychopathia and perhaps the epilepsy of King Saul, and others in the Bible and Talmud suffer from visual and auditory hallucinations, insanity, and "possession by demons or spirits."<sup>81</sup> Biblical prophets experienced trances and ecstasies. The ancient Jews interpreted such phenomena positively, as proof of divine contact, but the later tradition treated them negatively, as illness, and sought to exorcise the ghosts (*shedim*) or furies (*dybbuk*) that caused them. Music was used

often in an attempt to seduce demons to leave the minds of the insane and thereby to calm and cure them.

Because insanity had legal implications, the Rabbis tried to define it as specifically as possible:

Our Rabbis taught: Who is deemed an imbecile? He who goes out alone at night, and he who spends the night in a cemetery, and he who tears his garments. It was taught: Rabbi Huna said: he must do all of them [to be considered an imbecile]. Rabbi Johanan said: Even if [he does only] one of them. It was taught: Who is deemed an imbecile? One who destroys everything which is given to him.<sup>82</sup>

Maimonides notes, however, that these are to be construed as examples, not as an exhaustive definition of insanity.<sup>83</sup> Moshe Halevi Spero, a contemporary Orthodox psychologist, suggests specific criteria for determining mental disorders in the cases of a person who commits suicide or a woman who seeks an abortion or permission to use contraceptive devices for reasons of mental health. "Generally speaking," he says, "*shtus* (insanity) might denote one who has lost the ability to reason or make reality-based judgments. *Shtus* may also signify the loss of emotional control."<sup>84</sup>

The legal implications of insanity in Jewish law were many. The Rabbis of the Mishnah and Talmud exempted the insane from responsibility in both ritual and civil law, and they made the insane ineligible for certain legal roles (for example, being empowered as another person's legal agent).<sup>85</sup> The Talmud permitted lighting a candle in violation of the Sabbath rules for a woman in labor in order to spare her psychic anguish.<sup>86</sup> Citing that precedent, Nahmanides (thirteenth century) specifically included mental illness in the category of "saving one's life" (*pikuah nefesh*) so that almost all obligations and prohibitions could be laid aside in order to save a person's mental health as well as his or her physical health.<sup>87</sup> Other issues concerning the mentally ill that arose in Jewish law included defining the exact legal responsibility of someone who did not have free will (psychological determinism), who was under the influence of alcohol or drugs, who was a homosexual, or who wanted to abort a fetus.<sup>88</sup> Contemporary rabbinic authorities are increasingly interested in the progress of psychology as a science because of its legal as well as its therapeutic ramifications.

Especially because mental illness was often not curable, the Jewish tradition sought to prevent it by offering advice for maintaining mental health, often suggesting the cultivation of specific personal characteristics and values. The biblical *Book of Proverbs* provides an early instance of such advice. Perhaps the most famous example in Rabbinic literature is *Ethics of the Fathers (Avot)*, a tractate of the Mishnah (edited 220

C.E.) which is read every Sabbath afternoon during the weeks between Passover and Shavu'ot (Pentecost). A thousand years later Maimonides wrote a book on personality traits in which he embraced the Aristotelian golden mean as the proper guideline. He suggested that one who was very calm, for example, should try to go to the other extreme in order to maintain a balance of spirit.<sup>89</sup> Jews in Medieval Spain also produced important psychological-ethical handbooks, including *Hovot ha-Levavot* (*Duties of the Heart*) by Bahya ibn Paquda (eleventh century); *Sefer ha-Hinukh* (*Book of Education*) by Aaron He-Levi of Barcelona (thirteenth century); and *Kad ha-Cemah* (*Measure of Flour*) by Bahya ben Asher (thirteenth century).<sup>90</sup> In the nineteenth and twentieth centuries the Musar movement spread through some Orthodox communities of eastern Europe, seeking to balance the heavy emphasis on study of texts and intellectual analysis that was common in traditional seminaries with materials and sessions devoted to moral and spiritual development.

In such ways, Jews sought to prevent and cure mental illness. After the bands of prophets during biblical times (see 1 *Sm.* 10:5-12; 19:8-24), we do not hear of Jewish communities isolating the mentally ill. The Rabbis limited the legal incapacities of the insane as much as possible, distinguishing between those times when a man was apparently sane and therefore legally capable and those times in which he was not.<sup>91</sup> However primitive their understanding of mental illness, Jews saw it as an illness and not as a moral fault. They therefore did not treat it as something for which one should repent or be punished, but rather sought to prevent or cure it as part of their general obligation to heal. This prepared the way for Sigmund Freud and many other Jews to develop and practice the modern medical forms of psychological care.

## Sexuality

For Judaism, sexual relations are a good thing within marriage; in fact, they were prescribed in two separate commandments of God. One was the command to "be fruitful and multiply" (*Gn.* 1:28). The other asserts that a man must not withhold from his wife "her food, her clothing, or her conjugal rights" (*Ex.* 21:10). The fact that these were two separate commandments meant that a man's duty to have sexual relations with his wife was independent from his duty to propagate, and consequently the duty to fulfill the woman's sexual needs continued even after the man had fulfilled the duty to propagate; that is, after he had begotten two children, one male and one female, in accordance with the verse in *Genesis* 1:27, "male and female He created them."

The Rabbis of the Mishnah had no qualms about spelling out specifically how often a man should offer to have sexual relations with his wife in order to fulfill the commandment in *Exodus*:

If a man forbade himself by vow to have intercourse with his wife, the House of Shammai ruled: she may consent to the deprivation for two weeks; the House of Hillel ruled: only for one week.

Students may leave home to study the Torah without the permission of their wives for a period of thirty days; laborers for only one week.

The times for conjugal duty prescribed in the Torah are: for men of independent means, every day; for laborers, only twice a week; for ass-drivers, once a week; for camel-drivers, once in thirty days; for sailors, once in six months. These are the rulings of Rabbi Eliezer.<sup>92</sup>

These rules clearly recognized a woman's need for sexual relations and granted legal status to that need by imposing an obligation on her husband.

The man also has sexual rights in marriage according to Jewish law, as the Mishnah specified:

If a wife rebels against her husband, her marriage contract may be reduced by seven *denarii* per week. . . . For how long may the reduction continue to be made? Until a sum corresponding to her marriage contract has accumulated [at which time he may divorce her without giving her any monetary marriage settlement whatsoever]. . . . Similarly, if a husband rebels against his wife, an addition of three *denarii* a week is made to her marriage contract. . . .<sup>93</sup>

Underlying this obligation was the basic principle that sexual relations were a special form of communication and bonding between husband and wife. Sexual energies were thus to be channeled toward good purpose, that is, the strengthening of the marital bond. Consequently, all sexual relations outside marriage were prohibited, although premarital sex was punished much less harshly than adultery or incest.

Celibacy was frowned upon. Thus, despite Rabbi Hamnuna's scholarly reputation among his third-century colleagues, Rabbi Huna turned away from him in disgust, refusing to see him until he was married, for "He who is twenty years of age and is not married spends all of his days in . . . sinful thoughts." According to another rabbinic passage, "A man without a wife lives without blessing, without life, without joy, without health, and without peace. . . ." A medieval, mystical source carried this one step further: "The divine presence can rest only upon a married man because an unmarried man is but half a man and the divine presence does not rest upon that which is imperfect." So important was it to take a wife that Jews could "sell a scroll of the

Torah for the purpose of [having enough money to] marry." Such practices contrasted sharply with the ideal of monasticism held by a number of elements within Christianity.<sup>94</sup> This emphasis on marriage is in part an appreciation for the fullness of life it affords and its role in transferring Jewish culture to the next generation, but it is also a reaction to the fear of the power of sex. Marriage was a way to satisfy a man's sexual drive so that he could devote his life to the raising of a family, work, and study.

Jews shared the abhorrence of masturbation that characterized other societies. Interestingly, although legal writers did not debate the prohibition of this act, they had difficulty locating a biblical base for it, and no less an authority than Maimonides claimed that it could not be punishable by the court because there was not an explicit negative commandment to forbid it. In part, the prohibition undoubtedly stemmed from assumptions about the medical consequences of ejaculation, as Maimonides explained:

Semen constitutes the strength of the body, its life, and the light of the eyes. Its emission to excess causes physical decay, debility, and diminished vitality. Thus Solomon, in his wisdom, says: "Do not give your strength to women" [*Proverbs* 31:3]. Whoever indulges in sexual dissipation becomes prematurely aged; his strength fails; his eyes become dim, a foul odor proceeds from his mouth and armpits; the hair of his head, eyebrows, and eyelashes drops out; the hair of his beard, armpits, and legs grows abnormally; his teeth fall out; and besides these, he becomes subject to numerous other diseases. Medical authorities have stated that for each one who dies of other maladies, a thousand are the victims of sexual excess.<sup>95</sup>

Although Jews feared the medical consequences of masturbation, Jewish sources did not prohibit it for those reasons, but rather because of the self-pollution involved and the murder of unborn generations. Of these two concerns, the former was far more pronounced, but the mystical tradition in Judaism gave particular emphasis to the latter theme. It pointed out that a man who masturbated was guilty not only of murder but of killing his own children; therefore, he was a criminal more reprehensible than any other. Moreover, the mystics claimed that even involuntary emissions of semen created demons, a notion common in folk literature. Thus the narrator in I. B. Singer's book, *Gimpel the Fool*, said: "I was not born. My father sinned as did Onan, and from his seed I was created—half spirit, half-demon." These notions gave graphic and harsh expression to the belief that exposed semen somehow contaminated the environment and tainted its holiness. Nevertheless, ejaculation was prized in heterosexual relations, even when it did not lead to procreation, for no "murder" took place, nor were the forces

of evil enhanced.<sup>96</sup> Apparently, for the Talmud and the medievals even the medical hazards of ejaculation were inoperative during intercourse.

From biblical times, Jews had a similar abhorrence of menstruation. Great pains were taken to avoid the slightest contact, even between husband and wife, for the whole traditional lore threatened the direst of consequences for those who touched the menses (let alone had intercourse during its flow)—extending to the children of the offenders and to their lives in the hereafter. The Talmud even claimed that a snake threatening to bite a woman would glide hastily away if she simply announced, "I am menstruating!"<sup>97</sup> There is no doubt that the fear of menstruation must have made women feel contaminated. At the same time, both Maimonides and Caro permitted a menstruating woman to hold a Torah scroll and to study from it.<sup>98</sup> Based on these mixed signals, contemporary Jews speculate widely on the extent to which menstruation provided a biological rationale in Talmudic and medieval times for excluding women from certain ritual, legal, and social roles.

Children were always considered a blessing among Jews, who took many measures to cure barrenness and to prevent miscarriages. These included wearing a stone amulet; reciting designated biblical passages; imbibing one of the many fertility potions made from fecund animals like the hare or fish; eating spicy or heavy foods like strong wines, dairy products, eggs, garlic, and meat; and avoiding light or unseasoned foods like melons and fish. In thirteenth-century Germany, Judah the Pious used the fairly common therapeutic device of a symbolic burial in order to give a barren woman a new identity, thereby freeing her from the barrenness of her previous existence.<sup>99</sup>

It was important not only to have children, but right and proper children, and it was believed that the time of coition, its form, and the thoughts of the parents during it had a bearing upon the offspring's character. Friday night, the eve of the Sabbath, was considered to be the most propitious time, and if at all possible one was to take advantage of the beneficial effects of the waxing moon by having intercourse during the first half of the lunar month. The Talmud permitted non-vaginal sex, but medieval texts depicted fearful consequences for the children of parents who engaged in such practices. Parents were sternly warned not to have relations when they were on bad terms and not to think of other individuals or of unpleasant and unworthy things during coitus. "The embryo is formed in consonance with the thoughts and emotions of the parents," claimed the Talmud, "and the greatest part of infant mortality is due to neglect of this principle." Having the courage to take this theory to its logical conclusion, the rabbis noted that "most bastards are bright because the union of their parents is consummated in love and joy!" Because the mother's thoughts were

decisive, medieval Jews were especially cautious about the influences on her—to the point of blindfolding her on the way home from the ritual bath that permitted intercourse after menses, so that she would not be distracted from thinking of pious men and thus would have a good chance of conceiving one.<sup>100</sup>

Despite the command to have two children and the ideal of having more, and despite the general prohibition against “wasting the seed,” contraception was permitted under certain circumstances. In general, the tradition, both for exegetical and economic reasons, understood the command to propagate to obligate the male but not the female. That, plus the prohibition against masturbation, meant that female forms of contraception were permitted while male forms were not. Talmudic sources indicate that mechanical and oral forms of contraception were in practice then, but the specific circumstances under which female contraception was permitted are not clear. There was an ambiguous Talmudic ruling on the subject, and medieval commentators took varying positions. Those who followed the lead of Rashi (eleventh century), the most famous commentator on the Talmud (for example, Rabbi Meir Posner of eighteenth-century Danzig, Rabbi Akiva Eger of nineteenth-century Posen in Prussia, and Rabbi Moses Sofer of nineteenth-century Pressburg), allowed contraception when medical reasons required it, but not otherwise. The majority of authorities, however, followed the reading of Rabbenu Tam, one of Rashi’s grandsons, who permitted women to use contraceptive devices even in situations where the mother’s life was not directly threatened. Rabbi Solomon Luria, in sixteenth-century Poland, permitted women to use contraceptive devices even for non-therapeutic purposes.<sup>101</sup> Because propagation was commanded, it can be assumed that even liberal Jews would have limited the use of contraceptives to those couples who had already fulfilled the commandment by having a boy and a girl—unless, of course, the medical condition of the woman or fetus required it.<sup>102</sup>

In contemporary times, when couples frequently postpone marriage until after extended education and the initiation of a career, the modern Jewish movements have varied widely in their response to family planning. Some allow contraception even before having children, and that has been the practice of the vast majority of Jews. Because of the loss of one-third of the Jewish population during the Holocaust, and because of the high rate of intermarriage and the extremely low birth rate among Jews, Jewish religious leaders have increasingly stressed the need for Jews to propagate, thus tempering an otherwise liberal approach to contraception on the part of many non-Orthodox rabbis and most Jews.

Sterilization was traditionally prohibited by Jews because it mutilated God’s property. However, a few recent responsa have addressed the

new methods of sterilization through vasectomies and tubal ligations. Both traditional and liberal respondents have forbidden vasectomies on the basis of the rabbinic interpretation and extension of *Deuteronomy* 23:2: "No one whose testes are crushed . . . shall be admitted into the congregation of the Lord." Jewish responses to tubal ligations have been more permissive both because a woman does not come under that Deuteronomic prohibition and also because she is not obligated to procreate. All have agreed, however, that even male sterilization is permitted and perhaps even required if the man's life or health makes it necessary.<sup>103</sup>

The Bible proscribed homosexuality in the strongest of terms: "Do not lie with a male as one lies with a woman; it is an abomination" (*Lv.* 18:22). In light of that, Jewish homosexuals of times past hid their orientation as much as possible. In the last decade, however, as homosexuals of all religious persuasions have become more open about their sexual behavior, Jews have begun a rather painful reexamination of the traditional stance on this issue. The Reform movement has even accepted several avowedly homosexual congregations as full members of the Union of American Hebrew Congregations, although this was not accomplished without controversy. There have been several positions articulated within the Conservative movement, but none has been as liberal as the Reform policy, and Orthodox spokesmen have maintained the traditional abhorrence of homosexuality.<sup>104</sup>

### Issues at the Beginning of Life

Traditional sources could not have contemplated modern reproductive technology, and so little was said that is directly relevant to many issues that it raises. Contemporary rabbis extend the law to cover these issues as lawyers and judges do in other legal systems—by analogy and by reference to the values behind the law.

According to Jewish law, adultery or incest does not take place until and unless the penis of the man enters the vaginal cavity of the woman. Consequently, the laws against adultery and incest do not apply to artificial insemination. Even the most stringent rabbinic authorities would permit a husband to have his semen implanted in the uterus of his wife. However, rabbis are much less sanguine about having some other man serve as the donor or using a surrogate mother, practices often prohibited on the basis of concern about unintentional incest in the next generation (that is, if the child of the artificial insemination happens to marry his or her natural half-brother or half-sister). Similar remarks apply to in-vitro fertilization: There is no objection if the husband and wife are the donors and the zygote is implanted in the uterus of the

wife. All of this, of course, is condoned only when conception cannot take place through sexual intercourse.

When a couple cannot have children, Jewish law permits adoption. Several passages in the Bible seem to indicate that there was a formal ceremony of adoption during biblical times, although that is not specified in any legal source of the Bible. Talmudic literature prescribed no formal ceremony, but rabbinic law stipulated that a child who lived with a man for six months or more legally became the child of that man—a provision recently used in a New York State civil case.<sup>105</sup>

Rabbinic sources understood the process of gestation in a developmental way. Specifically, within the first forty days after conception (within the first three months, according to some sources), they regarded the zygote as "simply water." That meant that abortion during that time was permitted for more reasons than it was during the second period of pregnancy, which lasted until the moment of birth (when the head emerged, or, if a breech birth, when the shoulders emerged). During that second period of gestation, Jewish law did not regard the fetus as a full-fledged human being with all the rights pertaining thereto, while the mother clearly was. Consequently, if the fetus threatened the life or health of the mother, then it had to be aborted, as the following Mishnah graphically stipulated:

If a woman has [life-threatening] difficulty in childbirth, one dismembers the embryo in her, limb by limb, because her life takes precedence over its life. Once its head [or its "greater part"] has emerged, it may not be touched, for we do not set aside one life for another.<sup>106</sup>

While all Jewish sources have required abortion in order to preserve the life or organs of the mother, opinion has differed on how much of a threat to a woman's health the fetus must pose in justifying an abortion or requiring it. Citing a responsum by Rabbi Israel Mizrahi (eighteenth century), some authorities have permitted an abortion to preserve the mother's mental health. Some traditional rabbis have used the consideration of the mother's mental health as a roundabout way for justifying abortion in cases where amniocentesis has revealed that the child will be malformed or will have a genetic, degenerative disease like Tay-Sachs. They have engaged in that form of legal legerdemain because there is no justification in the traditional sources for abortion for reasons having to do with the health of the fetus; only the mother's health is a consideration. That, of course, is probably because until recently it was impossible to know very much about the fetus before birth. Noting that fact, some Conservative and Reform rabbis claim that we now can and should establish the fetus' health as an independent consideration when judging whether an abortion is justified.<sup>107</sup>

In practice, Jews who wish an abortion rarely worry about a justification—to the extent that among Jews in Israel, who number approximately 3.5 million, there were at least 600,000 abortions between the state's founding in 1948 and 1975. That is a particularly problematic phenomenon for the contemporary Jewish community because Jews are barely reproducing themselves in Israel and are falling far short of that in the United States, where the Jewish reproductive rate is approximately 1.6 or 1.7 children per couple. Consequently, even those rabbis who are liberal in their interpretation of Jewish abortion law also are calling for Jews to marry and to have children so that the Jewish people and Judaism can continue for more than another generation or two.<sup>108</sup>

### Issues at the End of Life

The criterion of death in Jewish law was based upon the passage in *Genesis 7:22*, "All creatures in whose nostrils was the breath of life." Because the Bible identified life with breathing, and because testing the breath of a person was easy (one simply put a feather to the nostrils of a patient), Jews used the breath test to determine death. One position in the Talmud required that there also be cessation of heartbeat, a condition some medieval sources considered to be the primary factor in ascertaining death, with cessation of breath simply indicating loss of cardiac function. Because of a comment of Isserles on the *Shulhan 'arukh* (1567) that we are no longer competent to determine the exact moment of death, during the last several hundred years people normally have waited for periods extending between twenty minutes and an hour after cessation of both breath and heartbeat before beginning preparations for burial.<sup>109</sup>

Traditional Judaism has not allowed cremation, because that constitutes destruction and desecration of God's property. However, many authorities have permitted the use of organs for the life or health of other living human beings, because that does not desecrate the dead person, but rather, honors him or her. The one complicating factor is that the person must legally be dead before the bodily part may be transplanted. Consequently, there is no problem, for example, in willing the corneas of one's eyes to another because they are usable for as long as twenty-four hours after death. Because of doubts about the moment of death, transplanting vital organs such as the heart or kidneys is much more complicated for Jews. Some Conservative and Reform authorities permit organ transplants after a flat electroencephalogram reading.<sup>110</sup>

Similar considerations apply to autopsies. Although rabbis differ as to how specific the reason must be in order to justify an autopsy, if

there is some medical or legal reason for doing an autopsy, Judaism allows it. In the landmark decision on this, Ezekiel Landau (eighteenth century) permitted autopsies only when life depends upon this particular autopsy. Modern means of communication have ironically led Orthodox rabbis to be more restrictive in permitting autopsies on the grounds that autopsies done elsewhere may yield the desired information; while the same improved communications have prompted Reform Rabbi Solomon Freehof to claim that the "at hand" requirement is no longer necessary because people everywhere will benefit from the new medical knowledge revealed by an autopsy.<sup>111</sup>

Jewish sources have classified active means of euthanasia as murder, even when the motivation of the perpetrator was benign. They have, however, allowed passive euthanasia when a cure is no longer possible. Although the sources have not put it in quite this way, the general principle is that Jews are commanded to cure, but not to perpetuate life beyond its natural bounds. Two Talmudic passages and one thirteenth-century responsum described situations in which it was permissible to let nature take its course.<sup>112</sup> The principle embodied in these sources was later incorporated into the glosses of Rabbi Moses Isserles on the *Shulhan 'arukh* (sixteenth century) as follows:

One in a dying condition is considered a living being in all respects. . . . Whoever closes the eyes [of the dying person] is regarded as one who sheds blood. . . . *Gloss:* . . . It is likewise forbidden to do anything to hasten the death of one who is in a dying condition. For example, if one has been in a dying condition for a long time and could not depart, we may not remove the pillow or the mattress from under him just because some say that there are feathers from some fowl which cause this prolongation of death. Similarly, we may not move him from his place. . . . However if there is anything which causes a hindrance to the departure of the soul, e.g. if near the house there is a knocking sound of a wood cutter, or there is salt on his tongue, and these hinder the departure of the soul, it is permitted to remove it, for there is no direct action involved since he merely removes the hindrance.<sup>113</sup>

The thirteenth-century source actually *prohibited* any action that might lengthen the patient's agony by preventing his quick death, and it forbade those attending at the moment of death to cry lest the noise restore the soul to the deceased. Some later authorities even prohibited the use of medicines to "delay the departure of the soul."<sup>114</sup> Modern technology has obviously made these questions considerably more complicated by enhancing the ability to maintain many bodily functions artificially, thereby blurring the distinction between life and death. Contemporary rabbis therefore differ markedly on many of the particular questions that have arisen in this regard.<sup>115</sup> Whatever their differences,

they all attempt to balance the tradition's underlying principles of respect for life against the permission, and perhaps the obligation, to let nature take its course at some point.

Judaism thus has had a long history of dealing with medical questions. Its answers have been informed by its fundamental theory of the body as the creation and property of God on loan for the duration of life. Although the following Mishnah is written as a warning to witnesses in capital cases and not in a medical context, it offers a fitting expression of the sacredness of life within Judaism that makes concern for the well-being of the body a matter of divine import:

Only one man was originally created in order to teach the lesson that if one destroys a single person, Scripture imputes it to him as if he had destroyed the whole population of the world. And if he saves the life of a single person, Scripture imputes it to him as though he had saved the whole world.<sup>116</sup>

### Notes

Citations in the Mishnah are noted with tractate, chapter, and section, e.g., *Bava Kamma* 8:1. References to the *Babylonian Talmud* are either preceded by "B.T." or carry no prefix before the name of the tractate and the page number in the standard, Bomberg edition (e.g., B.T. *Bava Kamma* 86a, or, simply *Bava Kamma* 86a). References to the *Palestinian Talmud* are preceded by "P.T.," to the *Mishneh Torah* of Maimonides by "M.T.;" and to the *Shulhan 'arukh* by Caro (with glosses by Isserles) by "S.A."

The Mishnah has been translated in one volume by Herbert Danby (London, 1933) and in six volumes by Philip Blackman (London, 1955). The *Babylonian Talmud* has been translated in thirty-five volumes under the general editorship of I. Epstein (London, 1935-1959). Most of Maimonides' *Mishneh Torah* has been translated in twenty-one volumes under the general editorship of Leon Nemoy (New Haven, 1949-1979). The major collection of Midrash, *Midrash Rabbah*, consisting of rabbinic commentaries on the Torah (Pentateuch) and the five scrolls read in the synagogue (*Song of Songs*, *Ruth*, *Lamentations*, *Ecclesiastes*, and *Esther*) has been translated in ten volumes under the editorship of H. Freedman and Maurice Simon (London, 1939-1951). Jacob Neusner is in the process of translating the *Palestinian Talmud* under the title of *The Talmud of the Land of Israel* (Chicago, 1983-1984), ten volumes of which have appeared as of this writing. The *Shulhan 'arukh* has not been translated.

1. Milton Himmelfarb and David Singer, eds., *American Jewish Yearbook, 1983* (New York, 1982), 83:275-279.
2. Isaiah 49:6; see also Isaiah 51:4.
3. *Tosefta, Pisha* 4:14; B.T. *Pesahim* 66a.
4. See *Berakhot* 61a, b; *Sanhedrin* 38a; *Genesis Rabbah* 1:3; *Exodus Rabbah* 24:1; and *Numbers Rabbah* 18:22 for examples of the Rabbis' praise of the body. See *Sanhedrin* 91a, b; *Shabbat* 152b; and *Genesis Rabbah* 67:3 for examples of the interaction of body and soul in

determining the virtuous or sinful nature of a person. See also A. Cohen, *Everyman's Talmud* (New York, 1949), pp. 67-78, 88-95, on these topics.

5. P.T. *Kiddushin* 66d.
6. *Ta'anit* 11a; See also M.T. *Laws of Ethics* 3:1.
7. On the primacy of preserving life over other commandments, see *Yoma* 83-84; M.T. *Shabbat*, ch. 2. On the requirements to live where there is a physician, see P.T. *Kiddushin* 66d; see also B.T. *Sanhedrin* 17b.
8. *Leviticus Rabbah* 34:3.
9. M.T. *Laws of Ethics*, chs. 3-5.
10. *Ibid.* 3:3; see also 4:1.
11. Maimonides, *Guide for the Perplexed*, M. Friedlander, trans. (London, 1904) Part III, chs. 33, 35, 48.
12. *Tanhuma Buber*, Shemini, 15b; see also *Genesis Rabbah* 44:1 and *Leviticus Rabbah* 13:3.
13. *Berakhot* 53b.
14. See *ibid.* 55a, *Sotah* 4b.
15. *Sanhedrin* 17b; *Avodah Zarah* 20b; P.T. *Shabbat* 1:3; Solomon Ganzfried, *Kitzur Shulhan Arukh* (translated by Hyman E. Goldin as "Code of Jewish Law," New York: 1927), Part 1, ch. 2:1.
16. Salo Wittmayer Baron, *The Jewish Community*, 3 vols. (Philadelphia, 1948), 2:197-198.
17. Maimonides, *Guide*, Part 3, ch. 27.
18. *I Maccabees* 1:15.
19. *Antiquities* XV 8:1.
20. S.A. *Orah Hayyim* 308:45 and 518:2.
21. See, for example, Simon Greenberg, *A Jewish Philosophy and Pattern of Life* (New York, 1981), pp. 416-417.
22. See J. Bleich, "Smoking," *Tradition* 16:4 (Summer 1977), 130-133 for a review of Orthodox opinions. The Rabbinical Assembly, the association of Conservative rabbis, has passed a resolution forbidding smoking; see *Proceedings of the Rabbinical Assembly* 44 (1983), p. 182. For a Reform position, see Solomon Freehof, *Reform Response for Our Time* (Cincinnati, 1977), ch. 11.
23. See Sidney B. Hoenig, "The Use of Drugs: An Historic Excursion," in Leo Landman, ed., *Judaism and Drugs* (New York, 1973), pp. 39-50; Walter S. Wurzbarger, "The Jewish Attitude Toward Psychedelic Religion," *ibid.*, pp. 135-143; David Novak, "Alcohol and Drug Abuse in the Perspective of Jewish Tradition," *Judaism* 33 (1984): 221-232. On the use of experimental drugs to cure or to relieve pain, see J. David Bleich, *Judaism and Healing: Halakhic Perspectives* (New York, 1981), pp. 116-122, 137-139.
24. See Landman, L., ed., *Judaism and Drugs*; Menachem M. Brayer, "Drugs: A Jewish View," in Fred Rosner and J. David Bleich, eds., *Jewish Bioethics* (New York, 1979), pp. 242-250; Alex J. Goldman, *Judaism Confronts Contemporary Issues* (New York, 1978), ch. 10; Novak, "Alcohol."
25. See "Drunkenness," *Encyclopedia Judaica* 6:237-241; Goldman, *Judaism*; Novak, "Alcohol."
26. *Shabbat* 55a; see also *Sanhedrin* 101a.
27. *Midrash Tadshe* 16.
28. See *Menahot* 29b for a powerful Talmudic example.

29. *Bava Batra* 55b; *Shabbat* 129b.
30. *Berakhot* 25a; *Shabbat* 109b; *Ta'anit* 21b; *Ketubbot* 20a, 77a; *Gittin* 70a; *Avodah Zarah* 30a; *Hullin* 48a; etc.
31. *Shabbat* 41a; *Bava Metzia* 107b; *Hullin* 51a.
32. *Gittin* 70b; *Sanhedrin* 100b; *Ketubbot* 100a.
33. See Note 7.
34. See *Jeremiah* 8:22; *Hosea* 5:13; *Job* 13:4; 2 *Chronicles* 16:12.
35. *Ecclesiasticus* 38:1-12.
36. E.g. *Exodus* 15:26; *Deuteronomy* 32:39; *Isaiah* 19:22, 57:18-19; *Jeremiah* 30:17, 33:6; *Hosea* 6:1; *Psalms* 103:2-3, 107:20; *Job* 5:18.
37. *Bava Kamma* 85a; *Sanhedrin* 73a.
38. *Sanhedrin* 84b and Rashi's commentary there. See also Nahmanides (1194-1270), *Kitvei Haramban*, Bernard Chavel, ed., (Jerusalem, 1963), vol. 2, p. 43.
39. S.A. *Yoreh De'ah* 336:1.
40. *Midrash Temurrah*, as cited in *Otzar Midrashim*, J. D. Eisenstein, ed., 2 volumes (New York: 1915), 2:580-581.
41. See Rashi's commentary on *Pesahim* 21b for the *Leviticus* homily. See *Gittin* 5:8-9; *Avodah Zarah* 26a; *Bava Kamma* 113b; and *Gittin* 61a for the concern for good relations and honoring God.
42. *Avodah Zarah* 26a; M.T. *Laws of Idolatry* 10:2. The Noahic laws, which, according to Talmudic traditions, had been given to all descendants of Noah, prohibit murder, theft, incest, idolatry, blasphemy, and tearing a limb from a living animal, and they require the establishment of civil laws and courts (*Sanhedrin* 56a).
43. *Gittin* 70a and the commentary of *Tosafot* there; *Tur*, *Yoreh De'ah* 158 and the commentary of *Bet Yosef* there.
44. See Harry Friedenwald, *The Jews and Medicine* (Baltimore, 1944), pp. 47, 560, 564 ff., 570, 591, 622. On violating the Sabbath to treat a non-Jew, see *Yoma* 84b; S.A. *Orah Hayyim* 329:2; 330:2; *Even Haezer* 4:34; Me'iri, *Bet Habehirah* (Bnei Brak, Israel: 1966) on *Yoma* 84b and 85a, pp. 249-253.
45. Luther is quoted in Joshua Trachtenberg, *Jewish Magic and Superstition* (New York, 1939), p. 6. On the relationship between the Jews and the Black Plague, see Seraphine Guerchberg, "The Controversy Over the Alleged Sowers of the Black Death in the Contemporary Treatises on Plague," in *Change in Medieval Society*, ed. Sylvia L. Thrupp (New York, 1964), pp. 208-224.
46. *Bava Kamma* 8:1; B.T. *Bava Kamma* 85a.
47. *Ta'anit* 21b.
48. Rabbi Eleazar Fleckeles, *Teshuvah Meahavah* (Prague, 1808) III, on *Yoreh De'ah* 336.
49. S.A. *Yoreh De'ah* 249:16; 255:2.
50. See Baron, *The Jewish Community*, 2:115, 329.
51. 2 *Kings* 15:5; 2 *Chronicles* 26:21; *Bava Metzia* 83b.
52. See "Hospitals," *Encyclopedia Judaica* 8:1033-1040; David Rosner, *A Once Charitable Enterprise: Hospitals and Health Care in Brooklyn and New York, 1885-1915* (New York: 1982).
53. *Nedarim* 40a; see also M.T. *Laws of Mourning* 14:4.
54. *Shabbat* 127a.
55. *Sotah* 14a. Visiting the sick is called "a religious precept" in S.A. *Yoreh De'ah* 335:1.

56. S.A. *Yoreh De'ah* 335:2.
57. Baron, *Jewish Community*, 1:362 ff, 2:327 ff.
58. S.A. *Yoreh De'ah* 151:12 and 335:9.
59. *Ibid.* 335.
60. *Berakhot* 60a.
61. *Bava Batra* 116.
62. *Yoma* 8:5.
63. *Ta'ame Ha Minhagim* II, 41a, cited in Trachtenberg, *Jewish Magic*, p. 196. See also *Shabbat* 67a; Sherira Gaon, *Takhkemoni* (Bern:1910), vol. 1, p. 71.
64. See also Trachtenberg, *Jewish Magic*, pp. 196-197 and n. 7 on p. 304.
65. *Shabbat* 40a; *Gittin* 70b.
66. *Avodah Zarah* 11a; P.T. *Avodah Zarah* 2:2, 40d; *Pesahim* 113a.
67. *Berakhot* 40a, 44b, 57b; *Bava Batra* 58b.
68. *Ketubbot* 110b. A compendium of rabbinic cures can be found in *Gittin* 68b-70b and in Cohen, *Everyman's Talmud*, pp. 250-259.
69. *Tosafot*, *Mo'ed Katan* 11a; Jacob ben Moses Mollin, *Yalkutai Maharil* (Segal), cited in Fred Rosner, *Medicine in the Bible and the Talmud* (New York, 1977), p. 21. See also Solomon Luria, *Yam Shel Shlomo*, "Kol Basar," Section 12; Caro, *Kesef Mishneh* commentary to M.T. *Laws of Ethics* 4:18; Gombiner, *Magen Avraham* commentary to S.A. *Orah Hayyim* 173.
70. Trachtenberg, *Jewish Magic*, p. 203.
71. *Shabbat* 108b, which quotes Samuel; *Bava Kamma* 60b; *Ketubbot* 77a; *Tosefta Bava Batra* 1; *Avodah Zarah* 27b; *Sanhedrin* 9a.
72. *Berakhot* 10b; *Shevuot* 15b; *Sanhedrin* 10:1; B.T. *Sanhedrin* 101a.
73. *Shabbat* 67a; *Gittin* 69a.
74. Israel Isserlein, *Pesakim Uketavim* (Furth, 1778) 96; Solomon Luria, *Responsa* (Furth, 1768), no. 3.
75. *Sefer Gematriot*, a fourteenth-century German-Jewish work that lists such cures, is translated in Trachtenberg, *Jewish Magic*, pp. 109-111. *Sefer Raziel*, compiled in the thirteenth century but containing much Geonic material, has directions for the use of the names of God; see *ibid.*, p. 97.
76. Judah he-Hasid, *Sefer Hasidim* (Bologna, 1538), par. 1153.
77. See Trachtenberg, *Jewish Magic*, pp. 200-201, and the references there.
78. *Ibid.*, pp. 137, 204-206, and *passim*.
79. *Shevuot* 15b; see also Trachtenberg, *Jewish Magic*, pp. 107-113, 198.
80. Trachtenberg, *Jewish Magic*, pp. 46-47, 110-113, 133, 144, 146-147, 194, 252, 259.
81. Julius Preuss, *Biblical and Talmudic Medicine*, Fred Rosner, trans. (New York, 1978), ch. 11. Fred Rosner, *Medicine in the Bible and the Talmud*, (New York, 1977), p. 32, classifies King Saul as suffering from "a paranoid psychopathia." See M. Gorlin, "Mental Illness in Biblical Literature," *Proceedings of the Association of Orthodox Jewish Scientists*, 1 (1970): 43-62.
82. *Hagigah* 3b-4a; see also *Tosefta*, *Terumot* 1:3; B.T. *Shabbat* 105b; *Sanhedrin* 65b; *Niddah* 17a.
83. M.T. *Laws of Testimony* 9:9-11, and see the commentary of the *Kesef Mishneh* there.
84. Moshe Halevi Spero, *Judaism and Psychology: Halakhic Perspectives* (New York, 1980), p. 175; see pp. 174-178 generally.

85. *Hagigah* 1:1; *Bava Kamma* 8:4; *Gittin* 23a; S.A. *Hoshen Mishpat* 188:2.
86. *Shabbat* 128b.
87. *The Writings of Nahmanides*, trans. C. Chavel, 2 volumes, (New York, 1968), 2:43.
88. On all of these, cf. Spero, *Judaism and Psychology*, chs. 3, 9, 11, and 12.
89. M.T. *Laws of Ethics*, chs. 1-3.
90. Translated into English by C. Chavel under the title *Encyclopedia of Torah Thoughts* (New York, 1980).
91. *Tosefta*, *Terumot* 1:3; see also B.T. *Rosh Hashanah* 28a; *Yevamot* 31a, 113b; *Ketubbot* 20a.
92. *Ketubbot* 5:6.
93. *Ibid.* 5:7.
94. *Kiddushin* 29b-30a; *Midrash Psalms on Psalm* 59:2; *Zohar Hadash* 4.50b; *Megillah* 27a. See 1 *Corinthians* 7:25-40.
95. Maimonides, *Mishnah Commentary*, *Sanhedrin* 7:4; M.T. *Laws of Ethics* 4:19.
96. *Zohar*, "Vay'hi," 219b; "Bereshit," 19b, 54b; "Emor," 90a. See David Feldman, *Marital Relations, Birth Control, and Abortion in Jewish Law* (New York, 1968), p. 120 and Part 3 generally on this topic.
97. *Shabbat* 110a.
98. M.T. *Laws of the Torah Scroll* 10:8; S.A. *Yoreh De'ah* 282:9.
99. Trachtenberg, *Jewish Magic*, pp. 33-34, 137, 184-190, and 295, note 3.
100. *Ibid.*, pp. 184-190. For the Talmudic passages cited, see *Ketubbot* 48a; *Nedarim* 20a; *Shevuot* 18b. See also Feldman, *Marital Relations*, pp. 155-163.
101. The chief Talmudic sources on contraception are *Yevamot* 12b and 65b. For a thorough discussion of this, see Feldman, *Marital Relations*, Chs. 9-13.
102. *Ibid.*, pp. 224-225.
103. M.T. *Laws of Forbidden Intercourse* 16:2,6; S.A. *Even Haezer* 5:2; Bleich, *Judaism and Healing*, p. 65; David M. Feldman and Fred Rosner, eds., *Compendium on Medical Ethics* (New York, 1984), pp. 46-47; Solomon B. Freehof, "Sterilizing Husband," in *Reform Responsa* (Cincinnati, 1960), pp. 206-208.
104. See Goldman, *Judaism Confronts*, ch. 12, for a good summary of the positions. See also Reform Rabbi Solomon B. Freehof, "Judaism and Homosexuality: A Responsum," *C.C.A.R. Journal* 20:3 (Summer 1973): 31-33; Sanford Ragins, "An Echo of the Pleas of Our Fathers," *ibid.*, pp. 41-47; and Conservative Rabbi Herschel J. Matt, "A Jewish Approach to Homosexuality," *Judaism* 27 (1978): 13-24.
105. *Wener v. Wener* 59 Misc. 2d 959, 301 N.Y. Supp. 2d 237 (Sup.Ct. 1969); and see appeal, 35 App. Div. 2d 50, 312 N.Y. Supp. 2d 815 (2d Dept. 1970).
106. *Ohalot* 7:6.
107. Mizrahi, *Responsa Pri Ha-aretz* (Jerusalem, 1899), vol. 3, *Yoreh De'ah*, no. 2. See Feldman, *Marital Relations*, pp. 284-294 and chs. 14-15 generally for an analysis of the historical sources on abortion. See also Alex J. Goldman, *Judaism Confronts*, ch. 3, for an overview of contemporary opinions within the Jewish community.

108. This is the figure cited by Dr. Haim Sadan, Advisor to Health Minister, Eliezer Shostak, in 1982; see *Jerusalem Post Magazine*, November 12, 1982, p. 8. Rabbi Jakobovits puts the number at one million; see Jakobovits, *Jewish Medical Ethics* (1975 edition), pp. 278-279.
109. *Yoma* 85a; S.A. *Orah Hayyim* 330:5. See Bleich, *Judaism and Healing*, pp. 148-153, for the various opinions on the relative weight given to the two criteria and on how long after death one must wait.
110. See Goldman, *Judaism Confronts*, ch. 13.
111. *Ibid.*, ch. 6; Jakobovits, *Jewish Medical Ethics*, pp. 132-152, 278-283.
112. *Ketubbot* 104a; *Avodah Zarah* 18a; Rabbi Judah the Pious, *Sefer Hasidim*, nos. 723, 234.
113. S.A. *Yoreh De'ah* 339:1.
114. *Bet Ya'akov* no. 59; *Gilyon MaHaRSHa* on *Yoreh De'ah* 339:1; *Iggrot Moshe*, *Yoreh De'ah*, 2, no. 174.
115. See Goldman, *Judaism Confronts*, ch.11; Symposium on the California Natural Act (statements by Elliot Horowitz, Max A. Forse, Seymour Siegel, Moshe D. Tendler, and Hillel Cohn), *Sh'ma* 7 (1977): 93-102.
116. *Sanhedrin* 4:5.