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Accessibility
Abdel Rahman Ismail’s *Tibb al-Rukka* and the Nubian Medicine Bundle: Toward Material Histories of Contagion

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Bundle of power elements (Nubian medicine bundle), before 1899.

Peabody Museum of Archaeology & Ethnology, Harvard University, 99-12-50/53231.

Old Wives’ Medicine

To those researching the secret practices of their compatriots, we offer new information obtained after diligent investigation and careful scrutiny. It is a highly revered secret to those who hold it, and they are careful not to divulge it, as if it were the philosopher’s stone or the mysteries of alchemy. Yet, if these secrets were facts corroborated by scientific proof and rational evidence, imposters would not hide behind falsehoods and impress it on the feeble-minded who revere it as a heavenly thing and a divine science.¹

These are the first sentences of the author’s preface of an unusual and underexamined Arabic text—Abdel Rahman Ismail’s Tibb al-Rukka (Old Wives’ Medicine). Written by an Egyptian medical doctor who conducted archival and ethnographic research about popular healers in the Egyptian Delta in the late 19th century, the text is one of both medical and ethnographic import. Scholars have cited Tibb al-Rukka for over a century. For contemporaneous scholars, travel writers, and reformers, Tibb al-Rukka provided evidence of “superstitious” practices persisting outside of and in spite of the professionalization of Western allopathic medicine (or rational medicine) in Egypt at the turn of the 20th century.² Contemporary scholarship on healing and medicine in Egypt have referenced the text as evidence of the emergence and framing of colonial and nationalist discourses beginning in the late 19th century that rendered certain curative practices as “superstitious.”³ However, no in-depth analysis of the text has yet been undertaken by historians of medicine or historians of anthropology.⁴

Tibb al-Rukka is a two-volume study with a total of 78 chapters. Part I, published in 1892, consists of 112 pages detailing over 50 different treatments (wasfāt) performed by “old wives” and other non-licensed practitioners. Chapters included information on well-known occult scientific practices, such as bibliomancy, the preparation of amulets and talismans, and alchemy. They also included thick descriptions of more local and ecologically-specific medical treatments of common ailments plaguing the Egyptian population, such as syphilis, barrenness, sunstroke, and poisoning. Part II was published two years later, in 1894. Its 26 chapters continue the work from the first volume with topics ranging from cures for ulcers and tumors to rare esoteric rituals such as that of the shabshaba—a ceremonial cure for taming a husband’s wandering eye that included the practitioner beating her genitals with a slipper (shabshab).

Abdel Rahman Ismail published Tibb al-Rukka with two aims. First, as a professionally-trained medical doctor who received his degree from the prestigious Qasr al-Ainy Medical School, Ismail wrote the text as a warning against the so-called “charlatans,” magicians, and unlicensed healers who dabbled in superstitious, magico-medical healing practices throughout the Egyptian Delta. He pointed out women healers in particular, referring to
them asʾagāʾiz or “old wives” (sing. ʿagouza), and lambasted their unique arsenal of medical knowledge and practice, known as tibb al-rukka.5 Ismail indicates that the phrase tibb al-rukka was used to refer to a robust category of popular treatments for illnesses, including materia medica, charms, incantations, and, sometimes, the help of supernatural entities. Although Ismail felt that his debunking of “the science of the old wives” was both a part of his duty to his nation and the Egyptian medical profession, he also wrote Tibb al-Rukka as a scholarly text.6 From the opening sentence, it is clear that Ismail is aware that the text could prove useful for both Egyptian scholars and Western orientalists interested in Egyptology and Egyptian folklore. He used his proximity to local healers to gather ethnographic information about magico-medical objects and medical practices that would garner the interest of a global audience.

*Tibb al-Rukka*’s chapters are structured accessibly according to a basic formula. The author generally describes the ailment and the methods by which notable “old wives” diagnose and heal them. In chapters that deal with common physical and spiritual illnesses that Ismail believed were better suited for treatment in the hospital or clinic, he concludes each entry with his own taʿlil, or medical diagnosis and rational explanation. These explanations varied in form. In a few cases, Ismail acknowledged that the methods of the “old wives” were successful and explained why, although in most he warned against the dangers and deceptions of their prescriptions and suggested a biomedically sound alternative. For instance, in a chapter on skin diseases (ṣafra), like eczema or psoriasis, Ismail introduces his reader to Sheikh Farag Abu-Mahmud, a well-known healer in the province of El-Beheira.7 Patients from surrounding areas flocked to Abu-Mahmud to cure their skin diseases through a special method of cauterizing their feet and ordering them to stay away from water for 40 days. Ismail scoffed at this remedy, arguing that the sheikh does most of his business during winter when the visible effects of the disease would be concealed under the patient’s clothing—a trick that allowed him “a thousand excuses” when the disease reappeared.8

Other entries detail the use of magical objects to cure illnesses and contagious diseases. A chapter on “the fear cup” (ṭāsat al-tarba) describes a magic bowl, engraved with drawings of birds and incantations.9 (See the appendix for full entry.) The fear cup cured an array of illnesses, such as venereal disease and nervous conditions, brought on by terror (fazaʾ) and fear (halaʾ). To benefit from the cup’s magical properties, one only had to drink the dew that collected in the vessel after being left out overnight.10 Some ailments reviewed in *Tibb al-Rukka*, like possession by zar spirits or evil eye, were purely supernatural, albeit no less contagious than diseases of the earthly realm. Entries like these offer insights into new ontologies of disease and show that for many in 19th-century Egypt, the line between magic and medicine was not always clear.
Reception and Translation

Little is known about the reception of Abdel Rahman Ismail’s *Tibb al-Rukka* as a medical or anthropological text in Egypt, or in the Arabo-Islamic world more generally. What is clear, however, is that the first volume of the text quickly gained popularity as an important ethnographic text among orientalists and anthropologists in Europe and the United States. The text became so popular, in fact, that Ismail chose to capitalize on his growing audience by printing the second volume in the name of the Tenth Orientalist Congress, held in Geneva in September of 1894. In the second volume, Ismail accentuated the folkloric aspects of his research, including additional archival research from the Khedival Library in Cairo and expanding his references to popular writings in the burgeoning field of folklore studies.11

Ismail died in 1897 at the age of 30, only three years after publishing the second volume of *Tibb al-Rukka*. He would not live to see the rebirth of his work in 1934, when Scottish numismatist John Walker published an English translation of *Tibb al-Rukka*, entitled *Folk Medicine in Modern Egypt*. This version of the text is currently held in Harvard’s Widener Library. Walker’s English translation of the text was incredibly popular among English speaking audiences, especially among folklorists, anthropologists, and museum collectors. It is the version of the text that is most commonly cited by scholars today. John Walker took liberties with his translation to cater to this specialist audience. Most notably, he admits that he only translated what he felt were the “relevant parts” of the text and chose to omit sections of the text in which Ismail begrudgingly validates some of the old wives’ remedies of folk healers, especially with regard to their knowledge of popular *materia medica*.12 He also purposefully excludes information that Ismail provides for local readers to find particular magico-medical items in the city.13

Walker would have been well-versed in the linguistic and local contexts of *Tibb al-Rukka*. He was an ardent student of Arabic and Hebrew at the University of Glasgow from 1918–1922.14 He also lived in Egypt for six years—teaching at the St. Andrews Scottish School for Boys in Alexandria (1924–27) and working in the Egyptian Ministry of Education (1928–30).15 By the time he moved to London in 1931 to work as an Assistant Keeper in the Department of Coins and Medals at the British Museum, he had already published articles on Egyptian society and culture in scholarly venues such as *The Moslem World, Folk-lore*, and the *Encyclopedia of Islam*. Walker’s decision to translate *Tibb al-Rukka* rested on what he felt was its latent potential as a work of folkloric importance, as opposed to a work of medical importance. He argued that the text’s influence would only increase as the Egyptian government fought to eradicate the “dangerous remedies of the modern Nile Dweller” that would “soon be relegated to the archives of human error.”16 As such, Walker’s translation emphasized the folkloric and occult aspects of the text to convey to “English readers a conspectus of magic and diablerie still common amongst the illiterate villagers of Egypt.”17 Both Ismail and Walker might be surprised to learn that many of the
healing practices described in *Tibb al-Rukka* are still practiced in some form in Egypt today.¹⁸

**Material Histories of Medicine and Contagion**

The reception and translation of *Tibb al-Rukka* point to many important connections between the history of medicine and contagion and the histories of anthropology and collecting. Although the compilation of *Tibb al-Rukka* can be seen as an act of “collecting” folkloric knowledge in and of itself, some of the remedies described in the text were acquired in the form of material specimens by Egyptian, European, and American anthropologists interested in the occult and folk medicine in the late 19th and early 20th centuries. The material archives of popular medicine are scattered across the holdings of ethnographic, natural history, and art historical museums around the globe. One of the largest and most accessible collections of items pertaining to *‘ilm al-rukka* is British anthropologist Winifred Blackman’s collection of modern Egyptian magico-medical objects.¹⁹ Blackman acquired the collection, containing hundreds of amuletic specimens, for the Wellcome Historical Medical Museum in London between 1927 and 1933.²⁰ The collection is currently split between the Pitt-Rivers Museum in Oxford, and the Science Museum and British Museum in London.

Reading these material archives alongside written archival materials like Ismail’s thick ethnographic descriptions in *Tibb al-Rukka*, the contemporary reader can begin to piece together a more robust history of medicine and contagion in Egypt from the perspective of popular healers and their clients. They also provide a window into histories of medicine that do not center on professionally trained doctors or the hospital/clinic as the primary site of healing and care. While the material archives of medicine hold much promise for telling new kinds of histories, this archive can come with its own obstacles and challenges. Inconsistencies in labelling and damage occurring in museum storage spaces can also teach scholars about archival silences, dead ends, and unexpected revelations.

One such curious case, that of [Object Number: 99-12-50/53231](https://harvardlibrarybulletin.org/abdel-rahman-ismails-tibb-al-rukka-and-nubian-medicine-bundle), or the Nubian Medicine Bundle, can be found in the Harvard Peabody Museum’s own collections. Information about the provenance and use of the item in the museum’s accession documents is sparse. The Nubian medicine bundle is a part of a collection of items that the Peabody acquired from the Boston Museum, established by Moses Kimball in 1841. After the Boston Museum closed due to a fire in 1903, Moses Kimball’s heirs, David P. Kimball, Augusta L. Horton, and L. Cushing Kimball “offered” some of the museum’s collections to the Peabody Museum.²¹ This resulted in the Peabody’s acquisition of a large collection of ethnological specimens including objects from the Lewis and Clark expedition and Tapa cloth figures from Easter Island previously held by the Boston Museum.²²
Moses was a well-known American showman and politician with close ties to trickster and impresario P.T. Barnum, founder of the Barnum and Bailey Circus. Kimball and Barnum frequently traded objects from their collections and purchased specimens from liquidating museums, like the Peale Museum in Philadelphia. In fact, it was Kimball who leased the infamously fake Feejee Mermaid to Barnum in 1842, an act that kickstarted the latter’s career. The Boston Museum—which acted as a theater, natural history museum, zoo, and art museum—quickly garnered attention as one of the best in the United States. Kimball shared P.T. Barnum’s desire to attract paying customers whatever the cost, filling the lobby of his museum with curiosities from across the globe to entertain and educate a range of audiences.

It is unclear how the Boston Museum came to be in possession of the Nubian medicine bundle. The exact composition and use of the object are equally opaque, and likely further muddled by dubious labelling. The Peabody’s catalogue currently lists the object as a “bundle of power elements.” Yet, the bundle’s original and undated handwritten label points more towards Moses Kimball’s tactics of museological spectacle and entertainment than its local social and spiritual contexts. The label reads as follows: “African Amulet or Charm—contains a human heart with a knife thrust in it—several fingers of murdered infants-[lizard?] claws of birds etc. etc. This charm is very highly valued by the natives of...
Nubia.” This suspicious label, combined with Kimball’s penchant for the fantastical and the grotesque, calls into question the veracity of the object’s description and, possibly, the authenticity of the specimen as a whole.

While amulet pouches, charms, power objects, and medicine bundles were common magico-medical objects used by communities in Egypt, Sudan, and the Democratic Republic of Congo in the 19th century (and remain so to this day) it is highly unlikely that the bundle contains a human heart or the fingers of murdered infants. One can only conclude that this label was written to shock visitors at the Boston Museum, playing on racialized and colonial tropes about Sub-Saharan Africans and fetishistic magic. It is also likely that the object itself could be a hoax. This is not the first time that the authenticity of a specimen originating from the Boston Museum has been called into question. As mentioned above, the Feejee Mermaid is a notorious fake. The Peabody Museum even highlighted the “mermaid” in its 2017 exhibition, *All the World is Here: Harvard’s Peabody Museum and the Invention of American Anthropology*, to illustrate how early museums and collection practices were characterized not only by scientific natural history, but also by spectacle. Accession documents from the Peabody Museum, like visual anthropologist Karl G. Heider’s 1964 “Report on the Authenticity of Two Figurines,” indicate that the authenticity of other objects from the Boston Museum’s collections have also been investigated.

**Conclusion**

At first glance, one can read *Tibb al-Rukka* as an Egyptian doctor’s mission to eradicate local healers and their superstitious practices. However, a discerning eye would say that his work actually maps out an entire world of healing practitioners and medical knowledge that have yet to be fully explored by historians of medicine in Egypt. Similarly, the Nubian medicine bundle, presented in the Peabody’s catalogue as an artifact of African esotericism, is more a relic of the racialized and spectacular nature of early American museums. When taken together, *Tibb al-Rukka* and the Nubian medicine bundle remind us of the important connections between histories of medicine and contagion and histories of anthropology and collecting. In the case of *Tibb al-Rukka*, Abdel Rahman Ismail donned the dual hats of the doctor and the historian-ethnographer to expose the lies and falsehoods of Egypt’s “old wives.” In a strange twist, the doctor’s warnings against these practitioners actually sealed them and their knowledge into the annals of history. John Walker’s translation of Ismail’s obscure text catapulted it to a new level of exposure to and importance for English-speaking anthropologists, historians, and museum professionals. This was especially due to his choice to play up the folkloric and fantastical aspects of the text in his translation. The case of the Nubian medicine bundle shows how the spectacular and the scientific went hand-in-hand in early museums. It demonstrates that, at times, the spectacular could overtake the scientific. *Tibb al-Rukka* and the curious case of the Nubian medicine bundle are both excellent examples of the promise, possibilities, and pitfalls of writing histories of medicine from marginalized geographic and material perspectives.
Appendix: Transliteration and Translation

**Transliteration:**

Ṭāsat al-Tarba

\[\text{yaza 'amūn 'an-nahū ida ṭara'a 'alā al-insān mā yalqā fī qalbihi al-faza' wa al-hala' fālūbudda 'an yuṣūb immā bi-dā’i-l-zuharī wa lāysa min ḥajatīn ilā ighār i̇f kā ḫā'ulā' il-'aqwām i̇d ʿashbaḥa min al-jāla al-wādhīt laddā al-'umūm 'anna al-zuhāri maraḍ mu’dīn lá yatawwallidū 'abādan min al-ʾawḥāmi 'aw bil-yaraqān wa ṣuṭlīqūnūhū ḫīman ʾil-arād al-ʾasabiya wa 'ilāq kīltā al-ʾisābatayni hūwwa 'an yūdā mā'ūn fī tāṣat al-tarba wa ḥiyyā 'inā' min al-nūḥās mārsūm 'alāyah ʿuwwar tūyūr 'aw maktūb 'alāyah kitābah ḥavvīr wa ba’d ‘an yu’raḍ lil-nadā laylayn yashrabahu al-ʾalīl fī yashfī wa ḥamūjībūt al-ʾajab 'annahū yaqīd hūwwālā ḥāffat al-ṭāṣa 'arba’īn qī’atān min al-nūḥās mu’allaqa wa ṣuṭlīqūsha kā-l-sābiqa fī-ʾidhā fūqiyāt wāḥidātun min ḥadhihi al-qī’ta fūqidat ma’hā al-māzīya ṣallātīn kānit tuntāṣar min tanāwul al-mā’ al-mawdū’ fī al-tāṣa wa qad sa’altu kathīrin min al-nās ‘an ḥādhīhi al-khurāfāti fā-ajābūnī ‘ anā wā jiddūnā sālāfīnī ‘alā ḥādhī al-hāl wa ‘anā fī tariqīhīm li-musīqūn»

**Translation:**

The Fear Cup

Some claim that if a person is overcome/overtaken in their heart with terror (faza’) and fear (hala’), they will surely be stricken with venereal disease—there is no need to expose the lies (ifk) of these people as it is clear to everyone that venereal disease is a contagious disease never caused by delusions [of the imagination]—or yarakān,\(^30\) the name they give to nervous diseases. The treatment for both of these afflictions is to put water into the “fear cup,” which is a brass vessel engraved with illustrations of birds or inscribed with obscure [amuletic] writings. After the vessel is exposed to the night dew, the patient drinks it and is healed. One curious feature of this marvel is that there are 40 pieces of brass hanging around the bowl’s edge and engraved as mentioned above. If one of these pieces is lost, then so are the expected benefits for the one who drinks the water in the cup. I asked many
people about this superstition, and they replied: This is how our ancestors did it and we do it the same [way].

Diagnosis: Today, it is proven that venereal disease is a contagious disease that does not occur spontaneously, but through heredity or as the result of “secret contact.”

So, this claim is invalid/false. However, these reactions are the result of fear and maybe cause other perilous nervous illnesses, especially in the young, as a result of frightening children with the dark and [with tales of] jinn, the boogey man (abu rijl maslukha), and other such superstitions that ignorant mothers tell their children to scare them. And so, the [true] cure to these resultant illnesses is to cure these mothers of their ignorance of proper child-rearing and (tarbiya) and edification (tahdhib), a thing which is still considered taboo in the East.

Notes


3. As will be discussed below, Tibb al-Rukka became more commonly cited after it was translated into English in 1934. Notable texts that quote the English translation are as follows: Timothy Mitchell, Colonising Egypt (Berkeley: University of California Press, 1988); LaVerne Kuhnke, Lives at Risk: Public Health in Nineteenth-Century Egypt (Berkeley: University of California Press, 1990); Hibba Abugideiri, Gender and the Making of Modern Medicine in Colonial Egypt (Farnham, Surrey; Burlington, VT: Ashgate, 2010); Liat Kozma, Policing Egyptian Women: Sex, Law, and Medicine in Khedival Egypt (Syracuse: Syracuse University Press, 2011).

4. This is with the exception of the author’s recent doctoral dissertation, Taylor M. Moore, “Superstitious Women: Race, Magic, and Medicine in Egypt (1875–1950)” (PhD diss., Rutgers University, 2020).

5. Ismail, Kitab Tibb al-Rukka, 5.


7. Ismail, Kitab Tibb al-Rukka, 92–93

8. Ismail, Kitab Tibb al-Rukka, 92.


10. Ismail, Kitab Tibb al-Rukka, 82.


13. Walker, Folk Medicine in Modern Egypt, 7–8.


16. Walker, Folk Medicine in Modern Egypt, 7.

17. Walker, Folk Medicine in Modern Egypt, 6.

18. For more information on popular healing practices in contemporary Egypt, see Marcia C. Inhorn, Quest for Conception: Gender, Infertility and Egyptian Medical Traditions (Philadelphia: University of Pennsylvania Press, 1994); Hager El Hadidi, Zar: Spirit Possession, Music, and Healing Rituals in Egypt (The American


22 S. J. Guernsey, “Memo,” Harvard’s Peabody Museum of Archaeology and Ethnology (HPMEA) Accession File: 99-12/04. Other instances in the file say the objects were “gifted.”

23 HPMEA Accession File: 99-12/04


27 Stage actress Kate Ryan recounts her time working in the theater portion of the Boston Museum at the height of its popularity in her account, *Old Boston Museum Days* (Boston: Little, Brown, & Co., 1915).


30 Yarakan (from the Arabic root ʾ-r-q, denoting sleeplessness or restlessness) is also a term for the condition jaundice. In this case, however, it is used as a catch-all term for a host of nervous illnesses.

31 This is a euphemism for sex. The root *q-r-b* also has the connotation of sheathing a sword.