A Newly Discovered Drawing of a Neo-Assyrian Demon in BAM 202 Connected to Psychological and Neurological Disorders

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A Newly Discovered Drawing of a Neo-Assyrian Demon in *BAM* 202
Connected to Psychological and Neurological Disorders

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"The oldest and strongest emotion of mankind is fear, and the oldest and strongest kind of fear is fear of the unknown."
- H. P. Lovecraft, *Supernatural Horror in Literature* (1938)

Losing control of one’s faculties and motor functions are among the most frightening symptoms of any medical condition, not only among the patients themselves, but also among family members (Stol 1993: 146). And for healers to diagnose the cause and describe the physiology of these overwhelming symptoms has remained difficult until the rise of modern medicine (Gross 1992: 71ff.). Today we label many such afflictions as psychological and neurological disorders. In ancient Mesopotamia, however, symptoms related to abnormal behaviour and involuntary movements were considered to have been inflicted upon a person by supernatural forces, such as gods or demons. In the massive corpus of magico-medical cuneiform tablets, a fair amount of diagnoses with symptom descriptions, prescriptions, rituals and incantations allows us to examine how healers described and cured such afflictions (e.g., Scurlock 2014: 196ff., 555ff.). Yet, the evidence that indicates how specific demons causing these ailments were visualized is remarkable fragmentary.

Particularly two groups of conditions we today would classify as psychological and neurological conditions have received attention within recent years: the ailments *demmakurrā* “derangement” and *tēmu šanī* “altering mind” causing insanity, as well as an illness called *benmu*, often translated as “epilepsy” (Chalendar 2013; Stol 2009; Avalos 2007; Kinnier Wilson 2007; Stol 1993; Kinnier Wilson 1965). All these afflictions were described, diagnosed, and treated in an illustrious text published as *BAM* 202, most recently edited and analysed by Vérene Chalendar (2013). The tablet was originally excavated in the N4 library of the *Haus des Beschworungspriesters*, originating in 7th century BCE Assur (Maul 2010; see also May 2018; Pedersen 1986: 41ff.; Hunger 1968: 19-20). The manuscript was later published by Franz Köcher (1964: XI and pl. 4-5) in the third volume of *Die babylonisch-assyrische Medizin* (*BAM*) as no. 202. Besides prescriptions for treating the mental alterations *demmakurrā* and *tēmu šanī*, as well as *benmu*-epilepsy, the tablet contains a depiction of a demon on the reverse, which has not been noticed in previous publications. Illustrations of such demonic forces on cuneiform tablets with magicoomedical treatments are rare, and only a handful is known from the first millennium BCE.1

This article presents a new line drawing, edition, and commentary of *BAM* 202 in order to publish and discuss the drawing on this manuscript for the first time. In the first section I

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1 Finkel 2011: 338, 38-42 Figs. 4-6; Zilberg and Horowitz 2016: 175-177, 183; Reiner 1987: 30; Nougayrol 1972: 141.
examine the connection between the illnesses demmakurrā, tēmu šanū, and bennu-epilepsy by considering the diagnoses and symptom descriptions in the prescriptions of BAM 202. This analysis serves as a backdrop for describing and discussing which demon is depicted on BAM 202 in Section 2 and 3, and who copied the tablet in Section 4. As indicated by the title and opening quote, I have chosen to address medical as well as emotional aspects of the symptoms described in BAM 202 in order to examine the relationship between the diagnoses and the depicted demon. A conclusion is offered in Section 5. The new line drawing, edition, commentary and pictures of BAM 202 are supplied as an appendix in Section 6.

1. The Illnesses Diagnosed in BAM 202

Two groups of ailments are diagnosed and treated in BAM 202: mental changes (obv. 1-3)\(^2\) and various symptoms grouped under the heading bennu-epilepsy (rev. 5'-7').\(^3\) The first diagnosis on BAM 202 reads as follows:

“If dem\[makurr\]ā (derangement) has seized a man and his mind alters time and again, his speech is incoherent, he gets a depression time and again (lit.: his mind continually falls on him), and he talks a lot, (in order) to restore his mind to him ...”.

The passage has been treated in depth by Stol (2009), who distinguished two primary psychological changes, namely demmakurrā and tēmu šanū (see also Chalendar 2013: 15-29; Steinert 2012: 385ff.; Geller 2010: 181 n. 40; Scurlock and Andersen 2005: 374ff., 383; Kinnier Wilson 1965: 292). The term demmakurrā is a loan word from the scholarly Sumerogram DĪM.MA.KŪR.RA⁴ which is translated into Akkadian as tēmu “reason, intelligence” and nakāru “to alter, led astray, become hostile, become estranged, become deranged” (Stol 2009: 1; see Chalendar 2013: 14; CAD N/1: 159ff.; AHw: 718ff.). The term tēmu šanū relates to the illness named “alteration of the mind” (šinū tēmi).\(^5\) The verb šanū means “to become different, strange”, and with tēmu it has the connotations “to change one’s mind, become deranged, become insane” (CAD S/1: 403ff.; AHw: 1166ff.). Stol (2009: 2, 6, 12) interpreted demmakurrā as a mild derangement, whereas he saw tēmu šanū as insanity, but other researchers translate the terms carrying evenly weight (Scurlock and Andersen 2005: 375-76), or identifies demmakurrā as more severe than tēmu šanū.\(^6\) Regardless, both ailments were associated with epilepsy.\(^7\)

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\(^4\) The writing KA.HL.KŪR.RA, found in BAM 202, had the phonetic value dimma according to various lexical lists (Stol 2009: 1; see Chalendar 2013: 14ff.).

\(^5\) Stol 2009: 6-8; see also Farber 1977: 74-95; CAD .TestTools: 95-96. It is important to note that šinū tēmi was referred to as a “sēdu-demon” deputized by Marduk/Gula in šammaš šickinšu, see Stadhouders 2011: 10-11, 35 and ibid. 2012: 4, 16.

\(^6\) Chalendar (2013: 21-22) suggests that the verb nakāru carries more severe connotations than šanū, which indicates that demmakurrā may have been worse than tēmu šanū. For other cases of illness described from mild to severe forms, see, e.g., Arboll 2018a; Stol 1993: 56. Furthermore, it is possible that demmakurrā was the diagnosis and name of the illness, whereas tēmu šanū and the remaining description were symptoms (Chalendar 2013: 22-23). Several lexical lists equate the two types of mental changes discussed here (ibid.: 15-19; Abusch and Schwemer 2011: 255). Some texts list demmakurrā as an illness together with, e.g., bennu-epilepsy (Chalendar 2013: 48-50; Steinert 2012: 393 n. 38; Farber 1977: 56). For šabātu describing causes of illness, see Salin 2015: 325ff.; Heeßel 2000: 55. It is unclear if tēmu šanū could be personified as a demon (see Stol 2009: 6). In some texts, it “seizes” the patient (e.g., Geller 2010: 34).
To have incoherent speech is described with the words amātu “spoken word, utterance” and nakāru in the Gtn-stem with the meaning “to talk senselessly” (CAD N1: 163; see Chalendar 2013: 23-24; AHw: 719). The loss of meaningful words, possibly involving some aggression, was therefore related to a loss of proper use of ones faculties. When a patient’s “mind continually falls on him” (fēmšu imtanaqqussu), it may insinuate “depression” (Steinert 2012: 391; Stol 2009: 6, 11 and n. 69), although the interpretation remains open for debate. The verb maqātu “to fall (upon), collapse” could also be used referring to illnesses or demons in the sense “to attack, afflict” (see recently Salin 2015: 330ff.). I use the translation “depression” in lack of a better alternative, but it is questionable if the phrase in BAM 202 discussed above describes the modern mental disorder (see n. 9).

Talking a lot appears to be a significant symptom for distinguishing the malady from other mental changes, during which the patient is silent or not able to use his mouth. The Sumerogram DU11,DU11 is commonly read dabābu “to speak (aloud), talk” (Borger 2010: 256), but can also be read “complain, protest”. The symptom is mentioned in both diagnoses on BAM 202. Other texts indicate that “madness” (ṣēḫu, cf. CAD Š2: 266, “possession”; AHw: 1209) and the term “ecstatic” (mūḫū, CAD M1: 90f.; AHw: 582), designating a person overcome by a divine being, imply lunacy. Madness was also related to bennu-epilepsy (Stol 1993: 49-50).

By finally “restoring a patient’s mind”, the cure intends to “return” (D tāru) a patient’s mind to him. This may imply that the mind had been taken away (Stol 2009: 11; cf. Herrera

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7 Chalendar 2013: 15 and n. 36, 16; Stol 2009: 11-12; Stol 1993: 25 and n. 19, 95.
8 Stol 2009: 2, 5-6, 11. A similar symptom is observed in a text possibly describing a state of anxiety (Ritter and Kinner Wilson 1980: 25-26).
9 Cf. Chalendar 2013: 25-26 with further references; Scurlock and Andersen 2005: 375 no. 16.43, 383 no. 16.87. The word depression is, due to its modern connotations, difficult to use in the context here. Furthermore, it is troublesome to correlate a symptom connected to depression with the patient talking a lot. Comparably, translations of the related term migit ēmī appear as “dejection, desperation” (CAD T: 96), “Depression, Niedergeschlagenheit” (Steinert 2012: 91 n. 29), “loss of reason” (Abusch and Schwemer 2011: 284), “Verzweiflung” (AHw: 657), and “affective loss” (Kinner Wilson 1965: 292). Concerning this term, Chalendar (2013: 26) suggests “démence, plus ou moins synonyme, à l’origine d’aléintation mentale”. Note that a medical commentary equates muqqut with ṣapīl, “it is collapsed means it is low” (Wee 2012: 635, 640; see also Scurlock 2014: 120, 128 l. 19). Although the text commented on does not concern mental alterations, the equation could tentatively link the expression in BAM 202 discussed here with the phrase ḫabbašu ṣaḥīl “his heart is depressed” (Abusch and Schwemer 2011: 64, 144, 329, 343). Antašubba-epilepsy also appears to be connected to sorrow on the basis of the outcry aš ḫaš (Stol 1993: 70), although similar outcries are difficult to interpret (cf. HeeBel 2000: 44-45; Kinner Wilson and Reynolds 1990: 193, 197). Note that depression can be an accompanying disorder for people suffering from epilepsy (Kanner 2006). Medically, depression does not show itself during epileptic seizures. If the diagnoses on BAM 202 are connected, they may refer to a long-term affliction instead of two separate episodes of illness. As discussed below, the focus in BAM 202 on the patient’s bed could indicate that the healer observed symptoms at the patient’s bedside. However, the clinical pictures painted in the two diagnoses on BAM 202 are not easy to correlate, as the symptoms observed by a healer would then have to occur within a relatively short time span, although the first diagnosis possibly includes a statement connected to a long-term observation (recurrent depression). The question is therefore, if it is possible to translate fēmšu imtanaqqussu as “repeated moments of desperation/loss of reason” occurring within a limited time span. If the two diagnostic statements in BAM 202 are connected to two related medical occurrences within a limited time span, it can cautiously be suggested that the first diagnosis describes a confusional state occurring after an epileptic seizure, which is then described in the following diagnosis.

11 It is difficult to see if the writing hides a Gtn-stem (see CAD D: 4). The D-stem dubbubu can be read “to rave (said of a madman)”, and the verb is equated in lexical texts with terms for insanity (Chalendar 2013: 15; CAD D: 13). A translation such as “to complain” in the context of BAM 202 may be considered (see also Chalendar 2013: 26-27).
12 Although the majority of examples listed in CAD are Old Babylonian, see CAD D: 10-11.
13 See Stol 2009; 9; Stol 1993: 49-53. Possibly, an ecstatic state was related to being rabid (see Wu 2001: 38).
1984: 38, 41). Although it remains uncertain to what extent the two diagnostic statements in *BAM* 202 are related to a single (hypothetical) medical case, it cannot be ignored that the *bennu*-epilepsy in the second diagnosis, acting as a *sêdu*-demon of Sîn, could be responsible for removing a patient’s *fêmu*.14

Turning to the second diagnosis on *BAM* 202, it reads as follows:

“If a man continually *j*[er]ks in his bed, he cries like a goat, he groans, he shudders (lit.: he is afraid), (and) he talks a lot: ‘Hand of *bennu*-epilepsy’, a [*sê]du*-demon deputized by Sîn ...’.

In this entry the patient was confined to his bed, in which he experienced abnormal movements (*galātu*, ḤULUḤ) in rev. 5'.15 The G-stem of *galātu* is translated “to twitch, quiver, be/become restless or nervous, be/become frightened” (*CAD* G: 11ff.; *AHw*: 274) or simply “to jerk” (Scurlock and Andersen 2005: 315), and the Gm-stem can be translated as “repeated or continuous shivering in bed” (Stol 1993: 38).16 The word *galātu* is commonly used to describe symptoms of epilepsy (Stol 1993: 95, 97-98).17 Such shivering was habitually connected to “terrors at night”, such as the evil *alû*-demon and “fit” (*ḥayyatu*),18 which could occur in bed.19

The text further specifies in rev. 5’ that the patient “cries like a goat” (*kîma enzi īṣassî*), clearly indicating an abnormal behaviour.20 Goats were connected to epilepsy, and invoking

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14 Note that an affected *fêmu* can also occur during some cases of severe illness or imbalance, see *SAA* 10 no. 196 rev. 16-18; *CAD* T: 95b.

15 Descriptions stating that the patient is in bed have been interpreted differently, e.g., indicating that the patient is lying down (Stol 1993: 6, 72) or that the event occurs at night (Schuster-Brandis 2008: 199; see Chalendar 2013: 37-38). Note that the verbs *galātu* (rev. 4’) and *parādū* (rev. 6’) are generally associated with night time and the bed (e.g., Scurlock 2014: 644, 652, 199; Schuster-Brandis 2008: 75, 202; Stol 1993: 71-72). Shaking with fear in the bedroom was also described in relation to a state of anxiety, which could cause sleepless nights (Ritter and Kinnier Wilson 1980: 25-26). Chalendar (2013: 42) suggests that in some cases, it is possible that the state of horror could be important for diagnosing an illness. Fear seems closely associated with sleep and dreams (see Fales 2010: 17; Butler 1998: 48ff.). The muscles jerks experienced directly before drifting off to sleep (hypnagogic jerks) may be an indicator as to why sleep, dreams, muscle problems, and loss of consciousness were connected. Through the combination of physical symptoms, fear, and a connection to the bedroom, the verb *galātu* can also mean “to have a premature emission” (*CAD* G: 12).


17 It is also used to describe, e.g., abnormal movement of the eyes (Fincke 2000: 108-109; Stol 1993: 93-94) and a symptom of the *sâššatu*-illness (Arboll 2018a: 266).

18 The term *ḥayyatu* is translated differently as, e.g., “confusional state” (Scurlock 2006: 357), “attack” (Wee 2012: 349 n. 26, 605, 609, 611, 613, 625, 629), “fit” (Stol 1993: 42-44), “terror” (Busch and Schwemer 2011: 405), “emanation” (Busch 2002: 129), or “Spißer” (Farber 1977: 146-49, 152-55, 190-91; see also Scurlock and Andersen 2005: 315-16, 318; *CAD H*: 1; *AHw*: 309). Medical commentaries also identify the term as “jitters” (*gîlîtu*) or “fear” (*pûluḫtu*) (Wee 2012: 604-605, 611). It could act as a demon or a symptom, and it was connected to Antaššu-ba-epilepsy (Stol 1993: 7-8, 42-46 and n. 196-201).

19 See Stol 1993: 41ff.; in *BAM* 376 col. ii 26-30, prescriptions against *ḥayyatu* and *alû* *lemµu* are followed by the diagnosis: “If a man continuously jerks (Gtn *galātu*) in his bed”. Both the *alû*-demon and Antaššu-ba-epilepsy were treated together in *SAA* 10 no. 238 (see Stol 1993: 41 n. 173).

20 *CAD* S/2: 147ff. lists *sâšu* as “to shout, make a loud noise, utter a cry”, and in the context of animals the translation “to cry (out)” is used (ibid.: 149-50; *AHw*: 1195ff.). It is possible that alterations of the voice could result from frightening dreams or similar (Geller 2010: 148; concerning this commentary, see also Wee 2012: 391, 605). For this passage, see Chalendar 2013: 40.
this simile emphasizes the diagnosis (see Stol 1993: 106-7 and n. 67, 149-50).21 Considering the incoherent speech mentioned in the first diagnosis, a lack of meaningful utterances must have been an overlapping diagnostic trait (see Scurlock and Andersen 2005: 374-75).

In the beginning of rev. 6’, the symptom ramāmu can be translated “to rumble, roar, howl, bellow, groan” (CAD R: 116-17; AHW: 949f.; Stol 2009: 12) or “to drone” (e.g., Scurlock and Andersen 2005: 83 no. 3.268, 375 no. 16.41). The verb is regularly used in connection to animals or similes involving animals (CAD R: 116), and this may have been a conscious description due to the animal simile directly before in BAM 202 rev. 5’. In relation to patients, the verb seems to indicate abnormal behaviour as well as an agitated emotional state, such as anger (ibid.: 117). The following description of the patient “shuddering” originates in the verb parādu meaning: “to be fearful, disturbed, restless, upset” (CAD P: 141-44; AHW: 827; see n. 16). The verb seems to reflect the physical shaking when being afraid or suffering from conditions similar to Posttraumatic Stress Disorder,22 and it was used to describe epilepsy (e.g., Scurlock and Andersen 2005: 294ff., 315; Stol 1993: 66, 71-72, 75). Similarly to the first diagnosis in BAM 202, the second diagnosis also describes the patient talking a lot (magal idabbub).

In rev. 7’, BAM 202 identifies the illness in the second diagnosis as “Hand of bennu-epilepsy”.23 The term bennu was used as a general word for epilepsy in Mesopotamia, related to most diagnostic statements describing this illness (Köcher 1978: 35; Stol 1993: 7; Avalos 2007: 131-32; cf. Scurlock and Andersen 2005: 83f., 696 n. 261). Yet, bennu differed from what we understand as “epilepsy” in modern medicine,24 and the term could be used to describe convulsions, such as (sudden) involuntary muscle movement, twitches, or jerks (Avalos 2007: 133-34; Scurlock and Andersen 2005: 83ff.; Stol 1993: 6; Kinnier Wilson 1967: 202).25 Although the modern neurological condition is not contagious, the bennu-illness was considered transmittable (Stol 1993: 119, 146).26 Bennu appears to be used both as a term referring to convulsive problems, as well as an overarching demonic influence.27 Among other common expressions related to epilepsy are Antašubba28 and migtu29 (see Stol 1993: 7-21; Avalos 2007: 131-32).

21 Various cries of other animals were also associated with epilepsy (Stol 1993: 150 and n. 13-14 with references).
22 For the symptoms of Posttraumatic Stress Disorder, see Mellman et al. 1995.
23 Concerning the writing SUB be-en-ni in BAM 202, see the commentary to rev. 7’. For diagnoses formulated as “Hand of a divinity”, see HeeBel 2007.
24 For a modern definition of “epilepsy”, see Avalos 2007: 132-33; Kwasman 2007: 160. I use “epilepsy” here to refer to symptoms, which in modern medicine may be defined by a broad range of diseases and disorders including non-epileptic convulsions and seizures (Avalos 2007: 134-35). Epilepsy was connected to mental changes in much of the ancient world (Stol 1993: 121ff.), although definitions seem to have differed (Avalos 2007: 133).
25 Such involuntary movements are called myoclonic jerks. This may explain the overlap between bennu and the šašatu-illness in lexical lists (Stol 1993: 7; cf. Scurlock and Andersen 2005: 67-68, 693 n. 195 with discussion).
26 Note that some infectious diseases, such as malaria, can produce chills, tremors and occasionally mental confusion, which could mirror the effects of epilepsy (see Warrell 2004: 748; see also Scurlock and Andersen 2005: 36-37, 696). In general, contagion in Mesopotamia was probably rooted in the idea that “some magical power inherent in the body, belongings and abode of a person who was under the wrath of a god could negatively affect anybody entering into this person’s intimate personal sphere” (Farber 2004: 124).
27 See Scurlock 2014: 145 l. 23; HeeBel 2000: 287 l. 4’, 291 l. 84’; Stol 1993: 5-7; Scurlock and Andersen 2005: 84. The association of bennu with (recurrent) fevers (bumtu) in lexical texts may indicate the shivering, spasm-like, nature of bennu (Stol 1993: 6 and n. 13, 7 and n. 22). As noted by Stol, “feverish shivering” can be an early sign of an epileptic seizure (ibid.: 38).
28 AN.TA.ŠUB.BA (“what has fallen from heaven”) appears to be a learned expression for epilepsy denoting a sudden attack, although it could also be recurrent (Stol 1993: 7-9, 25-26, 77, 132; Avalos 2007: 131, 134; see also Kinnier Wilson and Reynolds 2007: 88 and n. 54).
29 The term migtu seems regularly to designate seizures, and it may indicate an illness overcoming a patient suddenly (Stol 1993: 10-11; Scurlock and Andersen 2005: 216). Possibly, migtu refers to a visible malady (CAD
Several associated illnesses underline the motoric problems and potential for being bedridden. In the diagnostic-prognostic series Sa-gig, epileptic disorders occupy large parts of the fourth subseries (HeeBel 2000: 19), and such diagnoses also appear in the final tablet concerning illnesses of babies (Scurlock 2014: 258ff.; Volk 1999: 16-18; Cadelli 1997: 23-24). Especially infants may have been predisposed for showing muscle contractions, likely because of an immature nervous system (Kinnier Wilson 2007: 64). Commonplace among several of the epileptic disorders is that they displayed symptoms potentially disapproved of socially. These illnesses could be acquired in various places, e.g., in or near a gate, (cattle) pen, river, uncultivated plot, or a corner (Stol: 1993: 68 and n. 38, 97; Scurlock and Andersen 2005: 84 and n. 271).

The illness is further described in BAM 202 rev. 7’ as “a šēdu-demon deputized (šamû) by Sin”. The god Sin was the moon god, and epileptic disorders were connected to the moon (Stol 1993: 6, 130). The fact that the illness acts on behalf of Sin seems to indicate that the moon may not have been visible on the time of contracting the ailment (ibid.). It is possible that periodicity was occasionally a characteristic of bennu, similarly to the moon’s renewal (ibid.: 7, 132, 134).

The diagnostic-prognostic series Sa-gig provides a diagnosis explaining a case of bennu where the patient appears to observe the evil afflicting him: “[If miqitu falls upon him, and at the time it has fallen] upon him he says: ‘It is he!’ – the roving (šāīdu) bennu-epilepsy has seized him; he will be saved”. The entry implies that the evil is manifest and observable by the patient (see Section 3). Furthermore, rituals intended to protect the healer when approaching a patient also targeted Antašubba-epilepsy and related demons (e.g., KAR 31, see Maul 2018; Geller 2016: 38ff.).

M/2: 103ff.; Scurlock and Andersen 2005: 216, 718 n. 33; Stol 1993: 11-12). The word miqitu refers to “something that has fallen down” or “falling (spell)” (Stol 1993: 9-11; see Scurlock and Andersen 2005: 316-17, 717 n. 17).

Associated illnesses describing motoric disturbances include the maškādu-, sagallu-, and šašātatu-illness complex (Arbell 2018a; Stol 1993: 7, 13 and n. 81, 103 and n. 35-36).

E.g., miqitu, which may in some cases refer to spasms and indicate lameness (Stol 1993: 10-11 and n. 53).

In a tablet of Sa-gig (STT vol. 1 no. 89), possibly representing the pre-Esagil-kin-apli recension of the work, entries seem to have been grouped according to various types of witchcraft and epileptic disorders (Stol 1993: 91-98; HeeBel 2000: 105-11; Abusch and Schwemer 2011: 434-43; Wee 2012: 272, 279).

Stol 1993: 146; Volk 1999: 17-18; Scurlock and Andersen 2005: 316-17. Babies could be born with the “spawn of Sulpaea” or Lugul-urra, and women could give birth to the spawn itself, which foreshadowed the scattering or destruction of the household (Kinnier Wilson 2007: 63; Volk 1999: 18 and n. 108; Cadelli 1997: 15; Stol 1993: 14ff., 89; Leichty 1970: 38 l. 68).

Bennu is even said to “head straight for that man on the high street” in some manuscripts of Uduk-hul (Geller 2016: 100). Some demons simply occur in the street (ibid.: 90, 139, 146, 209, 213; Kinnier Wilson and Reynolds 2007: 93).

Note BM 40183+, in which bennu is written 4be-en-nu. Stol (1993: 6, 130) interpreted this as Sin being responsible for the ailment and the demon acting on his behalf. For bennu as a “deputized” (šāned) affliction, see also HeeBel 2000: 164 with further references.

The rays of the moon could cause various skin afflictions, such as garâbu or eqhu (“scales”, Stol 1993: 128-130; see also Scurlock and Andersen 2005: 231-32; Stol 1987-88), and it is possible that epilepsy and skin problems were considered internal and external manifestations of afflictions originating from the moon god Sin (Stol 1993: 147).

Sa-gig tablet 26 line 4’ in HeeBel 2000: 278, 287 “Sieh da! Ert!”; Stol 1993: 56-57 line 3; see also Scurlock 2014: 196 line 4’, cf. 200 “This is it”. Kinnier Wilson and Reynolds (1990: 194) suggests the translation “It is he (again)”, which they interpret as implying an aura. In some cases of the associated condition “Spawn of Sulpaea”, the patient responds to a wailing voice (Stol 1993: 72 and n. 54; see Butler 1998: 53 with further references to similar examples).

Antašubba was also blocked out in the apotropaic ritual šēp lemutti ina būt amēlī parāsu (Wiggermann 1992: 6-7).
The two diagnoses in *BAM 202* diagnose and describe specific symptoms of first insanity and secondly *benmu*-epilepsy. Although the first diagnosis does not elaborate upon time, place, or bodily movements, it is possible to infer from the context of the final treatment (obv. 17-rev. 4') that some of the proposed actions took place while the patient was in his bed. The symptoms pertaining to the second diagnosis also seem to be experienced, at least partly, by the patient in his bed. The two diagnostic statements and their treatments therefore overlap in terms of abnormal behaviour, and by focusing on the sickbed. Furthermore, the *benmu*-epilepsy is the only affliction identified as a demonic entity in *BAM 202* with certainty.

**2. Description of the Demon**

The drawing on *BAM 202* is located on the reverse of the tablet underneath the colophon in a fragmentary part of the manuscript. Originally, the colophon was believed to be two lines long (Chalendar 2013: 12), although the second line is written in a smaller script and away from the first line. In general, colophons from the N4 library are not written with individual lines in smaller script. Although greater space between the lines in colophons is common, the blank space in the colophon of *BAM 202* comprises at least three lines. The unused area combined with the final line in smaller script near the drawing at the end of the tablet, indicates that the copyist intended to separate the final line and image from the remaining colophon. It is therefore likely that the last line relates to this illustration. Unfortunately, the final line is very broken and difficult to read. The drawing of the demon without breaks is provided below in Fig. 1.

![Fig. 1: Drawing of the demon on BAM 202 upright](image)

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39 Insanity and epilepsy were illnesses bordering on one another (Stol 1993: 121).
40 Furthermore, it is plausible that expressing abnormal behaviour must have stigmatized an individual, thereby excluding the patient to his bedroom (see Stol 1999: 67-68).
41 See n. 5, 6 and 35 above.
42 A similar situation was suggested for a tablet published by Zilberg and Horowitz (2016: 176-77), but Jiménez (2018: 45) has recently reinterpreted the relevant line. However, explanatory lines in relation to drawings are attested (e.g., Finkel 2011: 340-341 Figs. 4 and 7).
The drawing is incised along the width of the reverse, and the tablet therefore has to be turned 90 degrees to observe the illustration (see also Zilberg and Horowitz 2016: 176-177; Finkel 2011: 339 Figs. 3a-b). The figure is roughly 6.4 centimetres high and 2.6 centimetres wide, and it is clearly anthropomorphic. The head has ears and curvy horns, a serpent’s tongue, and possibly a reptile-like eye. The neck is long, and in general the being appears to be covered with badly preserved scales or hair. Unfortunately, the majority of the torso is fragmentary. The left hand appears claw- or paw-like, and the right hand is lumpy with a pointy thumb. The creature has a long tail placed alongside the left leg, and this leg appears to have discernible muscles. The figure is displayed in an upright position standing on two legs (see also Finkel 2011: 339-340 Figs. 3b and 5). The feet are badly damaged, but the right foot may have had claws. Furthermore, there appears to be a curvy line drawn with intent between the right leg and right hand.43

3. Which Demon is Depicted?
The being depicted on BAM 202 seems to relate to the evil afflicting a patient. None of the two figures described in the instructions in obv. 9-12 or obv. 17-rev. 4’ represents demonic beings.44 Additionally, it seems unlikely that the depiction represents any of the initial psychological problems in obv. 1, as these are not described as divine powers in BAM 202 (see n. 6; cf. n. 5). Consequently, the only evil incarnate mentioned in BAM 202 is bennu-epilepsy, identified in the text as “a šedu-demon deputized by Sîn”. This seems to resonate with the tentative reconstruction of the final line of BAM 202: “The i[mage] of divine7 Be[n]mu”-(epilepsy), de[puty of Sîn]”. This line must therefore refer to the depiction, which is drawn along this line and below.

As discussed in the previous section, bennu is the common word for (recurring) epilepsy-like reactions. However, its appearance as a demon remains largely unknown,45 and descriptions of bennu are poorly attested.46 The diagnosis concerning bennu also mentions the patient “crying like a goat”, thus underlining the connection between goats and epileptic disorders. However, the drawing does not seem to resemble a goat (see Section 2). Consequently, it is difficult to locate any significant features linking the depiction on BAM 202 to concrete descriptions of bennu-epilepsy.

Several parallel passages in BAM 311, the unpublished BM 40183+, SpTU vol. 3 no. 83, and STT vol. 2 no. 286 contain diagnoses and treatments for bennu, the generic “Any evil” mimma lemmu, and the ali- and associated demons, as well as instructions for keeping such evils from a man and his bed (Chalendar 2013: 4-8; Finkel 2011: 338, 340 Fig. 4).47 Chalendar (2013: 11-13) also reconstructed the ritual in BAM 202 obv. 17-rev. 4’ to describe the removal of mimma lemmu. These texts therefore display a general overlap in cures against

43 This depiction sets itself apart from Reiner’s description of such drawings as “schematic” or “clumsy” (Reiner 1987: 30).
44 The two prescriptions describe the production of figurines representing the patient’s body and a figurine presumed to be married off to the evil afflicting the patient (see Section 6; Chalendar 2013: 10-13).
46 An account of this demon is found in the Middle Babylonian Armana recension of the myth Nergal and Ereškigal, in which bennu is stationed as a demon in the 9th gate of the netherworld, see Ponchia and Luukko 2013: xcv; CAD B: 206; Stol 1993: 21.
47 An overview of targeted problems: BAM 311: obv. 22’ (depression); obv. 30’ (persistent “Hand of Ištar”); obv. 23’, rev. 52’-53’, rev. 59’, rev. 77’ (epileptic disorders); obv. 41’, obv. 46’ (keeping mimma lemmu from a man and his bed); obv. 47’ (ali-demon); STT vol. 2 no. 286 col. ii: 2, 9 (epileptic disorders); SpTU/ vol. 3 no. 83: obv. 16, rev. 15, rev. 22 (keeping mimma lemmu from a man); obv. 23 (eradicating evil); obv. 13, rev. 10 (keeping evil from a man and his house); obv. 31 (ali-demon? See Chalendar 2013: 7). Chalendar (ibid.: 4-6) states that BM 40183+ contains treatments against mental changes, attacks of the gallû- and ali-demons, to keep “Any evil” (mimma lemmu) from approaching a man, for an evil šedu-demon in a bed, attack of the bennu-demon, and instructions to tear out the lîli-, ardâ lîli- and mimma lemmu-demons.
generic epilepsy (especially *bennu*) and the demon *mimma lemmu*, as well as a focus on the patient’s bed. However, descriptions of *mimma lemmu* do not overlap with the depiction on *BAM* 202, and this demon can therefore be ruled out.48

Epilepsy was associated with specific involuntary movements, as well as a particular behaviour exhibited by the patient in his bed (Stol 1993: 38; see Section 1). The patient’s sickbed therefore appears to be connected to, e.g., epileptic disorders, and it is mentioned explicitly as an important location twice in *BAM* 202 (obv. 17-23 and rev. 5).49 Focusing on the sickbed may aid in the search for a comparable demon. As shown by Wiggermann (2011: 313-14; Wiggermann 2007: 106-9 and n. 5), a nameless evil with the head of a dragon-snake (*bašmu*?), perhaps representing “Death” (*mūtu*), the messenger of Ereškigal, is depicted on an amulet from the first millennium BCE rearing its head from underneath a man’s bed.50 As noted by Wiggermann, the scene seems to mirror the situation described in a Ḫulbazizi incantation found on various amulets, which reads:

“He who transgressed the privacy of my bed, made me shrink for fear, and gave me frightening dreams …” (Wiggermann 2007: 106-7 and n. 3; see also Wilhelm 1979; Butler 1998: 50-51).51

The bed may generally have been linked to certain evils, such as *mimma lemmu* and *mūtu*.52 A physical description of Ereškigal’s messenger *mūtu* is known from the “underworld vision of an Assyrian prince”. The demon is described as having the head of a *mūšuššu*-dragon, human hands and some unknown description of the feet.53 The *mūšuššu* is a snake-dragon with a long neck and the head of a snake with a forked tongue, two horns occasionally curled up, front paws of a lion, and hind legs with talons of a bird (Wiggermann 1993-97: 456).54 Although the *mūšuššu* is commonly depicted without ears and on all fours, for example on the Istar Gate, it can also be depicted with ears and standing up (e.g., Parpola 1993: 212). This description could reflect parts of the drawing on *BAM* 202, though the demon does not appear to be depicted with paws or human hands exclusively.55 Although death could be personified,

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48 In the so-called “underworld vision of an Assyrian prince”, *mimma lemmu* is stated to have two heads, one of a lion and another unknown one, see *SAŠ* 3 no. 32 rev. 7. Only a single crude and partly damaged depiction of *mimma lemmu* exists (Finkel 2011: 338, 340 Fig. 6), and this does not resemble the drawing on *BAM* 202. I cannot describe any significant features of this drawing from the picture published by Finkel.

49 The patient’s bed and the influence of various demons were also described in numerous rituals connected to, e.g., dreams, see Butler 1998. Possibly, the bedroom offered the most privacy, and it was the place where the healer visited the patient. Van der Toorn (1996: 60-61) argues that in the Old Babylonian period the bedroom also had the family tomb underneath the floor due to the room’s high degree of privacy and silence. The patient’s bed in connection to illness and demons should be examined further elsewhere. See n. 15.

50 Wiggermann 2011: 313 Fig. 6, copied after Becker 1993: pl. 2 no. 7 (photo). Wiggermann (2011: 313-14) proposes that this illustration represents a nameless evil sharing iconicographic features with *mūtu*.

51 Wilhelm 1979: 38. The following is a composite transliteration of the relevant lines: ŠEN ša mal-di ญาNÁ-iās DAB ú-pal-liš-an-ni ú-sag-ri-ra-an-ni MĀŠ.GE₄.ME₅.pār-da-a-ti ú-kal-lim-an-ni ... For a recent analysis of *mūtu*, see Sibbing-Plant Holt in press. Also note that Kišir-Aššur likely fumigated the bed in relation to treatments of the epilepsy-associated šaššatu-illness (*BAM* 129 col. iv 10’, col. iv 16’; Farber 2004: 127 n. 54), and Kišir-Nabû copied a *namburbi*-ritual to negate evil emanating from a man’s bed (VAT 13682 = N4 no. 404; Maul 1994: 379ff., 546-547; see Butler 1998: 46-47).

52 Wiggermann 1997: 34-35; *SAŠ* 3 no. 32 rev. 3: ... *mu-ú-[qʔu]‘* SAG.DU MUŠ.HUŠ₁ša-ki-in ŠU₄ša LÛ.MEŠ GIR₁šu 𒄠[x x]. Alternatively, *mūtu* could appear Anzû-like (Sibbing-Plant Holt in press). For *mūtu* as personified death, see Stol 1993-97; see also George 1992: 108. “Death” is blocked out of a man’s house, alongside other evils, in the apotropaic ritual *šēp lemmû* ina bī amēlī parāsu (Wiggermann 1992: 6-7).

53 Furthermore, the animal of Marduk was described as a possible sender of *sinīt fēmī in šammu šīkînu*, see n. 5.

54 As described in Section 2, the demon on *BAM* 202 shows several reptile features. Note that the *mūšuššu*-dragon could be equated with a *hûlûtu* (*CAD* ḫ: 230). As argued by Landsberger (1934: 46, 62-63, 116ff.), it is possible that the *hûlûtu* is to be identified as a chameleon. If so, this could explain why such related demons were difficult to detect, seeing as a chameleon can change its colour. Furthermore, chameleons move their eyes
the Neo-Assyrian recension of the Epic of Gilgamesh informs us that “No one sees Death, no one sees the face [of Death]”. Yet, a related bennu diagnosis referenced in Section 1, emphasizes that occasionally the patient did in fact see the evil in question. Possibly, a similar situation is mirrored in Gilgamesh as well: “In my bed-chamber Death abides, and wherever I might turn [my face], there too will be Death”.

The drawing on BAM 202 does not conform completely to any descriptions of demons associated with the content of the text or the larger demonological context. Yet, it is possible that the creature on BAM 202 illustrated a specific version of a demon. Perhaps its particular physique was once described in the statement in rev. 15’. Therefore, it seems plausible that the demon represented a version of bennu-epilepsy, possibly representing our first depiction of this demon in the cuneiform record. Still, the drawing may instead have depicted an overarching evil, such as the messenger of Ereshkigal, “Death” (mītu), which was found lurking underneath the bed of some patients.

4. Discussion of the Colophon

Due to the damaged colophon, it is uncertain by whom the tablet was copied and what professional title the copyist may have had. The colophon states: “for undertaking a (ritual) procedure (of) Ki[ṣir- ...].” BAM 202 was therefore copied by Kiṣir-Asšur or his nephew Kiṣir-Nabû of the Baba-šuma-ibni family of dāšpu-imašmašu-exorcists who inhabited the N4 house (see May 2018; Maul 2010; Pedersen 1986: 41ff.). BAM 311, which contains a parallel diagnosis to BAM 202 for bennu-epilepsy, was also excavated in the N4 house in Assur. And this manuscript was also copied by either Kiṣir-Asšur or Kiṣir-Nabû, though it is plausible separately in various directions, which could be related to the abnormal eye movements occasionally encountered during various seizures. The ḫulmithtu could also herald death (Freedman 2006: 73).


57 Tablet 11 lines 245-46: ina Ē ma-a-a-li-ia a-sīb mu-tum 246 i a-šar [pānīya?] lu-uš-kun šu-ū mu-tūm-ma (George 2003: 718-19). It is unclear if “Death” here is considered an abstract or a personified figure.

58 This was originally suggested to be the case concerning the demon on a ritual tablet published by Zilberg and Horowitz 2016; cf. Jiménez 2018. Furthermore, the appearance of various protective deities and demons is known from Neo-Assyrian reliefs, as well as from figurines buried beneath houses (Rittig 1977). Yet, the latter cannot always be coupled with the associated rituals (Wiggermann 1992: 99-100, cf. 102-3). Wiggermann (2011: 309-10) has stressed that images of the majority of evil demons are not found depicted in the available record. It is possible that a certain amount of danger was associated with displaying such evils. Note that an apotropaic figure of mītu could be used in some rituals (Sibbing-Plantholt in press; for other demons utilized in rituals to support a patient, see Schwemer 2018).

59 Perhaps this is the reason why the demon on BAM 202 was illustrated horizontally. Bottéro (2001: 63) notices the following concerning generic demons: “It seems that people did not dwell very much on their persons, their nature, or their existence, as they have never been presented very clearly”.

60 Chalender (2013: 12-13, 45-46) offers the reconstruction ana sabāt epēši Kiṣir-Asšur mašmaš bīt Asšur ...], thus providing Kiṣir-Asšur with the title “exorcist of the Asšur temple” without explicitly stating why. It is clear from the commentary, however, that the reconstruction [mašmaš bīt Asšur] is based on the observation by Maul (2010: 2012-13) that the phrase ana sabāt epēši is less likely to have been used by young apprentices, as there must have been a responsibility involved in copying knowledge for practical purposes. For the various attested phases of Kiṣir-Asšur’s and Kiṣir-Nabû’s careers, see ibid.: 208-10.

61 The colophon reads rev. 94’-96’: [(x) x x]SAR Ē a-na sa-bat DŪ-ši pKišir-dingir-[x] 95 [DUMU 4x x (x)]60MAŠ MAŠ Ė aššur ha-an-tīš ZI-ša 96 [x x] [x x] [x x] [x x] GIM LIBIR.RA [x x] (x). See Scurlock 2014: 667, 701, 754; Abusch and Schwemer 2011: 49-52; Böck 2010a: 92-93; Schuster-Brandis 2008: 63 and n. 179; Scurlock and Andersen 2005: 83 no. 3.268, 315 no. 13.169, 422 no. 18.25, 789; Heebelel 2000: 86 n. 61, 223, 316 and n. 15; Stol 1993: 6 and n. 10, 16 and n. 110-11, 29 and n. 49, 30 and n. 61, 37 and n. 140, 41 and n. 166-167, 82 and n. 101, 103-104 and n. 31, 33, 40, and 44, 150 and n. 14; Hunger 1968: 75 no. 218 (colophon); Köcher 1964: XXIII-XXIV and pl. 75-77 no. 311 (copy).
that the tablet may have been copied by Kişir-Nabû. 62 Below, I offer an overview of idiosyncrasies in BAM 202, which may aid in identifying the copyist.

Although a palaeographic study of particularities in Kişir-Aššur’s and Kişir-Nabû’s way of writing individual signs needs to be conducted before any definitive conclusions can be drawn, some tentative observations can be made concerning individual writing practices. The initial Winkelhaken of the GIM in BAM 202 rev. 5’ is not similar to, e.g., the one in the GIM1 (mistakenly written as BAN) in Kişir-Aššur’s šammališ šehrû manuscript BAM 129 col. i 10. Furthermore, the dual writing ŠU111 be-en-ni in BAM 202 rev. 7’, which must be read as a singular, seems to reflect a scribal convention also found in, e.g., Kişir-Aššur’s BAM 9. 63

BAM 202 also contains a number of odd writings and scribal mistakes (obv. 15, rev. 8’, rev. 11’, see the commentary), as well as scribal variants (rev. 5’-6’, see the commentary). For example, BAM 202 rev. 5’ describes the patient talking a lot (magal idabbûh). Both the parallel passages in BAM 311 (rev. 52’) and BM 40183+ (rev. 25’) write “he continually cries out a lot” magal išanassû (GU.GU-sî). It remains uncertain if this change was a scribal mistake. However, it is worth noticing that the ritual instructions in BAM 202 also differ from the parallel lines (see commentary to rev. 5’-11’). Furthermore, the copyist added one too many wedges to the sign HAŠHUR1 (rev. 8’), which may be considered a mistake. The sign therefore looks similar to the Neo-Babylonian way of writing HAŠHUR instead of the expected Neo-Assyrian variant (see commentary). Of the two individuals, Kişir-Nabû is the only one explicitly engaged in copying writing-boards in Babylonian writing, and he notices this in several manuscripts. 64

It is entirely likely that the phrase ana šabât epēši, which I translate: “for undertaking a (ritual) procedure” and refer to as a “purpose statement”, was added to colophons of the Babašuma-ibni family members to indicate that the tablet in question was copied for a specific purpose, e.g., in preparation of a specific healing ceremony. 65 Such statements largely do not seem to have been written in colophons by Kişir-Aššur before he reached the mašmaššu-stage of his career. It is furthermore difficult to determine if some of the idiosyncrasies in BAM 202 exist due to haste in copying or carelessness. The presence of the drawing indicates that the copy was not rushed more than necessary, although this remains uncertain.

Illustrations of demonic forces are rare on magico-medical cuneiform tablets, and the majority of drawings serve to depict a figurine produced during a ritual described in the text. 66

62 BAM 311 contains the previously unnoticed sign KÛR “wrong!” on the left edge of the tablet in obv. 24’, which marks a mistake in the line (obv. 24’: ... qa₂₄₅<ma> ina KÛŠ). The use of KÛR to mark mistakes has so far only been observed in three N4 manuscripts: BAM 311 (obv. 24’), Kişir-Nabû’s copy of the Exorcist’s Manual KAR 44 (rev. 41; Schwemer 2011: 422; Geller 2000: 254 with references), and BAM 193 (col. i 7’; Schwemer 2007: 110) with a broken colophon (see also Geller 2000: 254 with further references). As one out of three tablets contain Kişir-Nabû’s name, it is possible to tentatively suggest that tablets with this notation from the N4 library originated from his hand. Frahm (2011: 269 n. 1277) suggested that Kişir-Aššur might have been the instructor of his nephew Kişir-Nabû, possibly copying at least a commentary for Kişir-Nabû’s instruction, although this remains uncertain.

63 BAM 9. obv. 14 and 16 list an eye of each side of the head, but in both instances Kişir-Aššur writes IG111. Note that the manuscript was likely from an early stage of his career, and his use of such a convention does not continue in later texts. Whether or not such a scribal convention is also valid for Kişir-Nabû’s texts requires further study. For Kişir-Aššur’s earlier career phases, see Arboll 2018b.

64 E.g., BAM 52 state to be copied from an “Akkadian” (UR111) writing-board, which likely refer to Babylonian script. However, this observation is tenuous and it may be insignificant.

65 I will review the previous literature on the phrase ana sabât epēši and examine the use of such expressions in Kişir-Aššur and Kişir-Nabû’s texts in a future monograph based on my dissertation (Arboll 2017). For now, see the references in the commentary to BAM 202 rev. 14’. Chalendar (2013: 3) also suggests that the prescriptions on BAM 202 were collected for a specific purpose.

66 Zilberg and Horowitz 2016: 175-177, 183; Finkel 2011: 358, 38-42 Figs. 4-6; see Reiner 1987: 30; Nougayrol 1972: 141. The texts are STT vol. 1 no. 73 col. ii (amorphous blob); BM 40183+ (antediluvian sage and
However, the drawing at the end of the reverse of *BAM* 202 is not likely to have served as a sketch for the production of figurines in the rituals (see n. 44). It is therefore possible that the drawing served as a unique testimony to how the Baba-šuma-ibni family envisioned a demonic foe. Until now, few tablets from the N4 tablet collection have been shown to contain drawings linking theory to practice. Of the two likely candidates for writing *BAM* 202, only Kišir-Nabû copied another tablet with drawings, namely an extract of the *miš pi* ritual. Unfortunately, the observations above must be considered inadequate for reconstructing the copyist’s name with certainty. Therefore, the evidence remains inconclusive at present.

5. Conclusion

This article has presented and discussed the newly discovered demon depicted on the reverse of *BAM* 202, by providing the first revised line drawing of the manuscript since Köcher’s copy from 1964. The two groups of associated ailments portrayed in the manuscript, namely labels of insanity and *bennu*-epilepsy, the latter explained as a demon acting on behalf of the moon god Sin, are described in diagnoses to exhibit various types of abnormal behaviour associated with odd speech and sounds, as well as motoric disturbances in the patient’s nervous system. It is plausible that several of these symptoms confined the patient to his bed, which is mentioned twice in the text.

Partly based on the tentative reconstruction of the final line in the colophon, I have suggested that the demonic variant of *bennu*-epilepsy described in the text was the being depicted on the reverse of the manuscript. If so, this would be the first depiction we have of *bennu*-epilepsy from Mesopotamia. However, the illustration does not conform completely to any descriptions of known demons, and it cannot be ruled out that the depiction represented a specific variant of a demon, or that the drawing was related to another overarching evil. Several associated demonic beings are mentioned in similar contexts in texts with parallel passages.

The copyist cannot be identified with certainty, as the evidence remains tenuous. The fact that the drawing is found on a medical tablet, combined with the Baba-šuma-ibni family’s occupation as mašmaššu-exorcists, ensures us that the demonic being was real to the practitioners and its features must have been evoked when administering the cure. Not only is the drawing on *BAM* 202 one of the most detailed depictions of a demon on any magico-medical tablet from ancient Mesopotamia, it is also a unique testimony to how the copyist envisioned his demonic foe.

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67 Calendar (2013: 46-47) proposes that the text could have functioned as a differential diagnosis exercise. Principles of differential diagnosis of (divine causers of) illness can be observed in some sections of Sa-gig, see, e.g., Wee 2012: 167-68, 213; Heeßel 2000: 11 and n. 65, 67. Both Kišir-Aššur and Kišir-Nabû copied various texts, which can be classified as advanced training texts (see, e.g., Arbull 2018a; Frahm 2011: 122).

68 See Walker and Dick 2001: 227-42; Pedersén 1986, N4 no. 80. However, note that Kišir-Aššur’s *LKA* 137 contains a crude diagram incised on the reverse (Finkel 1995).

BAM 202 contains eight paragraphs consisting of diagnostic statements and prescriptions. The text ends with a brief colophon and a drawing of a demonic creature. Each paragraph is separated by a single horizontal line, except between rev. 4'-5' and 13'-14', which are separated by two horizontal lines. Double rulings may indicate that the succeeding paragraph originated in a different text, and they also serve to mark off colophons (see Cancik-Kirschbaum and Kahl 2018: 169-170). Parallel passages are found in BAM 311 (rev. 51'-55'), the unpublished BM 40183+ (obv. 1'-2', 8'-11', rev. 25'-27'), SpTU vol. 3 no. 83 (obv. 5'-6', 9'-11'), and STT vol. 2 no. 286 (col. ii 14-29). I collated BAM 311 in the summer of 2016, and I read the parallel passages in BM 40183+ from online pictures (British Museum collection online 2018). The remaining passages were read from the hand drawings. The parallel passages are discussed in the commentary.

Museum no.: VAT 13739+14130
Description: Single-column tablet in portrait format; collated during the summer of 2015 at the Vorderasiatisches Museum zu Berlin
Provenience: Assur; the N4 library (“Haus des BeschworungsPriesters”); N4 no. 476
Length - Width - Thickness: 117 mm – 79 mm – 22 mm
CDLI no.: P285293 (photograph)
Bibliography: Chalendar 2013 (edition); Böck 2010a: 94; Stol 2009: 2 n. 10, 6-7, 11-12; Scurlock and Andersen 2005: 83 no. 3.268, 315 no. 13.169, 375 no. 16.43, 383 no. 16.87, 788; Heeßel 2000: 86 n. 61, 223; Stol 1993: 5-7 and n. 10, 20-21 and n. 163, 49-50 and n. 259 and 261, 149-150 and n. 14; Pedersen 1986: 71; Farber 1977: 74-75 n. 4; Hunger 1968: 70 no. 201 ms F (colophon); Köcher 1964: XI and pl. 4-5 no. 202 (old copy).
6.1. Line Drawing:

Fig. 2: Drawing of the obverse of *BAM* 202
Fig. 3: Drawing of the reverse of *BAM* 202
6.2. Transliteration:

Obverse

1. DIG NA KA,[HI.KÚR.R]A DAB-su<ma> tē-en-šū iš-ta-na-an-ni
2. a-ma-tu-lšīl K[Ú]R.KÚR-ru [(x x)] [U]MUŠ-su ŠU[B.ŠUB-su u]
3. ma-gal L[U].1.DU₂₁-ub a-na tē-me-tūr-r[ī'-šū]
5. GĪ.R.PAD.D[U] KA₅₃ A ina GŪ-šū GAR-an ina NE SAR-šū
6. ū [l]MEŠ A.ZA.LU.LU EŠ.MEŠ-su-ma TI

DIŠ KL.MIN (İ)GI-lim ƗKA.ZAL.LÁ KA tam-tim
ina K[A]Ş la pa-tan EN Ɨ-bal-lu-šu NAG.MEŠ

DIŠ KL.MIN [S]UL-šū šá GĪ DŪ-uš [S]AG.DU-su šá IM GAR-an
10. tā[G][Ú].Ĕ tu-ḫal-lap-šū TŪG UD.1.KAM MU₄.MU₄-su
11. ūBAR.[SIG ina SAG.]D[U]-š[i] GAR-an KUŠ UR.GĪ, ina KI.TA-šū ŠUB
12. [x]x[x x x x]x l I [G]U₁₇-ma TI-ut

16. [ina] ÑE] SAR-šū-ma TI

DIŠ KL.MIN [x p]ī x[x x x] šá GI.MEŠ DŪ-uš
18. [x x x x ina p]a-ni-šū GAR-an
19. [(x x x x x x x)]ū GAR-an täGŬ.Ĕ tu-ḫal-lap-šū
20. [x x x x x x] x ina SAG ġiNŪ GIG GAR
21. [x x x x ina]t ġ[NÜ] GI]JUG tuš-tāl
22. [(x x x x x x x)]u₂ GIG BI TI-ut
23. [(x x x x x x x)]x šul-pur GUD BAL-šū
24. [(x x x x x x x x)]x(l) (x)

Breaks off.

Reverse

1°. [(x x x x x tē₂-laq₂-q)l₁-lšū-ma īt₆-a[l]t₆-lak]°
2°. [(x x x x x x)] su-ud-dī-šū
3°. [ana₂ īt₆]-[i ša₂ BĀD₆ tu-šē]₆-rib-ma IGI-lšū ġUTU.Ĕ GAR-ma
7°. ŠU₁ be-en-ni [h][AL]AD šā-nē-e ²30 ana TI-šū
8°. (h)[GSTE][N,K][A₂] A [a-nu-mu-tu] ²3HAŠHUR GIŠ.GI
10°. [x]x[l]x x l SIG UGU.ĐU.LI
11°. [ina KUŠ mu]num[Ŋ]AŠ.GAR [x x ina] İSA ĀB.RI.RI<.GA [GAG[g]\GAG-pē ina GŪ-šū GAR-la₄]


13°. DIŠ KL.MIN NUMUN [h]MA.NU [h][G]I]-lim ina KUŠ

14°. a-na ša-ba[t] e-pe-ši ²K-[sir-x-x (x x x x?)]
15°. ḫša-[|[a][m²]²][h](-diš)-be₂-e[n²]-lnaⁿ² ša-n[é-e d]₀
6.3. Translation:

Obv. 1-3: If dem[makurr]û (derangement) has seized a man and his mind [lbers time and again], his speech is incoherent, he [gets a dep[ression] time and again (lit.: his [min]d continually fa[lls on him]), and he talks a lot, (in order) to res[tore] his mind to him:

4-6: You place "bone of humanity", the bone of a ma[le] pig, (and) the bone of a fox by his neck. You fumigate him by means of charcoals, and (then) you anoint him continuously with oils of herd animals (nammaššû), and he will recover.

7-8: If "ditto", he repeatedly drinks "It cures a thousand"-plant, kazallu-plant, (and) imbû' tâmti in beer on an empty stomach until he recovers.

9-12: If "ditto", you make (a representation of) his body (made out) of reed, you place (a representation of) his head (made out) of clay (on it), you clothe it (in) a nahlaptu-cloak, you cover it with the garment for one day. You place a par[šigu-headdress on] its [hea]d, you place the skin of a dog underneath it. [He (i.e. the patient) ...], he [e]ats [...], and he will recover.

13-16: [If "ditto"], you fumigate him (with) the hea[d] of an allal[lu-bird the head of an ārib[u]-bird, [the head of a goos[e], the head of an anpa[tu]-bird, the h[e]ad of a h]eron, [the head of a dur]jumu鸟-card, (and) the head of a male iṣṣûr ḫurri-bird [on] charcoals, and he will recover.

17-23: [If "ditto"] you make a [...] (figurine) of reeds, you place [...] in front of it, you place [...] by it)’s [...] , you clothe it in a nahlaptu-cloak. [You' ...], you place [...] (the figurine?)] at the head of the patient’s bed. You make (it) lie [in the bed of the patient]nt [...]. [You’ ... an]d that patient will live. [You’ ...], (and) you pour [...] (for) it in an ox hoof, [You’ ... (breaks off)]

Rev. 1'-4': ["You will take] her a[way], and you [will depart]." [...] its travel provisions, [you sl]ip [(it) into a drain]age ope[ning of the city wall], and you place it facing the sunrise, and then [you sea]l (the opening), and you pour three flour heaps (and) "horned salt-plant" in front of the op[ening].

5'-11': If a man continually [jer]ks in his bed, he cries like a goat, he groans, he shudders (lit.: he is afraid), (and) he talks a lot: "Hand of bennu-epilepsy", a [šē]du-demon deputized by Sin. To cure him: you wrap up "[fox] grape", amun[tu]-plant, "marsh-apple", sap of abukkatu-plant, harmumu-plant, arantu-plant, [...], (and) hair of a monkey [in the skin of a female] kid [...] with the tendon of a dead cow, (and) you place it (around) his neck.

12': If "ditto", you place šarānu-plant (and) ūaltappānu-plant in a leather skin (around his neck).

13': If "ditto", you place ēru-tree (and) "[It cures] a thousand"-plant in a leather skin (around his neck).

14': For undertaking a (ritual) procedure of Kiṣir-[Nabû?], (broken title?).

15': The i[m]a'[ge] of divine Be[n]nu(-epilepsy), de[puty of Sin].
6.4. Commentary

Obv. 1-6: Parallel passages are found in STT vol. 2 no. 286 col. ii 14-18 and SpTU vol. 3 no. 83 10'-11':

STT vol. 2 no. 286 col. ii

15 [a-ma-r]u-šú KUR.K[U]R-ra ū-em-šú SUB-šul u ma-gal [x x (x)]
16 [ana tē-e]-m-šú tur-[rul]-šú |GIR].PAD.DU NAM.|LŪ|U18.L[U]
17 [x x] ŠAḪ1 GIR.P[AD].DU KA5 A ina GÚ-šū GAR-[an]
18 [ina] |NE x SAR2 Š.MEŠ19 A|L|A|L|U|L|U |ŠEŠ [x x x]

SpTU vol. 3 no. 83 obv.

10' DĪŠ [KI.MIN] GIR.PAD.DU NAM.LŪ.U18.LU GIR.PAD.DU ŠAḪ NITÂ GIR.PAD.DU KA5 A ina GŪ-šū GAR-an |SAR19]-šū
11' ina Ī.UDU A.ZA.LU.LU ŞEŠ.ŠEŠ-[su]

For a discussion of the diagnosis, see Section 1. For previous discussions of this passage, see Chalendar 2013: 10-13, 12-29; Steinert 2012: 391 and n. 29-30; Stol 2009: 1-2 and n. 10, 7, 11-12; Finkel 2008: 337; Scurlock and Andersen 2005: 375-76 no. 16.43, 383 no. 16.87; Köcher 1964: XI; cf. CAD Š/3: 46. In addition, the commentary CT vol. 41 pl. 43 BM 59596 concerns the same diagnosis, although much of the text is obscure (see Chalendar 2013: 8-9; Frahm et al. 2013; Frahm 2011: 238; Stol 2009: 12; Labat 1933: 114-15).

1: For the tentative reconstruction of a Gtn-stem of šanû, see CAD Š/1: 406; CAD T: 95; Stol 2009: 2 n. 10; Chalendar 2013: 20; see also AHv: 1166. The inserted -<ma> is based on the duplicate passage in STT vol. 2 no. 286 col. ii 14.

2: There is a break in the middle of the line, which may have held two signs. Considering the parallel passage in STT vol. 2 no 286, it seems likely this space was originally left blank.

The reconstructed [u] at the end of the line is based on the parallel passage in STT vol. 2 no. 286.

3: Chalendar (2013: 10) suggests reading the partly broken sign at the end of the line as tur-r[l]-šû, which the visible wedges support.

4: Based on my collation, there appears to be a small wedge impressed above the U18 sign, which cannot be explained. Chalendar (2013: 10) transliterated the end of the line as ŠAḪ NI[TAH], which is presumably a typo for the reading ŠAḪ.

4-5: Whether or not some of the bones mentioned were Decknamen for plants remains uncertain (Rumor 2017: 27; Chalendar 2013: 29-30; Böck 2010b and 2011; Stol 2009: 12).

5-6: The phrase ina pēntî tugattaršu, "you fumigate him (with various plants) on charcoal" (e.g., Abusch and Schwemer 2011: 127, 203, 267-68), is followed in BAM 202 obv. 16. As no specific fumigants are mentioned in obv. 5, I have translated "by means of" for ina. For fumigation in the context of insanity and epilepsy, see Chalendar 2013: 29-30; Böck 2011: 700, 702; Böck 2010a; Stol 2009: 12; Stol 1993: 106-107 and n. 75; Walker 1980. For fumigation in Mesopotamia, see also Reiner 1957-58: 394; Labat 1961; Goltz 1974: 83-86; Herrera 1984: 109f.; Finkel 1991; Stol 1998: 350-351; Geller 2010: 20, 81f., 181 n. 44; Geller 2016: 25-26; Stadhouders 2016.
6: Note that the ending (verbal form)-ma TI “he (drinks/eats/etc.) …, and he will recover” in BAM 202 obv. 6, 12, and 16 may designate “a subordinate ‘if’ clause” (Scurlock and Andersen 2005: xvi).

7-8: This prescription runs largely parallel to STT vol. 2 no. 286 col. ii 19-20 and SpTU vol. 3 no. 83 9’:

STT vol. 2 no. 286 col. ii

19 DIŠ K[I].MIN [Ḫ]IL-ȒI-m[Ḫ]a-za-l[Ḫ]-CA TA]m-tim GA[Z  x  x (x)]

20 [NU] p[a]-tan E[N]x  x  x  x  T[IN] x  x

SpTU vol. 3 no. 83 obv.

9’ DIŠ K[I].MIN [Ḫ]IL-ȒI-m[Ḫ]a-za-l[Ḫ]-CA KA A.A.B.A INA KAŠ NU pa-tan EN \bal-tu \NAG[^1] .MEŠ

For a discussion of this passage, see Chalender 2013: 10, 30-31.

8: Imbibing medication on an empty stomach is well attested (see, e.g., Geller 2005; Scurlock 2014).

9-12: The prescription runs parallel to STT vol. 2 no. 286 col. ii 21-24:

STT vol. 2 no. 286 col. ii

21 DIŠ K[I].MIN NU-šū [š][a] [Ḫ]IL-šū D[U]-uš[^2] [Ḫ]SAG[^1][D][U]-šu šá I[M GAR-] [an]

22 [x  x  x  x] [[u]-hāl-lap-šū T[U]-G x  x  x  x  x]

23 [x] [x  x  x  x] [Ḫ]SAG[DU]-šu [Ḫ]GAR[^1]-lan[^2] KUš[^7] UR[^1][GAR[^1] x  x  x  x  x (x)]

24 [x][x] [[(ca. six signs missing)]][x][x][x][x] [[(no more than five signs missing)]]

For a discussion of this passage, see Chalender 2013: 10, 31-32.

9: The sign in the break is difficult to see. Chalender (2013: 10) suggests the reading [Hôtel]-šū, which is supported by the new line drawing. However, note the reading NU-šū in STT vol. 2 no. 286 col. ii 21.

11: The parsīgu is a headdress made out of a sash (CAD P: 203ff.; see Chalender 2013: 13).

13-16: The prescription runs parallel to the unpublished BM 40183+ obv. 1’-2’:

BM 40183+ obv.


13: The reconstruction -[Ḫ]mušen SAG UG(A/NAGA.GA)mušen follows Chalender (2013: 10 and n. 26, 33). The broken space could ideally have fitted the reconstructed signs.

14: The remain of the sign GI fits with the writing in obv. 17. The final ingredient is written with the Sumerogram KI.SAG.MUNUS[^1]mušen (ıgirû), and the remain of the sign KI can be spotted on the original.

15: The durummu-bird (CAD D: 198) is mentioned in the commentary CT vol. 41 pl. 43 BM 59596 obv. 4 in an obscure passage (see Chalender 2013: 8-9, 33).
**BAM** 202 records **BURU**s as **HÜ.ŠE.ERIM**, whereas **BM** 40183+ has the reading as **HÜ.ERIM**.

The sign read **HAB[RUD]** is different from **HABRUD** in rev. 4’, and it does not appear as neither **KLx**U nor **KLxBAD** (Borger 2010: 414; Labat 1995: 208f.).

17-rev. 4’: **BAM** 202 obv. 17 may have run parallel to the broken entry in **STT** vol. 2 no. 286 col. ii 29. **Chalendar** (2013: 11, 33ff.) edits the section from **BAM** 202 obv. 23-rev. 4’ parallel to **BM** 40183+ obv. 8’-11’, although the passage is almost completely broken in **BAM** 202:

**STT** vol. 2 no. 286 col. ii

29 [(ca. seven missing signs)] GI DÜ ḫi‘ al[(breaks off)]

**BM** 40183+ obv.

8’ NINDA.Ī.D.E.A LĀL ï.NUN.NA GAR-an NĪG.NA šimLÍ GAR-lanl KAŠ SAG BAL-q[i (ca. eight signs missing)]


10’ ša2-qab2-bīl-ma NU a-di šu-de-e-šū ana bi‘ i šā BĀD1 tu-še-ibrīl IG1.MEŠ-šū ana [i.UTU.ŠU.Â]1 GAR-an‘-ma BAD-ḫi‘


The text in **BAM** 202 obv. 17-rev. 4’ may have concerned a ritual where the evil afflicting the patient is offered a figurine representing a wife and married off to this figurine, after which the demon is removed (Chalendar 2013: 33-34, 36; see Scurlock 2006: 52-53; Farber 2004: 128-30; Farber 2001: 255; Schwemer 1998: 60-63, 66-67).

17: As noted by Chalendar (2013: 11, 33), the opening of the line must have referred to the figurine (salmu). Perhaps the break once contained additional information concerning what sort of figurine was constructed. One of the uncertain signs before and after ḫi‘ may have been NU, but this does not account for the remaining traces. No useful reconstruction is suggested.

19: Chalendar (2013: 11, 33-34) reconstructs [i.0BAR.SIG ina SAG.DU]-lṣūl. The sign read ṣūl is not clear on the original.

20: The few traces are reminiscent of the sign kur or the end of a NÚ, although Chalendar (2013: 11, 33) suggests reading [NU]?l. The line could be reconstructed as [ina še-pit gīn]l, although something would be missing directly after, and the foot and the head of the bed would be in reverse order (cf. **CAD** Š/2: 293).

21: Chalendar (2013: 11, 33-34) reconstructs [i.0BAR.SIG tuš-tāl], which is reasonable in accordance with the original. For the verb itūlu, see **CAD** N/1: 204ff.; **CAD** U-W: 344ff.; Kouwenberg 2010: 365, 480; Huhnergward 2002: 178ff. Similar actions can be found in other rituals (e.g., Scurlock 2006: 515-19; Tsukimoto 1985: 125-27).

22: The ending GIG BI Ti-ut is problematic, as it indicates the cure is over (Chalendar 2013: 34-35). Horizontal lines divide prescriptions in **BAM** 202, and there is no line between obv. 22-23. Thus, it is unclear if the prescription continued.

23: Chalendar (2013: 11 n. 27) suggests that the tablet may hide a -qi on the edge, although the original only contains the final signs BAL-ṣū. For the possible reconstruction [nīgnak burāšī taškakī šīnāt imērī an]a ʃul-pur ..., see Chalendar 2013: 35.

24: Only a few traces remain. This and a hypothetical missing line may have contained instructions for marrying off the demonic being to a substitute figurine, reconstructed as: maḥar Šamaš kiām taqabbī mimma lemmnu aṣṣata šuḫuzāta atta musa ši aṣṣarka, “You say the following in front of Šamaš: ‘Any Evil’-demon, you
are made to take a wife, you are her husband, she is your wife" (Chalender 2013: 11-13; see references to obv. 17-rev. 4').

Rev. 1': The broken end of the line can barely hold the reconstructed signs $l(a)-a[t^1-ta^2-lak^2]$. Perhaps it is possible to read $l(a)-[a^2-lak^2]$, although this spelling of the second person singular verbal form is not attested in the CAD (A/1: 322ff.; see also AHw: 33). Chalender (2013: 11 and n. 28) suggests the alternative reading $l[a]-at-ta-[l^1[ak on the basis of the CDLI picture of BAM 202. This proposal can now be dismissed on the basis of my collation.

The line may have contained the end of a phrase uttered before Șamaš concerning the evil afflicting the patient (ibid.: 13, 35).

2': Chalender (2013: 11) reconstructs [annā taqabbima NU a-di]. I have refrained from reconstructing this passage, due to the unclear and few remaining signs.

3': I have drawn on the parallel passage in BM 40183+ to reconstruct the line, and the remains in BAM 202 rev. 3' support the proposed reconstruction. For the use of a "drainage opening" bi'u in connection to figurines in a ritual context, see CAD B: 297. Abusch and Schwemer (2011: 156, 285, 345) translate the word as a "sewage opening".

4': Chalender (2013: 35) suggests reconstructing the line as [bi'a tepeḫḫi k]ima (see also Abusch and Schwemer 2011: 156 line 32). However, kīma makes little sense in the context here. In light of the duplicate BM 40183+ obv. 10', the line must refer to the closing of the deposit. The reconstruction [ta-bar-ra]m'a-ma reflects this interpretation.

The final sign HABRUD (ḥurru) is translated "hole" (CAD H: 252-53), e.g., in relation to a hole made in a wall to hide a figurine in (see Abusch and Schwemer 2011: 144, 186). The word must refer to the previously mentioned drainage opening.

5'-11': The diagnosis and prescription has parallel lines in BAM 311 rev. 51'-55', BM 40183+ rev. 25'-27', and SpTU vol. 3 no. 83 obv. 5'-6':

BAM 311 rev.
52' i-par-ru-[ud ma-g[a]l] GÛ.GÛ-si ŠU be-en-mu [ALAD šá-nē-e d30]
53' ana TI-šū [G]EŠTIN.KA₅.A í[a]-n[u-t][u] ĝi̯[H]AŠHUR [gI]
54' [HAR.LU[M.BA.SI]R ʿa-ra-[r][a]-m-a ILLU LITUR

BM 40183+ rev.
25' DIŠ NA ina KI.NÁ-šú HULUḪ.HULUḪ-ut-ma GI[M x x x x] ū[l i-ram-mu-[mu il-na-ru-t ma-[ga] GÛ].GÛ-sī
26' [S]U [be-en-mu] [ALAD] ḫšd-nē-e d3[0 ana TI-š] ū [G]EŠTIN.KA₅.A í[a]-n[u-tu4] [H]AŠHUR [gI]
27' [HAR.LU[M.BA.ŠIR ʿa-ra-[r]-a-nu ILLU L][DUR SIG U[GU.D]UL.BI ina KUŠ ina SA PĒŠ.ŪR G[AG.GAG ina GÛ-š] ū GAR-an-ma [TI]1 (I can barely see the last sign)

SpTU vol. 3 no. 83 obv.
[HAR.LU[M.BA.ŠIR ʿa-ra-[r]-a-nu]
6' ILLU LITAR SIG UGU.DUL.BI ina KUŠ ina SA PĒŠ.ŪR
For a discussion of this diagnosis, see Section 1. See previous discussions in Chalendar 2013: 10-13, 37ff.; Böck 2010a: 94; Stol 2009: 12; Scurlock and Andersen 2005: 83 no. 3. 268; Heeßel 2000: 86 n. 61, 223; Stol 1993: 6 and n. 10; Köcher 1978: 35.

5°: The parallel line in BAM 311 reads GIM GÙ ÚZ GÙ-si, thereby adding GÙ, rigmu “voice, sound, noise, wailing” of a goat (CAD R: 328ff.).

6°: Both the parallel lines in BAM 311 (rev. 52') and BM 40183+ (rev. 25') write GÙ.GÙ-si instead of BAM 202’s DU11,DU11-ub. See Section 4.

7°: The copyist chose to write the diagnosis “Hand of bennu-epilepsy” with the dual of “hand” (ŠU3 be-en-ni). The writing was likely due to a scribal convention used among certain members of the Baba-šuma-ibni family (see Section 4 and n. 63). Further analysis of this phenomenon is required. Note that BM 40183+ writes δbennu (see Stol 1993: 21 and n. 162-63).

8°: The copyist imprinted one horizontal wedge too many in the beginning of the ḤAŠHUR sign, which makes it similar to the Babylonian writing of the sign, as seen in SpTU vol. 3 no. 83 obv. 5°.

9°: The reconstruction is based on the parallel passages cited above (see Chalendar 2013: 11-12).

10°: Chalendar (2013: 11 n. 29) suggests that the break may have held the ingredients found in the beginning of rev. 9°, although this would require other ingredients in rev. 9°. For the use of “monkey hair”, see Dunham 1985.

11°: The reconstruction is based on the duplicate passages (see Chalendar 2013: 11-12). The first sign GAG of the partly preserved ḠÁ ḠÁ.RI.RI.<GÄ> GAG-pi ina GÙ-siš GAR-lan1 is problematic, and if properly restored, the copyist must have miscalculated the space available for writing the ingredient GAG.GAG-pi, thereby missing the restored <GÄ>. None of the other duplicates use the skin of an unīqu “female kid”, although such skins were occasionally used in rituals connected to epilepsy (see CAD U-W: 160). For the writing “dead cow” (ÁB.RI.RI.GA, šalquttu), see CAD Ś/1: 262; CAD L: 217.

12°-13°: The description “in leather” is an abbreviation for producing a mêlu “phylactery, poultice, bandage, (leather) bag” (see Reiner 1959-60: 150; Lambert 1980; Stol 1993: 102-104; CAD M/2: 14-15). Such bags were used to ward off an epileptic attack, and to eradicate ailments (Stol 1993: 102-103 and n. 30, 109). For a discussion of the ingredients, see Chalendar 2013: 44-45.

12°: The šaráma-plant is also mentioned in the LB medical commentary BM 54595 (= CT 41 pl. 43) obv. 12: šá-ra-nu: kur-sis1-s[u], “šaráma-plant (is) kʊris-su-rodent”. This commentary is described as “relating to (the work) ‘in order to tear out and [release] Antašubba-epilepsy’” (ša ana Antašubba nasišši u [paššari], BM 54595 rev. 3°; see discussion and edition in Frazer 2017; cf. CAD Ś/2: 50; see also CAD K: 567). A similar sentence is also mentioned in the related manuscript BAM 311 rev. 59°.

14°: The meaning and use of the phrase ana šabāt epēši is discussed briefly in Section 4; see especially n. 65. See also Couto-Ferreira 2018: 152 n. 10, 157-62; Maul 2010: 212-13, 216; Böck 2008: 296; Maul 2003: 180-81; Maul 1994: 159 n. 16; Bottéro 1983: 159; Hunger 1968: 12; Leichty 1964: 153; Eilers 1933: 325. Chalendar’s (2013: 12-13) reconstruction of this line is discussed in Section 4.

15°: The reading of this line is uncertain. The initial traces could be 1ša1-[I]a[m'] , although this does not explain the writing benna. I have cautiously emended the visible vertical wedge after -[I]a[m'] to 1diš(diš), but the reading remains tentative. The
sign \(be^2\)- is questionable. The following sign could be an \(-e[n^3]\), and I emend the next sign to \(-lna^{30}\). Compared with the writing of \(bennu\) in rev. 7', it does not look identical. The writing \(be-en-na\) is attested, although infrequently (e.g., \(CAD\) B: 206d; Schwemer 2007: 115; Reiner and Pingree 1981: 46). An alternative reading of the opening as \(ls\alpha^{11}-[f]am^{2} \ [d\beta\iota\varepsilon]-lna^{30}\) makes the problematic vertical wedge part of \(-lam\), although this sign would take up more space than other signs in the line. Furthermore, the spelling \(be-na\) is awkward. The final traces support the reading \(šá-n[é-e \ d^{30}]\), although the reconstructed three signs can barely fit in the broken space before the drawing. None of the traces permit \(d\)ALAD. Alternatively, the final line could refer to the removal of \(bennu\), e.g., \(l\alpha^{11}[-n]\alpha^{2} ana \ Š[U^{(1)\phi}]
\[d\beta\iota\varepsilon\] šá-\(b[a^{2}-\pi]\) (\(CAD\) Š/1: 94), but the final traces of the line do not fit this reconstruction well. Although the initial wedge could be a \(Personenkeil\), the traces after \(šá\) do not permit \(f\iota\), and I find it difficult to reconstruct the line as part of the colophon.
6.5. Pictures of *BAM* 202:

Fig. 4: The obverse of *BAM* 202
Fig. 5: The reverse of BAM 202
7. Bibliography


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