ABRAHAM OFIR SHEMESH

TWO RESPONSA OF R. SAMSON MORPURGO ON NON-KOSHER MEDICINES: THERAPY VS. JEWISH HALAKIC PRINCIPLES

Abstract: In the eighteenth-century Europe, medical practices often still followed theories originating from classical and medieval medicine. In addition, medicaments produced from plants, minerals, or animals, such as snake meat, were commonly used to treat a wide range of illnesses. This study addresses the approach of the Jewish-Italian physician R. Samson Morpurgo (1681-1740) to the use of non-kosher medications. According to Morpurgo’s outlook, providing the patient with proper medical care and consideration for the dictates of halakha are two intertwined and interrelated aspects. The condition of a patient whose life is in danger might have the effect of reducing the halakhic restrictions while, on the other hand, halakha has the power to determine or intervene in manners of treating patients whose life is not in danger. Sometimes the authority of Jewish law and medical needs clash and form a moral-religious conflict. In such cases, Morpurgo is of the opinion that preference should be given to halakha, although in some cases the need for medical action has the upper hand and overrides the restrictions posed by Jewish law, as ultimately the patient’s health is valued above all else.

Key words: Samson Morpurgo; Jewish medicine; Jewish physicians; Italian Jews; hydroken; stam yeinam; snake medicine; kosher remedies; theriac; Abi’ad Sar Shalom Basilea of Mantua

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1. Introduction

In the process of the Middle Ages and the Modern Era, the Jewish community in Italy became renowned for its spiritual treasures and cultural wealth, and it produced notable scholars in the fields of philosophy, classical languages, medicine, and natural sciences. The combination of Jewish and general humanistic studies was a prominent feature of Italy’s Jews (Roth 1959, 242-213). In the 16th-18th centuries, several rabbis operating in Italy became involved, in addition to their religious activities, in medicine as well, and these included members of the Portaleone family (Rabbis Abraham and Samuel mi-Sha’ar Arye), R. Mordechai Malki (1640-1702), R. Yitzhak Lampronti (1679-1756) and others (Roth 1946, 398; Carpi 1989, 96-130; Ruderman 2001a; Salah, 2007, 455-460)

1.1. Purpose of the article

This article addresses the approach of physician R. Samson Morpurgo, one of the most prominent rabbis who operated in Italy in the turn of the 17th century, to the use of non-kosher medications. Morpurgo was asked to rule on the matter of two medicines in the local medicine chest – a medicine that contained wine vinegar for treating heart disease and a medicine prepared from snakes for treating a disease called hydroken. The questions underlying the current study are:
1. What are the pathological and pharmacological foundations of the diseases and medicaments discussed?
2. In his ruling, did Morpurgo use the medical and pharmacological knowledge at his disposal or, similar to other rabbis who dealt with similar questions, did he merely make do with a discussion of the halakhic sources?
3. How did Morpurgo cope with the conflict between the ethical duty to treat the patient and the religious law forbidding consumption of non-kosher products?

The question of the kosher status of medicines in Jewish society, and mainly in its religious and traditional sectors, has considerable significance in the modern era as well. Evidence of this are the many examples located in compilations and publications of halakhic authorities in the recent generation. Although most modern drugs are produced in the chemical industry using synthetic materials, there are still some whose source materials are not kosher according to Jewish law, for example homeopathic drugs or insulin originating from pigs. Rabbi Morpurgo’s discussions of the kosher status of medicines illuminate the deliberations of modern day Rabbis and halakhic adjudicators on this issue. His words are a characteristic example reflecting the tension between the need to cure the patient, which is a sacred Jewish value, and the desire to follow the Jewish religious tenets passed along between the generations.
1.2. R. Samson Morpurgo: Rabbi, halakhic adjudicator, and physician

R. Samson Morpurgo (1681-1740) was a teacher, exegesist, poet, and scholar. Side by side with his Torah studies he also engaged in the study of wisdoms and sciences. In 1698 he moved to Padua where he studied medicine at the local university. In 1700 he was certified as a doctor and his document of certification states that he authored a book on the wisdom of medicine and a book on philosophy. Morpurgo served as a physician in Padua and also taught Torah at a yeshiva, however in 1709 he was offered a rabbinical office in the city of Ancona and he moved there.

As rabbi of the Jewish community of Ancona he acquired a reputation as an acclaimed adjudicator and questions on various subjects were addressed to him from all over Italy. He was involved in several halakhic and other debates among the rabbis of Italy and his opinion carried considerable weight (Benayahu 1978-9; Benayahu, 1979; Ruderman 2001, 213-228).

Morpurgo was also known as an expert physician proficient in his job and was well known among the gentiles as well. When an epidemic surfaced in Italy in 1730, R. Morpurgo made all efforts to save the lives of both Jews and Christians. For this action he received a certificate of appreciation from Pope Benedictus XIV (1675-1758), at the time the Archbishop of Ancona (Benayahu 1979). On the epidemic in Italy in 1729-31 see: (Cipolla 1981, 51-88). Interestingly, Morpurgo was praised by the Vatican despite the church’s decree that Jews could only provide medical care to their own people (Carpi 1989, 67).

At present, we have no access to any medical composition by Morpurgo that could shed light on his medical activities. Something of his occupation in medical matters can be gleaned from his replies included in Responsa Shemesh Tzedakah, which consists of questions and answers on the four parts of the Shulhan Arukh. The book was first printed in Venice in 1743 at the initiative of his son, R. Chaim Shabtai Morpurgo, and was received with much acclaim (Benayahu 1979).

1.3. Jewish laws of kashrut – a review

The Jewish laws of kashrut originate from the scriptures. These laws include a list of restrictions and sanctions concerning food and eating, but they have implications for the consumption of medical substances as well (Exodus 23:19; Leviticus 1:17; ibid. 7:26; Deuteronomy 14: 4-21). Beginning from the Middle Ages, a comprehensive body of rabbinical literature was written in this halakhic field. The reason for this was that until the 19th century both western and eastern medicines included considerable use of animals, for instance invertebrates, amphibians, and reptiles, the eating of which is prohibited by the Jewish laws of kashrut (Lev 2002). Kashrut-related issues involving the consumption of medicines from animal origin emerged following the use of substances produced from impure animals.
(meat, bones, horns) and their secretions, e.g., feces, urine, and milk (Jakobovits 1966, 65-66; Shemesh 2013, 522-525).

The guiding principle in many texts dealing with the laws of kashrut is that physicians must take into account the type of illness and its severity. In the case of a formidable illness prohibited medications may be used and even taken orally. When there is no risk to the patient’s life, however, the medicine may be used only if eating it gives the patient no pleasure, for example if it is unpalatable (Maimonides 2002, hilkhov Yesudei ha-Torah, 5:10-11). The question of the border line between adherence to halakhic restrictions and relinquishing them in case of illness depends on an array of specific considerations, such as the patient’s condition, the type of medication, the possibility of finding alternatives, and more (Shemesh 2013, 32).

2. R. Morpurgo’s attitude to treatment with medications that contain non-kosher ingredients

2.1. Medications that contain the wine vinegar of non-Jews

In a letter sent to Morpurgo by Solomon Abi’ad Sar Shalom Basilea of Mantua, a rosh yeshiva, kabbalist, engineer, and astronomer, he was asked about the kashrut status of a medicine recommended for a patient suffering from a heart disease (On Basilea see: Fuenn 1887; Eisenstein 1952; Simonsohn 1963, 114-115). It seems that the rabbinical sages in the Mantua study hall had deliberated on use of the medicine and when they could not reach an agreement they appealed to R. Morpurgo, considered an important and accepted rabbinical authority.

The letter carries no date but according to its contents the medicine contained several ingredients, i.e., herbs, non-Jewish wine, and lemon and citron juice. The ingredients of the medicine and their ratios were detailed in the question: “A person who has a heart disease and the doctors ordered that he should drink water made of an extract of herbs in the weight of 45 ounces (1 ounce = about 27 gr.) and six ounces of lemon and citron juice and 12 ounces distilled vinegar made from stam yeinam” (Morpurgo 1743, 78a-79a).

The main problem with the prescription recommended for the patient was the use of stam yeinam, i.e., wine produced by gentiles or that had come into contact with them. Unlike wine used for idolatrous rites (yein nesekh), which is forbidden in the scriptures, wine produced by gentiles or that came into contact with gentiles was only prohibited beginning from the rabbinical era. In the Jewish legal literature from the medieval era and early modern times, the issue of medical use of wine or wine products (vinager, liquor) belonging to non-Jews was repeatedly raised. One of the grave problems encountered by Jews in Christian Europe was that gentiles controlled the wine industry, its production and trade, a
difficulty that was even more severe in cold countries where no grapes were grown (On the prohibition of stam yeinam see Soloveitchik 2003; Soloveitchik 2008). Notably, many adjudicators prohibited the use of wine associated with non-Jews, although some places that suffered from an acute shortage of wine were more lenient, for example in the Polish border towns under the halakhic authority of R. Moshe Isserles (Rema 1971, 124; Zimmels 1958, 209-211; Katzs 1958, 36; Sperber 1991, 49-59).

As evident from the question, wine vinegar was one of the medicine’s ingredients. Wine and wine vinegar had a major role in ancient pharmacology. From a pharmacological perspective, wine had two major purposes: it served as an ingredient in medicines and as an organic solvent (in addition to vinegar, oil, and alcohol) for extracting active substances contained in herbs (Palevitch and Yaniv 1991, 32; Farhan and Tsharni 1997, 20-30). In her research, Marie-Tèreze Lorcin illustrated the highly important role of wine in many medieval medications as reflected in the following facts: of the 400 medications she examined in twelve medical compilations she found that wine was used in 120. Furthermore, in one book 31 of the 85 medications came with the recommendation to take them with wine. Assuming that these facts are an indication of general practices, wine was an important pharmacological necessity in many other medications as well (Lorcin 1999, 99-107). Lorcin indeed investigated the state of affairs up until the 15th century but it is important to emphasize that this did not change in subsequent years since the traditional composition of many medicines was maintained.

The case discussed by Morpurgo relates to distilled wine vinegar. Initial use of the distillation process is attributed to Muslim alchemists operating circa the 9th century, and by medieval times the knowledge and practice of distillation had reached the western world, whereby it became a fundamental manufacturing technique utilized in the perfume, medicine, and liquor industries. In Morpurgo’s time distillation was very common in the perfume and drug industry and this process was used to produce concentrated substances (Hassan and Hill 1986, 138-147). The distiller used for this process was called anbiq (ﻖﯿﺒَﻨَأ) in Arabic. Italian rabbis in Morpurgo’s time referred to it as lambiqo, deriving from the Arabic name (Lampronti 1798, III, 26a. See fi).

2.2. Morpurgo’s discussion of the medicine’s kashrut status
The rabbinical sages in the Mantua study hall deliberated on the question of whether the medicine is kosher, and not having reached a decision they referred it to R. Morpurgo who was considered, as stated, a senior rabbinical figure and physician. The contents of the question indicate that one group of sages decreed that the medicine should be allowed while other sages forbade its use. Those prohibiting were of the opinion that vinegar made of stam yeinam is prohibited for those who avoid it, indicating that in practice not everyone strictly adhered to the
prohibition. In our case the vinegar is not nullified within the mixture since it contains a small quantity of medicine and therefore the vinegar is considered quantitatively substantial.

Moreover, alternative medications can be found for the medical problem mentioned, and therefore it is not necessary to use this medicine of all others. In contrast, those who permitted it claimed that the vinegar is not noticeable in the extract and that the tart taste is produced by the lemons and citrons. In addition, the heart disease that afflicts the patient is a formidable illness and hence the patient’s grave condition should be taken into account, particularly in the case of a rabbinical prohibition (rather than one originating from the scriptures).

During the halakhic discourse, R. Morpurgo displays a lenient halakhic inclination and he brings several opinions, arguments, and justifications:

A. The status of distilling wine products for medical purposes is a topic discussed in previous sources. R. Yitzhak Bar Sheshet (Ribash, Barcelona 1326 – Alger 1408) discusses the preparation of a medicine by distilling herbs and wine associated with gentiles for treating patients who are not mortally ill. In practice he forbade oral use of the medicine, claiming that the original substance, i.e., the wine, is prohibited (Bar Sheshet 1878, 68b). Then again, some permitted using rabbinically prohibited drugs to treat patients even if they are not mortally ill. The Babylonian Talmud in Tractate Gittin 69b recommended that a person suffering from a “swollen spleen” be treated with a potion containing water in which non-Kosher leeches had been preserved, but not with the leeches themselves as their consumption is prohibited by the scriptures. This Talmudic source was brought in R. Mordechai Ashkenazi’s (Ashkenaz d. 1310) interpretations of Tractate Pesahim as proof that it is permissible to take a medical potion containing the ash of vermin (ha-Mordechai 1981, Pesachim, 58).

Morpurgo claims that if medicine made of leeches was permitted for treating a non-fatal spleen disease, treating a heart disease considered acute should obviously be allowed, as the heart is known to be a most central part of the human body (on the treatments of spleen diseases in the Jewish community in Early Modern Italy see Rivlin 1991, 101). Moreover, even if in the current state the patient’s life is not in danger, heart diseases might involve life endangering complications. These two justifications are based on Morpurgo’s medical knowledge of diseases and their risks.

B. There is room to allow the medication also because the taste of the vinegar is usually unnoticeable and even if in these dosages the taste is evident it is a deficient taste. Morpurgo, who appears to have been familiar with the medicine, claims that its taste is very bitter and therefore not only does the patient not enjoy it rather it arouses revulsion. According to Jewish law, only eating something tasty is forbidden and thus
in this case the prohibition does not apply. As stated by the scholars, a considerable part of ancient medicines were unpalatable and pharmacists sought ways of improving their taste, for instance by adding honey or sugar (Shemesh 2013, 499-502).

C. In conclusion, Morpurgo states that if there is an alternative kosher drug capable of bringing the patient relief it should be used, however if the patient is in danger and there is no alternative for the vinegar the proposed potion may be allowed. Morpurgo does not recommend an alternative medicine or substance for the vinegar rather he concentrates primarily on the halakhic aspect. He may have taken the approach whereby the pharmacological treatment depends on the attending physician who is closely acquainted with the predicament. It may be assumed that Morpurgo’s decision to recommend seeking a kosher alternative despite the lenient opinions he brought, derived from his familiarity with potentially beneficial medical alternatives.

As stated by Hamarneh and Levy, side by side with the manufacturing of regular medicines, an alternative medicine industry emerged in the Middle Ages, particularly to replace expensive medicines that were rare or not affordable by people with limited resources (Hamarneh 1970; Levy 1971). R. Morpurgo recommended use of these medicines not only for socioeconomic reasons but also in cases of halakhic conflicts.

3. The kosher status of medicines produced from snakes

The use of snakes for medical purposes was very common in the classical era and in the middle ages. One of the well known drugs that contained snakes, called theriac, was an anti-toxic vaccine for treating the bites of poisonous animals, other poisoning, and an array of other sicknesses. Theriac was considered a miraculous medicament with essential beneficial qualities. The medical prescriptions we know of indicate that theriac contained several basic ingredients, such as parts of snakes and scorpions, together with additional ingredients, in each place according to the customary medical traditions. For example, in the Renaissance the formula utilized by the Venetians included no less than 100 ingredients (Amar 1996, 16-28; Lev 2002, 279-280).

The question of allowing use of medicines based on snake meat was discussed in the rabbinical literature in various halakhic contexts, such as questions concerning its consumption on Passover occasioned by the hametz included in the mixture (Asaf 1929, 211; Maimonides 2002, hilkhot hametz u-mata, 4:10-11) or concerning medical usage throughout the year because the snake is an impure animal (Ibn Zimra 1882, III, 471).

A question that physician R. Yosef Baruch Cases of Mantua addressed to R. Samson Morpurgo in 1716 raised the following issue: "Whether a patient with hydropken should be allowed to eat snake meat as suggested by
another specialist, as the patient had eaten and drunk various types of medicaments for days and years but these did no good (Morpurgo 1743, 80a-81b).” The question indicates that the patient had been treated with various drugs that in practice did not improve his condition, while snake meat was considered an efficient medicine that might cure him.

Hydroken is an illness mentioned in rabbinical literature and identified by commentators and researchers with various diseases. The word originates from the Greek (υδρο = hydro) and is associated with water and it appears that it should be identified as an edema-related syndrome or Ascites (Preuss 1911, 167; Steinberg 1992, 567) Nevertheless, it is notable that the text before us contains no relevant details of the illness’ symptoms.

Morpurgo’s response is unique for its thorough analysis, including a list of medications such as the milk of a she-ass, the heart of a wolf, dog’s liver, fish, porcupine meat, while addressing the opinions of physicians from various eras and basing his halakhic decision on strict empiricism. He presents a theoretical medical introduction in which he categorizes all the medications stated by their nature. This background serves him as a means for defining and classifying snake meat with regard to its benefits and medical impact. According to Morpurgo, the medications known to the physicians are divided in three:

A. ‘General medications’ – medications with a wide range of applications that are beneficial for illnesses caused, for example, by using a medicament intended to clean the body or to fix an imbalance of the body’s humors – the white, the green, and the red.

B. ‘Specific medications’ – medications that resemble one of the body parts and are capable of treating this part. Although these medicines seem to operate as charms they are true medications and their impact has a natural basis. Only the educated can understand how they work although the explanation is obscure.

C. Charms – medications whose manner of operation cannot be grasped by the human mind, such as charms that utilize roots, leaves, herbs, stones, and metal, the bowels of beasts, animals, fowls, and fish, as well as their secretions (urine, feces). As customary with charms, they are hung on the patients’ neck or arm, for instance amulets intended to treat those suffering from fevers (ba’ale ha-kadaḥot), diarrhea (bloody stools, shilshul ha-dam), and the greensickness (hepatitis, ḥoli ha-yerakon), as well as epilepsy (mahalat ha-nefilā), and particularly the heart of a wolf for, hysteria (Suffocatio matricis, ḥenek ha-em) and many other charms (On these diseases and their treatments in medieval and early modern times see Barkai 1987, 50; Amar and Buchman 2004, 24-37; Buchman and Amar 2007, 139-144; Shemesh 2013, 652). According to the specialists these are not true medications but rather distinct charms. Hence, they are only used occasionally when they have been proven beneficial from experience.
With regard to the medical use of snakes, Morpurgo spells out for Yosef Cases several halakhic considerations that concern issues involving non-kosher medicines in general and medicines made of snakes in particular:

A. The nature of the medicine – As a rule, non-kosher medicine is permitted only when it is known to be a proven treatment or when an expert attests to its efficacy. In the case of snake’s meat, it is not a folk remedy rather it belongs to the category of general medicines, i.e., it is considered a distinct medicament whose efficacy has been empirically proven. By virtue of his work as a physician and his direct knowledge of ancient and contemporary medical literature, Morpurgo claims that this is a medication known to be beneficial for a list of sicknesses originating from disorders associated with white bile, similar to all the general medicines from the first group (Morpurgo 1743, 81b).

This is based on the doctrine of Humoralism, whereby an imbalance between the four humors might account for the emergence of illnesses. Humoralism, or the doctrine of the four temperaments, is a nutritional/medical theory originating from the Hellenistic world, utilized in Christian western and Muslim eastern medicine until the 18th century. According to this doctrine, there are four elements (earth, air, fire, and water), four personality types (sanguine, choleric, melancholic, and phlegmatic), and four humors (blood, yellow bile, phlegm, and black bile) in nature and in the human body. The humors reflect one’s temperament and nature and also influence one’s physical and mental behavior (on this theory and its application in Medieval medicine see: Talbot 1978, 391–428).

In support of his view Morpurgo invites those interested in learning about the pharmacological aspect related to snakes to review the medical literature and be informed of their significance for treating hydroken as well. This argument by R. Morpurgo is associated with a wider controversy in the Jewish world that will not be expanded on here, concerning whether and when it is permissible to use folk remedies whose effect is irrational. The dispute on this issue regards whether it is permissible to transgress a religious law when using a medication whose efficacy does not withstand the test of empirical research (Shemesh 2013, 525-538). R. Morpurgo stresses that snake-based medicine is not a charm or a conventional medicine with no healing force rather a medicine recognized by experts as efficient for the medical problem under discussion.

B. Finding medical alternatives – On principle, when possible some other kosher medicine should be sought. However, if the alternative does not work it is certainly permissible to consume snake meat (see below). Morpurgo recommends two alternative solutions: using burnt snake meat (powder) or daily consumption of poultry from chickens that have eaten snake meat. He writes: “They should ask him [=the physician] to prescribe this medicine for the patient in such a way that it shall not include anything that is prohibited and this shall be in two ways either by giving
him the snake meat roasted over the fire, i.e., *folvora vipirina* [=snake powder, viper = snake] or by making certain that his regular diet includes poultry from chickens and swans that have been fed snakes” (Morpurgo 1743, 80b).

The logic behind burning the snake or using chickens that fed on snakes is to circumvent the halakhic prohibition. According to Jewish law, the meat of an animal that has been burned made be used for medical purposes as it is considered ash (Karo 1594, 84:17). In the same way, there is no halakhic problem with eating chickens that fed on snakes and they naturally consume invertebrates as well and this does not render them non-kosher. Morpurgo was aware of the fact that using snake meat in its natural form is more efficient from a medical point of view than the two alternatives suggested, as the active substances it contains are more concentrated. Hence, he raises the option of giving the patient the alternative medicine a large number of times to increase its effect.

**C. Severity of the illness** – *Hydroken* is defined as a grave illness, and therefore it is fundamentally permissible for patients whose life is in danger to consume the medicine, even orally. If adding bitter ingredients or those with a deficient taste might make it difficult to take the medicine (although making it easier for the laws of kashrut) or weaken its strength, the patient may take it as it was intended. Namely, no effort should be made to solve a halakhic problem if this will detract from the healing power of the medicine and harm the patient’s health. In this case, the patient’s life has priority over the religious value, although the latter has significance in its own right.

**D. The patient’s medical history** – It is necessary to take into account the medical process to which the patient was subjected. In the case before us, the patient tried to receive treatment for his illness over a long period by using kosher alternatives, but this did not prove effective. Since snake meat is recommended as an efficient medicine for people with *hydroken*, his suffering should be taken into account and no further search should be make for kosher medicines with little or doubtful benefit.

4. Discussion and conclusions

In 18th century Europe medical practices often still followed theories originating from classical and medieval medicine. In addition, medicaments produced from plants, minerals, or animals, such as snake meat, were commonly used to treat a wide range of illnesses. These was the pharmacological circumstances underlying R. Morpurgo’s two responses concerning the distilled essence of wine vinegar and medicine made of snake meat.

The two questions that Morpurgo was asked by the Italian rabbi and physician put the boundaries of halakha to the test concerning the nature
and essence of non-kosher medicines. The question regarding distilled wine vinegar attempts to clarify whether according to halakhic rules non-kosher medical substances that are transformed in the process of their production become permissible or not. Some claim that its original taste is no longer noticeable and it should be allowed, while others argue that since the vinegar constitutes a substantial part of the medicine it should be considered a significant ingredient.

In the case of the snake medicine, the question investigated was what criterion makes it possible to allow oral use of a prohibited medication. Is any medicine permissible even if of doubtful efficacy? Is a folk medicine that operates irrationally permissible or perhaps only medicines that operate in a rational-empirical manner? As a conventional physician, Morpurgo’s approach is that medicines known to be efficient and recognized by physicians from personal experience are permissible, although even in this case it is best to try and avoid use of non-kosher medicines.

Many adjudicators deliberated on when non-kosher medicines should be avoided and when not, but R. Morpurgo appears to have a unique fundamental approach – medicines whose use involves a halakhic conflict should be avoided as much as possible and whenever possible. It seems that his was not a radical strict approach that disregarded reality, rather on the contrary, his approach derived from thorough medical knowledge and rich experience with the care of patients.

On a personal note, Morpurgo relates how he responded to such questions and deliberations during his service as a physician traversing Italy: “I made a deal with myself from the day I began to engage in medicine, not to prescribe things that are forbidden for patients because I do not wish any sin on them or on myself. As I know that of all the sicknesses that emerge there is none that depends on only one single medicine, a medicine that has the exclusive ability to cure the patient from his illness. On the contrary, I have found and seen in all the books of the physicians […] that each illness has many cures, so many that they are virtually uncountable” (Morpurgo 1743, 80b).

Namely, although there is a halakhic basis for permitting use of a medicine, for instance snake meat, Morpurgo believes that since alternative kosher medications that are medically efficient can be found for many illnesses there is no justification for allowing use of a non-kosher medicine (Morpurgo 1743, 80b). Hence, in the case of the snake medicine he offers creative halakhic solutions to circumvent the problem of its kosher status, for example consuming the snake in a burnt state or feeding chickens snake meat. Nonetheless, he stresses that any “halakhic solution” that involves an alternative medicine that will delay the patient’s full treatment should be rejected.

The two answers before us emphasize the two aspects of Morpurgo’s personality. On one hand, he was a man of religion subject to the laws of
halakha and on the other, a man of medicine who had a moral duty to treat his patients wholeheartedly. According to Morpurgo’s outlook, providing the patient with proper medical care and consideration for the dictates of halakha are two intertwined and interrelated aspects. The condition of a patient whose life is in danger might have the effect of reducing the halakhic restrictions while, on the other hand, halakha has the power to determine or intervene in manners of treating patients whose life is not in danger. Sometimes the authority of Jewish law and medical needs clash and form a moral-religious conflict. In such cases, Morpurgo is of the opinion that preference should be given to halakha, although in some cases the need for medical action has the upper hand and overrides the restrictions posed by Jewish law, as ultimately the patient’s health is valued above all else.

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Therapy vs. Jewish Halakic Principles


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