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Ancient Hunger, Modern World

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Abstract: This paper explores historical evidence of restrictive eating, as well as bingeing and purging in the ancient world from 3100 BC to around 476 AD in order to draw comparisons with contemporary restrictive and binge eating disorders — namely, anorexia nervosa and bulimia nervosa. It aims to analyze the causes of disordered eating over time with regard to societal norms and attitudes, examining the ways in which these disorders diverge between the ancient and modern worlds. Principally, this paper asserts that differences in the significance of body image on a societal level account for distinctions in the motivations of disordered eating within the ancient and modern worlds. There are, however, key parallels to behaviors that women exhibit with regard to disordered eating that can be attributed to the continuity of patriarchal structures between these two time periods.

Keywords: Ancient Rome, binge eating, eating disorders, anorexia, patriarchy

As the Christian practice of Lent begins, it is common to hear of fasting or “giving up” foods as a way of honoring Jesus Christ’s forty-day journey in the desert. Despite Lent involving a blatant restriction of food, we do not consider this practice to be a form of disordered eating. Why not? The frequency of eating disorders has increased almost exponentially in the last 20 years (Galmiche 2019, 1408). Body image and diet culture are some of the most prominent social issues that relate to food in western societies. One of the most ubiquitous topics in relation to these issues is the emergence of eating disorders. Sir William Gull formally recognized anorexia nervosa in the late 19th century and Gerald Russell followed with a formal declaration of the bulimia disorder about 100 years later (Gull 1873; Russell 1979). However, since virtually the beginning of recorded history, people outside of the medical field have documented occurrences of behaviors that match the diagnosis of both anorexia and bulimia. This paper analyzes these occurrences over time and investigates the similarities and differences between disordered eating tendencies including restriction, bingeing, and purging in the modern and ancient worlds, emphasizing the social conditions under which those tendencies are rooted and maintained.

It is important to note that in analyzing the ancient world, this study refers to sources from urban societies that existed between 3100 BC to 476 AD. As for the modern world, this paper limits itself to western, educated, industrialized, rich, and democratic societies as these are where researchers find the most evidence of disordered eating (Makino 2004). I argue that broad differences in cultural tendencies account for the divergent causes of disordered eating between ancient and modern worlds. However, the continuity of patriarchal structures in ancient and modern societies explains why eating disorders impact women more than men both today and in the past. Moreover, I explore how these findings have the potential to aid in the treatment and prevention of eating disorders in the present day.

At the most foundational level, eating disorders in the ancient world and modern day diverge as a result of differences in societal structures. Namely, societies can be placed on a gradient of two

classifications: chthonic societies, whose members tend to accept natural connections to biology, or apollonian societies, which normalize the rejection of humans' natural connection to human biology (Bemporad 1996, 235). The affluent, industrialized societies of the modern world have become progressively apollonian since the time of the ancient Greeks (Bemporad 1996, 235). The increasingly apollonian nature of modern societies heightens the internal conflict between our connection to our biological nature and emphasizes the dominance of culture over biology (Bemporad 1996, 235). Eating disorders are a way of expressing this conflict, and the psychopathological aspect of eating disorders is integral in conveying this dissension.

For the purposes of this paper, psychopathology will be defined as the mental trauma — whether related to body image, autonomy, or societal pressures—associated with eating disorders. Exemplifying this component, Driscoll (1997) offers, “... the recent fascination with the body ... may be related to ‘our sense of the demise of the body as we have known it’; we are nostalgic for a world in which the boundaries between nature and culture are clear” (92). As such, the body serves as a stage to display the strife between culture and biology. In this way, anorexia is intended as a protest against biology, yet ultimately ends up normalizing unrealistic body standards for women (Driscoll 1997, 97). Particularly, the psychopathological aspect of eating disorders dictates that an individual should aspire to an ultra-thin ideal.

This ideal serves as a physical manifestation of the internal conflict inherent to apollonian society. That is, “... an ultra-thin body is seen as elegantly feminine and simultaneously a rejection of traditional female attributes” (Bemporad 1996, 235). The author supports the idea that the “elegantly feminine” body rejects our natural connection to biology, which is represented by “traditional female attributes,” thus displaying this internal conflict. Moreover, this provides an explanation as to why eating disorders are often considered a more recent phenomenon. After all, ancient societies had less food stability, and, in general, restricted the lives of women to a greater extent than modern, industrialized societies. These factors often served to reduce women to their biological capacities,

thus reinforcing the chthonic parallel between cultural expectations and natural biology. Accordingly, the psychopathological aspect of eating disorders was not present in ancient societies.

The frequency of disordered eating in modern, wealthy, industrialized societies reflects the increasingly apollonian nature of these societies, in which stable access to resources diminishes the pertinence of humans' biological needs in regard to food consumption. As aforementioned, a formal declaration of anorexia nervosa was made in 1873 by Sir William Gull, who characterized the disorder as a voluntary emaciation, commonly practiced among women with the goal of attaining a certain degree of thinness (Gull 1873, 498). In contrast, psychiatrist Gerald Russell (1979) described the criteria for binge eating disorder as: "(i) an irresistible urge to overeat (bulimia nervosa), followed by self-induced vomiting or purging" and "(ii) a morbid fear of becoming fat" (429). Today, it is estimated that 1% of American women suffer from anorexia nervosa, and between 2-5% of Americans suffer from binge eating disorder (Weltzin 2004, 42). The relationship between body image and disordered eating in general indicates that an integral part of these eating disorders is their psychopathological aspect. This fear over the prospect of obesity can be attributed to an increase in apollonian tendencies among modern societies. The aspiration for thinness and the fear of gaining weight serve as attempts to reject natural biology. Thus, eating disorders demonstrate an internal conflict between conforming to societal ideals and fulfilling bodily needs. From this, we can infer that readily available food sources allow for the emergence of eating disorders as a form of resistance.

Restrictive eating in ancient urban and largely chthonic societies mainly manifested itself through religiously motivated fasting. The first recorded case of voluntary emaciation was the result of a religious demonstration in 382 AD (Docx 2016). Beyond this, research has shown a correlation between the increasing popularity of fasting and the emergence of Christianity in Rome (Bemporad 1996, 220). In these accounts, women "refused to eat or drink because they were thought to have been possessed by the devil" (Bemporad 1996, 221). We are able

to draw some key parallels between fasting in the ancient world and anorexia nervosa. In both cases, the refusal to eat is a conscious decision (Bemporad 1996, 224). However, it is important to note that fasting to the point of emaciation was not considered to be a disorder like anorexia nervosa, but rather the extreme form of a religious practice. This parallels common perceptions of religious fasting today, as we do not categorize fasting as a form of disordered eating. Furthermore, the number of recorded fasts going to this extreme are relatively scant, thus suggesting that such occurrences were exceptions rather than the norm. This reflects the fact that restriction to the point of emaciation was less frequent and normalized in ancient society.

On the contrary, instances of binge eating and purging in the ancient world were more thoroughly recorded, especially in cities such as Ancient Rome. Two of the most notable examples from Ancient Rome center on the emperors Vitellius and Claudius who were notorious for their binge eating and purging practices. Historian Suetonius writes that “Above all, however, he [Vitellius] was ... always having at least three feasts, sometimes four in a day — breakfast, lunch, dinner, and a drinking party — and easily finding capacity for it all through regular vomiting” (Suetonius, Vit, 13). Similarly, the emperor Claudius was infamous for never leaving a meal until overfed, after which a feather was placed in his throat to stimulate his gag reflex (Suetonius, Claud, 33). In his writing, Suetonius takes on a disapproving tone when describing the eating habits of Claudius and Vitellius, as highlighted by the use of words such as “luxury,” “cruelty,” and “stuffed” (Crichton, 204). This tone indicates that although binge eating and purging were accepted, albeit uncommon in Roman culture, the practices were negatively associated with gluttony and a lack of self-control. Although the exact impetus for such instances of bingeing and purging in ancient society is not made explicitly clear, it has been suggested that it was a method of detoxifying the body (Goh 2018, 439). Thus, these exemplary occurrences of bingeing and purging from early Roman society do not immediately exhibit the psychopathological aspect inherent to contemporary eating disorders—that is, the aspect related to body image or a rejection of biology. As such,

it makes sense that disordered eating practices would not be limited to women, as the societal pressure to reject one's biology did not exist as a prominent cultural feature.

It is worth noting that such cases of disordered eating by male figures — although common in Roman society — are relatively scarce within the study of disordered eating as a whole (Bell, 1985). Given that Roman society was largely chthonic as a result of a lack of political and resource stability, there existed a significant power imbalance between its male and female constituents (Martos, 10). Therefore, we see examples of bingeing and purging among men because men dominated positions of power, and as a result, we generally have more extensive records of their lives. There were likely cases of bingeing and purging among women in Ancient Rome, but since women were not typically in the limelight, we are lacking in historical records that document these cases. However, the research that exists has shown that disordered eating was becoming increasingly prevalent among women in the ancient world.

Ancient cycles of binge eating and purging share many of the same characteristics as bulimia in the present day. However, they differ in terms of underlying motivations. Centrally, the practices of bingeing and purging reflect Greek and Roman cultural norms, including that "... gluttony and frugality serve as a measure of a person's moral standards" (Thumiger 2018, 476). Moreover, in this context, purging was considered a sort of moral and physical cleanse (Goh 2018, 439). This provides insight into the notion that eating habits in the ancient world were associated with particular societal pressures, such as aligning one's body to one's moral standards. However, it seems that those pressures to conform to ancient societal norms did not constitute a protest against one's natural biology. Only through the more contemporaneous shift towards globalization and industrialization do we see the emergence of psychopathological eating disorders. Moreover, although there were some cases of bingeing and purging, they were not common — a point which further indicates that ancient binge and purge practices were not associated with a societally-influenced psychopathological aspect like that which disordered eating has today (Chrichton, 205).

To summarize, the most integral difference between disordered eating in the ancient and modern worlds is the increased prevalence of psychopathological components in disordered eating over time with the shift towards apollonian culture. In the modern day, this psychopathological component has manifested itself in body image, often including an aspiration for thinness. To understand the origins and root causes of eating disorders in the modern day, it is integral to understand the shift in perceptions of different body types in the ancient and modern worlds. This analysis allows us to better understand why disordered eating in these ancient societies that displayed typical chthonic characteristics did not exhibit a comparable aspiration to thinness, and how these differences reflect the chthonic and apollonian characteristics of a given society.

Despite lacking a psychopathological component, there were relatively strong associations made between a person's character and body type in the ancient world — specifically in and near Rome where the most recorded instances of disordered eating took place. For example, it was said that Vitellius' bingeing and purging practices were a reflection of his greedy and voracious character (Bradely 2011, 2). The Romans' negative perception of Vitellius was not the only example of poor character traits being associated with overweightness in the ancient world. In the broader sense, body weight was considered a reflection of an individual's socioeconomic status (Bradley 2011, 3). Expanding upon this, there was a clear association between body size and the perceived economic success of the individual. This distaste for gluttony and overweight individuals was well documented, with individuals who overate being referenced as follows: "... they fill that organ beyond what is needed; it is persons of especially slavish nature ..." (Steiner 2002, 300). Exemplifying this stereotype, a prime example in Roman literature is Erysichthon who was cursed with insatiable hunger after angering the gods. The myth stated that he "[e]xhausted his ancestral wealth, but still Hunger was unexhausted and the flame Of greed blazed unappeased ... there remained His daughter, undeserving such a father. Her too he sold" (Ovid, 1979). The underlying attitude in these lines is that gluttony itself

is a vice. Between the poet describing Erysichthon wasting his wealth and selling his own daughter, it is clear that Erysichthon's insatiable hunger is not only viewed as immoral, but also damaging to Erysichthon's ability to make reasonable decisions and act as a caretaker. The general sentiment of fat as a vice is perpetuated within the works of academics and philosophers of the time.

In a comparable manner, the philosopher Lucilius claimed that fat would damage the mind (Seneca, Letter 15). Similarly, Roman society equated laziness with larger bodies (Thumiger 2018, 485). At first glance, it may seem that in Rome fat was a symbol of gluttony and a negative indication of a person's character. However, these negative perceptions of fat are at odds with the fact that quite often, wealth and power equate to a larger body within the ancient Mediterranean (Bradley 2011, 2). Furthermore, given the negative perceptions of fat, we expect to see positive perceptions of thinness, however, this was not necessarily the case; rather, "Latin terms for 'thin' normally implied, like Greek terms, a state of poverty and a lack of strength and substance" (Bradley 2011, 7). Moreover, thinness was also associated with being at odds with a moral life (Thumiger, 2018, 479). It seems that, interestingly, the body type that corresponded with the ideal character were bodies that were perceived as neither excessively thin nor fat. That is, both over- and under-eating violated societal ideals of self-control.

Given that the ideal body type was neither one extreme nor the other, disordered eating did not stem from an accompanying societal pressure to attain a specific or exclusive body type. This is rooted in the fact that ancient Mediterranean societies were typically more chthonic due to deeply established gender inequities and resource instability. This, in turn, meant embracing humanity's natural connection to biology, including hunger and fullness cues. Thus, the chthonic attributes of these ancient Mediterranean societies meant that the ideal body type was the average body and therefore explains why disordered eating was less common and had little to no accompanying psychopathological aspect.

In contrast to urbanized ancient societies, which displayed typical chthonic attributes, thinness is associated with wealth and power, while

larger bodies are associated with low socioeconomic standing as well as laziness within the modern-day United States (Saguy 2010, 231). While we see some similarities with regard to the negative perceptions of fatness in the ancient and modern worlds, a key difference is that the social ideal is never associated with larger bodies in modern societies. Moreover, the degree to which negative perceptions of character are associated with fat while positive are associated with thinness exists to a greater degree in modern-day as “... the media predominantly attribute overweight to bad individual choices and tend to treat binge eating disorder as ordinary and blameworthy overeating” (Saguy 2010, 231). The apollonian nature of our society explains the extent to which we connect a person’s character to their physical attributes. Particularly, this aspiration for thinness serves as a rejection of traditional femininity, and through this, a rejection of the connection to biological nature. Eating disorders provide a method of attaining this extreme thinness, which explains why disordered eating in the modern day has a psychopathological component. The apollonian nature of society and its corresponding expectations call for thinness as the ideal and demonize fat. The media perpetuates these ideas, which reinforces the psychopathological component of eating disorders inherent in conforming to these standards.

The greatest similarity between disordered eating in these ancient societies and modern-day stems from the fact that restrictive disordered eating — specifically anorexia — is largely a gendered experience. While the pressures inherent to society differ based on that society’s position on the chthonic and apollonian scale, we see that disordered eating behaviors persist across ancient and modern cultures (Wiederman 1996, 302). However, the same cannot be said for binge eating disorder and bulimia, which can be attributed to the fact that the lack of women in power made records of gendered accounts of bulimic tendencies uncommon. The biological pressures are greater on women due to their reproductive capacities. Correspondingly, in apollonian societies, these reproductive potentials mean that women face a greater conflict between the biological and cultural elements. This is manifested as the regulation of women’s food intake and general body image which “... have served as the basis for

the expression of female needs or of female psychopathology” (Bemporad 1996, 233). At the same time, these societies were more masculinized, leading to the false notion that eating disorders among women were less common (Bemporad 1996, 233-234). Despite this, the emergence of food restriction is more common among women in the ancient world (Wiederman 1996, 302). It can be inferred that this is a result of larger pressures on the female population, although these pressures may not be specifically apollonian. That is, societal structures of the Middle Ages tended to restrict and limit women to child-rearing and caring roles, which is the antithesis of an apollonian society (Bemporad 1996, 234). Despite this, we see restrictive eating occurring among women. Although this cannot be attributed to the rejection of natural biology, we see that it is possible that disordered eating can emerge as a result of other external expectations, such as expressions of religiosity.

Given that women have both a greater reproductive role than their male counterparts and that society tends to put higher pressure on female members of society, it should come as no surprise that disordered eating is more prevalent in women. The emergence of these disordered eating tendencies is undoubtedly linked with the biological processes of sexual maturation, in that severe dietary restrictions can lead to delayed puberty and amenorrhea (Wiederman 1996, 301). Here, it is the precedence of these biological processes, which are closely linked to gender, that we see exacerbating disordered eating habits. Moreover, these incidences of disordered eating among women have been one of the few constants of disordered eating between the ancient and modern worlds. As disordered eating largely emerges as a result of cultural practices, it should thus follow that disordered eating disproportionately affects women.

Acknowledging restrictive eating disorders as a gendered experience is integral in treating eating disorders in the present day. Knowing that the prevalence of eating disorders is significantly higher among the female population means that treatment can be tailored to address this through increased attention and monitoring of eating habits among women, as well as proactive prevention tactics within spaces populated by women. We have seen that disordered eating on the whole

persisted among men and women in the ancient and modern worlds despite the differences in societal and cultural pressures and expectations. This leads us to conclude three central themes with regard to disordered eating in the ancient and modern worlds, and the relationships between the two.

First, the root causes of disordered eating today and in ancient times are very different. In practice, however, disordered eating looked remarkably similar. Notably, the presence of the psychopathological aspect in disordered eating today was not nearly as notable amongst disordered eating seen in ancient urbanized societies. This, in turn, indicates that disordered eating in these societies was not a result of aspirations to thinness or any ideal body image, but rather was due to a variety of other causes, such as appeals to health or religiosity. From this, we conclude that in the treatment or identification of eating disorders, it is necessary to look at the bigger picture with regards to the classification of a given society to understand how to prevent and remedy disordered eating.

Second, disordered eating occurs as a result of societal pressures, so we can predict its emergence by looking for key trends in a society. The most notable example discussed in this paper is that body image was not a significant contributing factor for disordered eating in ancient societies in the way that it is today. As a result of these contemporary societal pressures, there exists an internal conflict within apollonian societies between societal expectations of cultural precedence and our own connection to our biology. Eating disorders provide an outlet to display this conflict, whereby one rejects biology by aspiring to unattainable thinness. Thus, disordered eating, at its core, is not only connected to human biology, but our perception of and relationship to our biology as well. This is a result of the changing connection between biology and societal pressure as the product of disordered eating habits. In particular, we have seen that disordered eating has persisted under both chthonic and apollonian societies. Yet, we see that as we move towards the modern era, the shift to apollonian society has brought with it the psychopathological aspect of eating disorders, particularly among women. Specifically, we

have seen that disordered eating was less common in the ancient world, and even when present, was not closely associated with body image and self perception. In contrast, the increasingly apollonian nature of societies means that the most common eating disorders today are accompanied with an aspiration to attain a specific body image.

When we consider how we can prevent, or at least identify, the triggers for eating disorders, it seems we must consider a combination of the degree to which the society echoes apollonian attributes, as well as other external contributing societal pressures. The conditions in which eating disorders arise evidently differ from society to society. Nevertheless, one thing is certain: it is indeed the apollonian societal pressures that cause disordered eating to emerge alongside a psychopathological component. Currently, these societal pressures present themselves on the body, and in particular, the female body. In essence, when approaching eating disorders today, we must understand that those suffering from eating disorders will remain subject to the process of objectifying and critiquing their body. We can understand that this conflict has remained a continuity within the span of ancient and modern worlds.

Ultimately, disordered eating is a disease that countless people suffer from. I hope that through future research that continues this investigation into the roots of disordered eating, we are able to come to a better understanding of what specific aspects of apollonian societies lead to eating disorders.

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