

Cassiodorus and Ancient Medicine: From Institutional Patronage to the Birth of Western Monastic Medicine: Was Cassiodorus a Physician?

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[Doi:10.19044/esj.2026.v22n26p1](https://doi.org/10.19044/esj.2026.v22n26p1)

Submitted: 12 August 2026

Accepted: 17 September 2026

Published: 30 September 2026

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Cite As:

Fiorenza, E. (2026). *Cassiodorus and Ancient Medicine: From Institutional Patronage to the Birth of Western Monastic Medicine: Was Cassiodorus a Physician?*. European Scientific Journal, ESJ, 22 (26), 1. <https://doi.org/10.19044/esj.2026.v22n26p1>

Abstract

Flavius Magnus Aurelius Cassiodorus Senator (Squillace, c. 485/490 – Squillace, c. 580) occupies an ambiguous place in the historiography of medicine: invoked for over a century as a “precursor” or even as a “physician” of Western monastic medicine, he never practised the medical art clinically, but was, first as an imperial official and later as a monastic founder, its most effective cultural mediator between late antiquity and the Middle Ages. Grounded in a critical engagement with the Cassiodorian sources (*Variae*, *Institutiones*) – consulted here through the transcriptions and translations offered by the secondary literature rather than directly in their critical editions – and in a comparison between mid-twentieth-century Calabrian historiography, recent scholarly literature, and standard biographical reference works, this article reconstructs in four chapters the trajectory that runs from the institution of the *Comes archiatrorum* to the formation of the medical library at Vivarium, arriving at an updated historiographical assessment of the vexata quaestio “Was Cassiodorus a physician?” It is argued that the most defensible formula, already proposed by second-half-twentieth-century historiography, is that of a “competent expert and patron” of medicine, while his most significant historical contribution remains institutional, bibliographical, and organisational in nature.

Keywords: Cassiodorus; Vivarium; monastic medicine; Institutiones; Comes archiatrorum; Salernitan medical school; history of early medieval medicine

1. Introduction

Historiographical and Methodological Premise

The name of Cassiodorus appears in every survey devoted to the origins of Western monastic medicine, yet it almost always appears as a recurring formula rather than as the object of an autonomous critical inquiry. Mid-twentieth-century Calabrian historiography, which engaged with the subject earlier than other traditions because of the obvious municipal connection with Squillace, had already grasped the difficulty of situating his figure within the usual categories of the history of medicine: Francesco Russo, in the chapter that opens his study of Calabrian physicians and veterinarians between the sixth and fifteenth centuries, reports that Adalberto Pazzini, while placing Cassiodorus' name at the very beginning of the history of medieval Calabrian medicine, at the same time defined him as "neither a physician nor a monk," a judgment that Russo himself regards as partly in need of revision as concerns Cassiodorus' monastic status, but which leaves untouched the question of his medical profession (Russo, 1962, p. 11).

Six decades later, more recent Calabrian medical-historical scholarship offers an apparently opposite reading, insisting on the continuity between the patronage of medicine exercised by Cassiodorus as a high Ostrogothic official and the later foundation of Vivarium, to the point of employing, in more popular venues, the expression "physician-monk" to describe him (see, as an example of the success enjoyed by this formula in contemporary Calabrian publications, the report of the conference "At the Dawn of Monastic Medicine," held in Reggio Calabria in May 2022: *MediterraneiNews*, 2022; Focà, 2020).

This oscillation between "neither a physician" and "physician-monk" is not merely a lexical problem. It reflects a broader tension, typical of the historiography devoted to figures who bridge late antiquity and the early Middle Ages, between two legitimate but not always reconciled requirements: on the one hand, the need to restore to Cassiodorus the role he actually played in the history of the transmission of ancient medical knowledge to the Latin West; on the other, the risk, particularly present in celebratory or regionalist publications, of projecting onto a late-antique official and man of letters professional and institutional categories (the "physician," the "monk" in the strict canonical sense) that belong to a later age and that the Cassiodorian sources do not straightforwardly authorize. It is no accident that the most authoritative entry devoted to Cassiodorus in the *Dizionario Biografico degli Italiani*, written by Arnaldo Momigliano, notes that there is no proof that he ever became a monk in the proper sense, still less that he was abbot of the

cenobium he founded, since in the *Institutiones* he consistently addresses the monks of Vivarium as a group to which he does not formally belong, referring to it as "*monasterium vestrum*" rather than "*nostrum*" (Momigliano, 1978). If, then, even the title of "monk" requires such philological caution, the title of "physician" requires it all the more.

The present contribution sets out to reconstruct, with historical-critical method and without yielding either to hagiographic temptation or to reductionism, the relationship between Cassiodorus and ancient medicine, clearly distinguishing three planes that historiography sometimes tends to superimpose: the institutional and political plane, concerning the role Cassiodorus played as a high official of the Ostrogothic kingdom in the public promotion of the medical art; the cultural and bibliographical plane, concerning the formation of the Vivarium library and the inclusion within it of a corpus of Greek-Latin medical texts; and the properly historiographical plane, concerning the way in which later tradition – from the Salernitan medical school to contemporary Calabrian publications – has, at different times, constructed the image of a Cassiodorus who was a "precursor" or "founder" of monastic medicine.

The primary sources of reference are the *Variae*, the collection of official correspondence drafted by Cassiodorus as quaestor, magister officiorum and praetorian prefect at the Ostrogothic court, and the *Institutiones divinarum et saecularium litterarum*, the encyclopaedic manual composed for the monks of Vivarium around the middle of the sixth century. These sources have not been consulted directly in their critical editions, but through the transcriptions and translations provided by the secondary literature used here, in particular Russo (1962) for the letter *Variae* VI.19 and Focà (2020) for the passages of the *Institutiones* concerning medicine; every citation of a primary source should therefore be understood as mediated by these editions, and treated, philologically, with the caution due to a second-hand source. To these is added the secondary literature: the chapter devoted to Cassiodorus in Francesco Russo's volume on Calabrian physicians (Russo, 1962), which remains the earliest and most analytical of the sources available here; Alfredo Focà's more recent contribution on the prolegomena of monastic medicine at Vivarium (Focà, 2020), which considerably broadens the documentary framework but, precisely because of its erudite-popular register, requires more stringent critical scrutiny; the biographical entry by Arnaldo Momigliano in the *Dizionario Biografico degli Italiani* (Momigliano, 1978), used here as an independent historiographical check; and finally, for the historiographical context concerning Cassiodorus' historical works and their chronology, the recent critical edition of the *Chronica* edited by Alessandro Sassoli (Sassoli, 2025), which, although not directly addressing the medical theme, offers an up-to-date and philologically controlled picture of

Cassiodorus' biography and chronology, useful for anchoring the phases of his career historically.

The article is organized into four chapters, without further internal subdivisions. The second chapter reconstructs Cassiodorus' role as an official in the institutional promotion of medicine, with particular attention to the office of Comes archiatrorum and to the celebrated letter *Variae* VI.19. The third chapter examines the formation of the medical library at Vivarium and the relationship, within the *Institutiones*, between theoretical knowledge and charitable practice. The fourth chapter proposes a historiographical assessment of the question "Was Cassiodorus a physician?", reconstructing the lines of transmission toward the Salernitan medical school and critically discussing the various interpretive formulas proposed by historiography, from Pazzini to Russo down to the most recent Calabrian publications.

It should be stated clearly, at the outset, what this contribution adds to a question on which Russo (1962) and Momigliano (1978) had already reached largely sound conclusions. The novelty proposed here is not evidentiary but synthetic and terminological: the article brings together, within a single explicit methodological framework, judgments that in Russo and Momigliano remain scattered across different concerns (respectively, medical competence and monastic status), separates them more sharply from the popularising "physician-monk" formula that has since gained currency in regional literature, and tests Focà's (2020) more recent and more expansive reconstruction against that earlier, more cautious baseline. In this sense the article is best described as a work of critical systematisation and disambiguation rather than as the discovery of new evidence or a new interpretive thesis.

2. Cassiodorus the Official: The Institutional Promotion of Medicine Before Vivarium

Flavius Magnus Aurelius Cassiodorus Senator was born at Scyllacium, present-day Squillace, on a date that can be placed between 485 and 490, as Arnaldo Momigliano indicates with philological caution on the basis of the traditional computation that sets his birth some twenty years before his assumption of the quaestorship, datable to around 507 (Momigliano, 1978); this dating, more cautious than the 480-575 range still used by mid-twentieth-century handbooks (Russo, 1962, p. 9), is today the most widely accepted in the scholarly literature and is confirmed also by the biographical summary offered by Focà (2020), who places his birth at "Scolacium, c. 485" and his death at "c. 580." He belonged to one of the most prominent patrician families of Bruttium, with a great-grandfather who had defended the region from a Vandal raid and a grandfather sent on an embassy to Attila; his father had already held high financial and administrative offices under Odoacer, before

passing over, together with the entire province of Sicily that he governed, to the side of Theoderic (Momigliano, 1978). It is within this context of hereditary public service that the career of the young Cassiodorus is to be situated: adviser to his father, the praetorian prefect; quaestor around 507; ordinary consul in 514; magister officiorum from 523 – an office in which he succeeded Severinus Boethius, whose fall and execution he was unable to prevent – and finally praetorian prefect from 533 to 537, under kings Athalaric, Theodahad and Vitiges (Momigliano, 1978; Sassoli, 2025).

It is precisely within the framework of this long administrative career, and not in the later monastic season, that Cassiodorus' first and most direct contribution to the history of medicine must be placed: the institutional promotion of the medical art as a public function of the Ostrogothic state. The sources agree in attributing to him, in the years when he held the highest offices of the royal chancery, the restoration of the office of the *archiatri* and the institution of the office of *Comes archiatrorum*, destined to become the supreme authority in medical matters throughout the legislation of the time (Russo, 1962, p. 10). This is a datum of no small significance for the history of late-antique health institutions: at a time when, as Russo notes (1962, p. 11), the social standing of the medical profession was still "too humble" relative to its function, the creation of a magistracy specifically devoted to the governance of medicine represented a significant advance in the public organization of health care in the Gothic kingdom of Italy.

The best-known testimony to this commitment remains the letter *Variarum*, book VI, epistle XIX (Russo, 1962, p. 10), which in the manuscript tradition constitutes the formula for the investiture of the *Comes archiatrorum*. It should be recalled, following Momigliano's analysis (1978), that books VI and VII of the *Variae* do not collect Cassiodorus' personal correspondence, but rather formulae – official models of letters prepared for investiture in the various offices of the state, plausibly drafted before his withdrawal from public life in 537 and intended for repeated use in the chancery. This circumstance does not diminish the value of the testimony, but clarifies its nature: it is not a private reflection on medicine, but a chancery text designed to justify publicly, before Gothic-Roman society, the prestige that was to be attached to the medical office. Precisely for this reason the formula is all the more significant on the cultural-historical plane: it shows how, in the Ostrogothic administration of the early sixth century, it was thought necessary to justify in elevated, almost panegyric terms the authority granted to public physicians.

In the text of the formula, Cassiodorus defines medicine as "*inter utilissimas artes*," among the most useful arts granted by divine providence to sustain the indigence of human frailty, capable of assisting those in danger from illness with a solicitude compared to that of a mother, and of fighting

pain precisely where neither wealth nor social rank can bring relief (Latin text reported in Russo, 1962, p. 10). The letter goes on to recommend that physicians be held in consideration for the safety of all, that after their studies they be called "magistri," and that they take delight in reading the classics, since – the formula concludes, in a maxim that enjoyed considerable success in the later tradition – no one reads with greater assiduity than one who deals with human health (Russo, 1962, p. 10). The same text, Russo further notes (1962, p. 12), contains a passage of considerable interest for the history of medical semeiotics, alluding to the ability of the expert physician to recognize the internal signs of disease from the pulse and from urine, a passage that local historiography has wished to connect with the later developments of semeiotics in the Salernitan medical school.

On this point, however, an overly direct extrapolation must be avoided. The Cassiodorian formula, elaborate as it is, contains no technical clinical indication, nor does it presuppose specific professional competence on the part of its author: it belongs rather to the rhetorical genre of the *laudatio artis*, well attested in late-antique encomiastic tradition, and should be read as testimony to the symbolic value attached to medicine within the ideology of Gothic-Roman power, rather than as proof of Cassiodorus' personal medical competence.

This does not mean that the institutional initiative – the restoration of the office of the *archiatri* and the creation of the *Comes archiatriorum* – lacked real consequences for the organization of the medical profession in Italy: it laid the administrative groundwork on which, generations later, the charitable experience of the monasteries would be grafted.

3. Vivarium: Library, Scriptorium, and Medical Knowledge Between Theory and Practice

The second phase of Cassiodorus' biography relevant to the history of medicine opens after his withdrawal from political life in 537, and in particular after his long sojourn in Constantinople – datable approximately between the mid-540s and 554 – during which Cassiodorus matured what his own works describe as a "conversion" toward religious studies (Momigliano, 1978). Having returned to Calabria around 554, with a substantial library brought from Ravenna and Constantinople (Focà, 2020, p. 5), he founded on his estate at Squillace the monastic complex known as Vivarium, flanked by a hermitage on the nearby Monte Castello reserved for eremitic life: the designation "monasterium Vivariense sive Castellense," under which Cassiodorus himself entitles chapter XXIX of the *Institutiones*, reflects this twofold cenobitic and eremitic vocation (Focà, 2020, pp. 4-5). As Momigliano observes (1978), the Vivarium institution has no clear precedent in contemporary Western monasticism: it is not so much the coexistence of communal and solitary life

– already experienced elsewhere, as at Lérins – that makes it original, as the fact that its functional centre was not the church or the refectory, but the library.

It is within this context that the formation of the Vivarium medical corpus is to be placed, representing Cassiodorus' most solid and best-documented contribution to the history of ancient medicine. In chapter XXXI of the first book of the *Institutiones*, entitled *De medicis*, Cassiodorus addresses directly the monks charged with caring for the sick, urging them to cultivate the medical art diligently as a work of piety toward the suffering, while at the same time recommending that they not place their sole hope of healing in herbs and in human counsel (It. trans. in Focà, 2020, pp. 5-6). For monks unfamiliar with Greek, Cassiodorus indicates a reading path already available in Latin translation: first the herbal of Dioscorides, which describes plant properties with "admirable precision"; then Hippocrates and Galen "translated into the Latin language," in particular Galen's *Therapeutica* addressed to the philosopher Glaucón; and finally the treatise *De medicina* by Caelius Aurelianus and a further Hippocratic compilation on herbs and cures, texts he declares he has left "stored in the cupboards of our library" (It. trans. in Russo, 1962, p. 11; cf. Focà, 2020, pp. 9-10). It is a detail rightly emphasised by Momigliano (1978) that, for the medical field, Cassiodorus did not promote – as he did for certain Greek patristic texts entrusted to translators such as Epiphanius Scholasticus and Mutianus – the production of new Latin versions, but instead directed the monks toward already existing translations of Hippocrates and Galen: a sign that medicine, although present in Vivarium's cultural programme, did not constitute for Cassiodorus a field of original philological initiative, unlike other areas of sacred and secular learning.

Alongside this bibliographical dimension there was, according to Focà's reconstruction (2020, p. 6), a practical one: for the monks devoted to manual labour and to the care of the sick, Cassiodorus is said to have provided a garden for the cultivation of medicinal plants, to be worked according to the indications learned from the texts of Dioscorides, while the so-called "apothecary" monks would prepare infusions and remedies to be administered to the sick and to pilgrims passing along the important road on which the monastery stood. The *Institutiones* themselves, in the chapter devoted to the monastery's location, recall the presence of baths specially built for the infirm, fed by clear waters suitable both for drinking and for bathing (It. trans. in Focà, 2020, p. 4), a detail testifying to a concrete concern for the physical care of guests, consistent with the tradition of monastic hospitality then taking shape throughout the Christian Mediterranean. It is significant that this charitable concern for the sick preceded by some decades the full maturation of the Rule of Saint Benedict, and that in Cassiodorus it appears closely intertwined – more than with the ascetic purpose alone – with Vivarium's overall cultural

project: the library, the scriptorium, and the garden of simples constitute, in Cassiodorus' vision, three articulations of a single service to "salus," understood at once as bodily health and as salvation of the soul.

Due philological caution should nonetheless be applied to the hypothesis, recalled by Focà (2020, p. 6) on the basis of a 1948 study by Maieul Cappuyns, that the *Regula Magistri* – the anonymous normative text that governs, in dialogic form, the relationship between magister and discipulus, and which shows evident analogies with the later Benedictine Rule – was composed by Cassiodorus himself for Vivarium. This attribution enjoyed a certain success in the mid-twentieth century, but, as noted in Momigliano's entry in the *Dizionario Biografico degli Italiani*, it has, after further critical discussion, "fallen into discredit" among most subsequent scholars (Momigliano, 1978). Similar caution should be applied to the idea, also widespread in more recent Calabrian publications, that Vivarium constituted a model directly and immediately adopted by the Benedictine Rule: the sources rather show two parallel and partly independent experiences, sharing the same historical climate but differing, as Focà himself recalls (2020, p. 1), citing a judgment by Bartolomeo Sorge, in the relative weight given to the religious element and to the secular-cultural one: predominantly religious in the Rule of Saint Benedict, more openly receptive to secular learning – medicine included – in Cassiodorus' experience.

The corpus of medical codices at Vivarium, although its exact extent remains difficult to determine precisely at a distance of fifteen centuries, nonetheless appears among the most significant in the Latin West of the sixth century specifically in the medical field: besides the texts of Hippocrates, Galen, Dioscorides and Caelius Aurelianus already mentioned, the *Institutiones* explicitly distinguish, alongside the monastery's communal library, a personal library of Cassiodorus containing rare and precious copies, including an illuminated copy of the Dioscorides herbal (Focà, 2020, p. 9). It is to this bibliographical nucleus, rather than to any personal clinical practice on Cassiodorus' part, that his historical importance for the transmission of ancient medical knowledge is to be traced: an importance not of an author or a clinician, but of an organiser and preserver of a textual heritage that would otherwise have risked dispersal amid the political and military disorder of sixth-century Italy.

4. Was Cassiodorus a Physician? A Historiographical Assessment and the Legacy of Monastic Medicine

Returning now to the question posed in the title of this contribution, it is possible to draw a more precise historiographical balance than the journalistic formula "physician-monk," sometimes used in contemporary Calabrian publications (MediterraneiNews, 2022), allows. It should first be

reiterated – as already introduced in the first chapter – that the question of monastic status in the technical sense must be distinguished from that of medical competence in the professional sense: on the first point, Momigliano (1978) observes that no source proves that Cassiodorus ever took monastic vows or held the office of abbot of Vivarium, and that in the *Institutiones* he constantly addresses the monks as a group distinct from himself. If, then, even the title of "monk" requires philological caution, that of "physician" requires it a fortiori.

On this second point, older historiography had already reached a balanced conclusion. Francesco Russo, after reviewing the letter *Variarum* VI.19 and the passages of the *Institutiones* devoted to medicine, recognised in Cassiodorus "a certain competence in the medical art," a competence nonetheless insufficient to authorise the title of physician in the proper sense; the formula he proposes – "a competent expert and a great patron of medicine" – remains, in our view, the most defensible on historical-critical grounds (Russo, 1962, p. 11). It is significant that Russo himself expressly recalls, by way of contrast, the sharper judgment of Adalberto Pazzini, according to whom Cassiodorus was "neither a physician nor a monk" (Russo, 1962, p. 11): a judgment that, while its component concerning monastic status finds confirmation today in more recent philology (Momigliano, 1978), appears, in its component concerning medicine, probably too reductive, since it underestimates the institutional weight of Cassiodorus' initiative in creating the office of *Comes archiatrorum* and in systematically forming a medical library corpus intended for practical use within the monastic community.

More recent Calabrian historiography, in particular the contributions of Alfredo Focà associated with the "Cassiodorus" Centre for Documentation on the History of Medicine at the University "Magna Graecia" of Catanzaro, tends by contrast to emphasise more strongly the continuity between the institutional action of the Gothic official and his later monastic experience, presenting Cassiodorus as a founding figure of Western "monastic medicine" and stressing the influence, albeit indirect, of the Vivarium tradition on medieval monks devoted to medicine, among whom are recalled the monks of Montecassino Constantine the African and Alfanus, archbishop of Salerno (Focà, 2020, p. 6; cf. Russo, 1962, p. 12). This is a useful reading, insofar as it restores historical visibility to a chapter of the history of early medieval medicine often neglected by general handbooks, but one that must be handled with awareness of the risks of overinterpretation typical of local historiography with a partly celebratory bent: the expression "physician-monk," sometimes used in popular venues to describe Cassiodorus (see, for example, its use in Calabrian popular medical-historical literature collected on the occasion of initiatives devoted to "the great Calabrian physicians"), finds no direct foundation in the primary sources and should be avoided in properly

scholarly contexts, or at least employed in quotation marks as a historiographical shorthand rather than as an established biographical fact.

As for the line of transmission toward the Salernitan medical school, Russo (1962, p. 12) had already hypothesised that the Cassiodorian influence upon it was "far from negligible," pointing in particular to the Salernitan physicians' later treatment of pulse and urine diagnosis, a theme already present in the formula *Variae* VI.19, and recalling that among the most highly regarded masters of the Salernitan school was a "compatriot" of Cassiodorus. This hypothesis too, formulated in terms of plausible cultural continuity rather than of documented filiation at each step, should be regarded as a historiographically legitimate but not conclusively proven interpretive line: the chronological distance of almost five centuries between Cassiodorus' death, datable to around 580 (Momigliano, 1978), and the full flowering of the Salernitan school between the eleventh and twelfth centuries, together with the early dispersal of the Vivarium library – of which, as Focà himself recalls (2020, p. 11), no certain documentary trace survives after the eleventh century – requires that such continuity be treated as an inheritance of cultural climate and institutional model, rather than as a direct and case-by-case verifiable textual transmission.

In conclusion, the balance this contribution proposes is the following. Cassiodorus was not a physician in the technical and professional sense of the term, nor is there sufficient evidence to attribute to him a personal clinical practice: the sources show him rather as an official and a man of letters endowed with a solid encyclopaedic culture, capable of appreciating and institutionally promoting the medical art both as a high magistrate of the Ostrogothic kingdom – through the restoration of the office of the *archiatri* and the institution of the *Comes archiattrorum* – and as a monastic founder, through the systematic inclusion of a corpus of Greek-Latin medical texts in the library of Vivarium and his exhortation to the monks to practise charitable medical assistance toward the poor and toward pilgrims. It is in this twofold role – first as institutional patron, then as bibliographical and cultural organiser – that Cassiodorus' real contribution to the history of ancient medicine is to be sought: a contribution that, while not making him a physician in the proper sense, secures him, on the basis of the evidence considered here, a place of real importance among the figures who, between late antiquity and the early Middle Ages, made possible the survival and transmission of classical medical knowledge through the channels of Western monasticism. This assessment, it should be stressed, rests on a reading of the *Variae* and the *Institutiones* mediated by secondary transcriptions and translations rather than on their critical editions, and should accordingly be regarded as historiographically well-founded but not independently verified against the primary sources within this article. The question "Was Cassiodorus a physician?" thus remains,

in light of the available sources, a rhetorically effective but historically ill-posed question – one that should be reformulated not as "Was he a physician?" but rather as "What was his role – historically more significant than that of a single clinician – in building the institutional and cultural conditions for Western monastic medicine?"

5. Limitations and Directions for Future Research

This contribution is subject to three main limitations, which should be stated explicitly rather than left implicit. First, the primary sources (the *Variae* and the *Institutiones*) were consulted here only indirectly, through the transcriptions and translations provided by Russo (1962) and Focà (2020), rather than in their modern critical editions; a fully independent verification of the passages discussed would require direct engagement with Mynors's edition of the *Institutiones* (Mynors, 1937) and Fridh's edition of the *Variae* (Fridh, 1973). Second, the article is deliberately confirmative rather than innovative in its conclusions: it systematises and refines, with an updated vocabulary and a sharper distinction between the questions of monastic status and of medical competence, a balance already substantially reached by Russo (1962) and Momigliano (1978), rather than establishing new evidence or a new interpretive thesis. Third, two of its potentially more far-reaching claims – the significance of the Vivarium medical corpus and the line of transmission toward the Salernitan school – rest respectively on Focà's authority and on a plausible but undocumented cultural continuity, and should accordingly be read as informed historiographical hypotheses rather than as demonstrated results. Future research should therefore prioritise a direct reading of the *Institutiones* and the *Variae* in their critical editions, and should situate Cassiodorus more systematically within general histories of early medieval and monastic medicine – for instance MacKinney (1937), Nutton (2013), and O'Donnell's monograph on Cassiodorus (1979) – which this article, for reasons of scope, has not been able to engage with directly.

Conflict of Interest: The author reported no conflict of interest.

Data Availability: All data are included in the content of the paper.

Funding Statement: The author did not obtain any funding for this research.

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