

## **Jesus didn't actually die on the cross. He just woke up later after passing out and recovered from his injuries.**

Last week, we introduced five possible theories attempting to explain the resurrection accounts of Jesus of Nazareth. Today we'll examine what's often called the "swoon theory," which suggests that Jesus never really died on the cross—he simply fainted, or swooned, and was presumed dead. Nine pieces of evidence refute the swoon theory:

- (1) Jesus could not have survived crucifixion. Roman procedures were very careful to eliminate that possibility. Roman law even laid the death penalty on any soldier who let a capital prisoner escape in any way, including bungling a crucifixion. It was never done.
- (2) The fact that the Roman soldier did not break Jesus' legs, as he did to the other two crucified criminals (Jn 19:31-33), means that the soldier was sure Jesus was dead. Breaking the legs hastened the death so that the corpse could be taken down before the sabbath (v. 31).
- (3) John, an eyewitness, certified that he saw blood and water come from Jesus' pierced heart (Jn 19:34-35). This shows that Jesus' lungs had collapsed and he had died of asphyxiation. Any medical expert can vouch for this.
- (4) The body was totally encased in winding sheets and entombed (Jn 19:38-42).
- (5) The post-resurrection appearances convinced the disciples, even "doubting Thomas," that Jesus was gloriously alive (Jn 20:19-29). It is psychologically impossible for the disciples to have been so transformed and confident if Jesus had merely struggled out of a swoon, badly in need of a doctor. A half-dead, staggering sick man who has just had a narrow escape is not worshiped fearlessly as divine lord and conquerer of death.
- (6) How were the Roman guards at the tomb overpowered by a swooning corpse? Or by unarmed disciples? And if the disciples did it, they knowingly lied when they wrote the Gospels, and we are into the conspiracy theory, which we will refute shortly.
- (7) How could a swooning half-dead man have moved the great stone at the door of the tomb? Who moved the stone if not an angel? No one has ever answered that question. Neither the Jews nor the Romans would move it, for it was in both their interests to keep the tomb sealed: the Jews had the stone put there in the first place, and the Roman guards would be killed if they let the body "escape."

The story the Jewish authorities spread, that the guards fell asleep and the disciples stole the body (Mt 28:11-15), is unbelievable. Roman guards would not fall asleep on a job like that; if they did, they would lose their lives. And even if they did fall asleep, the crowd and the effort and the noise it would



have taken to move an enormous boulder would have wakened them. Furthermore, we are again into the conspiracy theory, with all its unanswerable difficulties (we'll deal with this theory in a couple days.)

(8) If Jesus awoke from a swoon, where did he go? Think this through: you have a living body to deal with now, not a dead one. Why did it disappear? There is absolutely no data, not even any false, fantastic, imagined data, about Jesus' life after his crucifixion, in any sources, friend or foe, at any time, early or late. A man like that, with a past like that, would have left traces.

(<https://strangenotions.com/rejecting-the-swoon-theory-9-reasons-why-jesus-did-not-just-faint-on-the-cross/>)

## ~ Apparent Death Theory ~

This theory, which emerged in the late 1700s and evolved through various liberal German theologians, posits that Jesus did not die on the cross, but only *appeared* to die. A modern version of this theory was popularized in *The Passover Plot*, a 1960s book by Hugh Schonfield.

### Details of the Theory

This theory states that Jesus merely *fainted* on the cross, from pain, shock, and loss of blood. He was removed from the cross, *alive but unconscious*, and placed in the tomb belonging to Joseph of Arimathea, a member of the Jewish leadership. Jesus supposedly revived at some point, in part because of the coolness of the tomb. Despite not having access to desperately needed medical care and nourishment, Jesus then supposedly managed to unwrap His dressings by Himself and then, in the total darkness of the tomb, locate and roll away the mammoth stone that sealed the tomb entrance. And then, *still unnoticed by the guards*, Jesus supposedly walked a significant distance, on feet punctured by the cross nails, to rejoin His disciples and declare Himself the risen Lord.

### Response

***Serious scholars don't support this theory because it fails to account for the known facts. Evidence, both historical and medical, argues against the possibility of survival. We have at least ten reasons to be confident that Jesus did, in fact, die on the cross:***



- The **nature of His injuries**. He was brutally whipped, beaten, and crowned with deep thorns, all of which resulted in enormous blood loss and tissue damage. He collapsed while carrying His cross beam (approximate weight to be believed around 100 pounds) to the crucifixion site.
- The **nature of crucifixion** virtually guarantees death from asphyxiation. In an attempt to bolster their view, skeptics cite the historian Josephus, who describes an extremely rare case in which one person survived crucifixion, overlooking the fact that his account describes three crucifixion victims who were alive when taken down, but two of which died shortly thereafter, despite receiving excellent Roman medical care.
- The piercing of Jesus' side, from which came "blood and water" (John 19:34), indicating serum separated from clotted blood, gives medical evidence that Jesus had already died.
- Jesus said He was in the act of dying while on the cross: "Father, into your hands I commit my spirit" (Luke 23:46).
- The Roman soldiers, well trained executioners, were charged with making sure He was dead before taken off the cross. When they went to break Jesus' legs, to hasten His death, they found Him already dead.
- Pilate summoned the centurion to make sure Jesus was, indeed, dead before surrendering the body to Joseph for burial.
- Jesus' body was wrapped in about a hundred pounds of cloth and spices, and placed in a tomb that was sealed with a massive stone. From inside the tomb, Jesus would have had no way to leverage the stone to roll it away, let alone push it back enough to slip past it.
- Medical experts who have studied the circumstances surrounding the end of Jesus' life have concluded that He did actually die on the cross, most likely from a combination of factors: hypovolemic shock, exhaustion asphyxia, and even acute heart failure.
- Non-Christian historians from the 1st and 2nd centuries, such as Tacitus and Josephus, recorded Jesus's death in their writings.
- The earliest Christian writers after the time of Christ, such as Polycarp and Ignatius, verify that Jesus died on the cross.

In his article, **A Lawyer Examines The Swoon Theory**, Texas attorney Joseph "Rick" Reinckens satirically unpacks this theory. Just a snippet:

*"Jesus has been whipped, beaten and stabbed, is hemorrhaging, and hasn't had any food or drink for at least three days. Does He just push the stone open*



*enough to squeeze through? No, He pushes the stone door COMPLETELY out of the way!!!”*

**The theory asserts that Jesus got past the guards undetected — and then somehow traveled seven miles to Emmaus, to rejoin His disciples. Again, let’s look at Jesus’ physical condition, to decide if this sounds feasible:**

- Jesus would have had nothing to eat or drink for more than two days, as it has been over 48 hours since the Passover meal.
- Jesus would have been severely dehydrated from losing massive amount of blood and fluids.
- Jesus’ entire body would have been a pulpy mess, because of the severe beatings and scourging by the Roman guards.
- The gaping wound in His side, from being pierced by the Roman guard’s sword, would have likely perforated a lung and/or Jesus’ heart.
- Jesus crumpled under the weight of the crossbeam as He made His way to the crucifixion site. *Yet now He manages to roll aside a tomb stone that scholars estimate weighed more than 400 pounds?*

If Jesus had managed to get Himself to His disciples, are we to believe that they viewed Him, in His near-death state, to be their triumphant, risen Lord? And consider this: if Jesus had survived the crucifixion, why would His disciples create the idea of His resurrection? Would they not have thumbed their noses at Rome more by simply stating that Rome’s best efforts at torture were no limit to Jesus, the man and Messiah from Galilee?

**If it crossed your mind that Jesus could have healed Himself in the tomb — as historical records tell us that He healed so many others — ask yourself why He would do so. If He didn’t die, His own predictions about Himself were untrue. If He didn’t die, His promises to us are, as Paul states, worthless. Would any of us follow Jesus if we thought Him a liar and fake? I certainly wouldn’t.**

(<https://www.josh.org/resurrection-jesus-hoax-truth/>)





## On the Physical Death of Jesus Christ

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■ Jesus of Nazareth underwent Jewish and Roman trials, was flogged, and was sentenced to death by crucifixion. The scourging produced deep stripelike lacerations and appreciable blood loss, and it probably set the stage for hypovolemic shock as evidenced by the fact that Jesus was too weakened to carry the crossbar (patibulum) to Golgotha. At the site of crucifixion his wrists were nailed to the patibulum, and after the patibulum was lifted onto the upright post, (stipes) his feet were nailed to the stipes. The major pathophysiologic effect of crucifixion was an interference with normal respirations. Accordingly, death resulted primarily from hypovolemic shock and exhaustion asphyxia. Jesus' death was ensured by the thrust of a soldier's spear into his side. Modern medical interpretation of the historical evidence indicates that Jesus was dead when taken down from the cross.

(JAMA 1986; 255:1455-1463)

THE LIFE and teachings of Jesus of Nazareth have formed the basis for a major world religion, (Christianity) have appreciably influenced the course of human history, and, by virtue of a compassionate attitude toward the sick, also have contributed to the development of modern medicine. The eminence of Jesus as a historical figure and the suffering, and controversy associated with his death has stimulated us to investigate, in an interdisciplinary manner, the circumstances surrounding his crucifixion. Accordingly it is our intent to present not a theological treatise but rather a medically, and historically accurate account of the physical death of the one called Jesus Christ.

### SOURCES

The source material concerning Christ's death comprises a body of literature and not a physical body or its skeletal remains. Accordingly, the

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credibility of any discussion of Jesus' death will be determined primarily by the credibility of one's sources. For this review, the source material includes the writings of ancient Christian and non-Christian authors, the writings of modern authors, and the Shroud of Turin.<sup>1-40</sup> Using the legal-historical method of scientific investigation,<sup>27</sup> scholars have established the reliability and accuracy of the ancient manuscripts.<sup>28,27,29,31</sup>

The most extensive and detailed descriptions of the life and death of Jesus are to be found in the New Testament gospels of Matthew, Mark, Luke, and John.<sup>1</sup> The other 23 books of the New Testament support but do not expand on the details recorded in the gospels. Contemporary Christian, Jewish, and Roman authors provide additional insight concerning the first-century Jewish and Roman legal systems and the details of scourging and crucifixion.<sup>5</sup> Seneca, Livy, Plutarch, and others refer to crucifixion practices in their works.<sup>8,28</sup> Specifically, Jesus (or his crucifixion) is mentioned by the Roman historians Cornelius Tacitus, Pliny the Younger, and Suetonius, by non-Roman historians Thallus and Phlegon, by the satirist Lucian of Samosata, by the Jewish

Talmud, and by the Jewish historian Flavius Josephus, although the authenticity of portions of the latter is problematic.<sup>26</sup>

The Shroud of Turin is considered by many to represent the actual burial cloth of Jesus,<sup>22</sup> and several publications concerning the medical aspects of his death draw conclusions from this assumption.<sup>5,11</sup> The Shroud of Turin and recent archaeological findings provide valuable information concerning Roman crucifixion practices.<sup>22-24</sup> The interpretations of modern writers, based on a knowledge of science and medicine not available in the first century, may offer additional insight concerning the possible mechanisms of Jesus' death.<sup>2-17</sup>

When taken in concert certain facts—the extensive and early testimony of both Christian proponents and opponents, and their universal acceptance of Jesus as a true historical figure; the ethic of the gospel writers, and the shortness of the time interval between the events and the extant manuscripts; and the confirmation of the gospel accounts by historians and archaeological findings<sup>26-27</sup>—ensure a reliable testimony from which a modern medical interpretation of Jesus' death may be made.

### GETHSEMANE

After Jesus and his disciples had observed the Passover meal in an upper room in a home in southwest Jerusalem, they traveled to the Mount of Olives, northeast of the city (Fig 1). (Owing to various adjustments in the calendar, the years of Jesus' birth and death remain controversial.<sup>29</sup> However, it is likely that Jesus was born in either 4 or 6 BC and died in 30 AD.<sup>11,29</sup> During the Passover observance in 30 AD, the Last Supper would have been observed on Thursday,

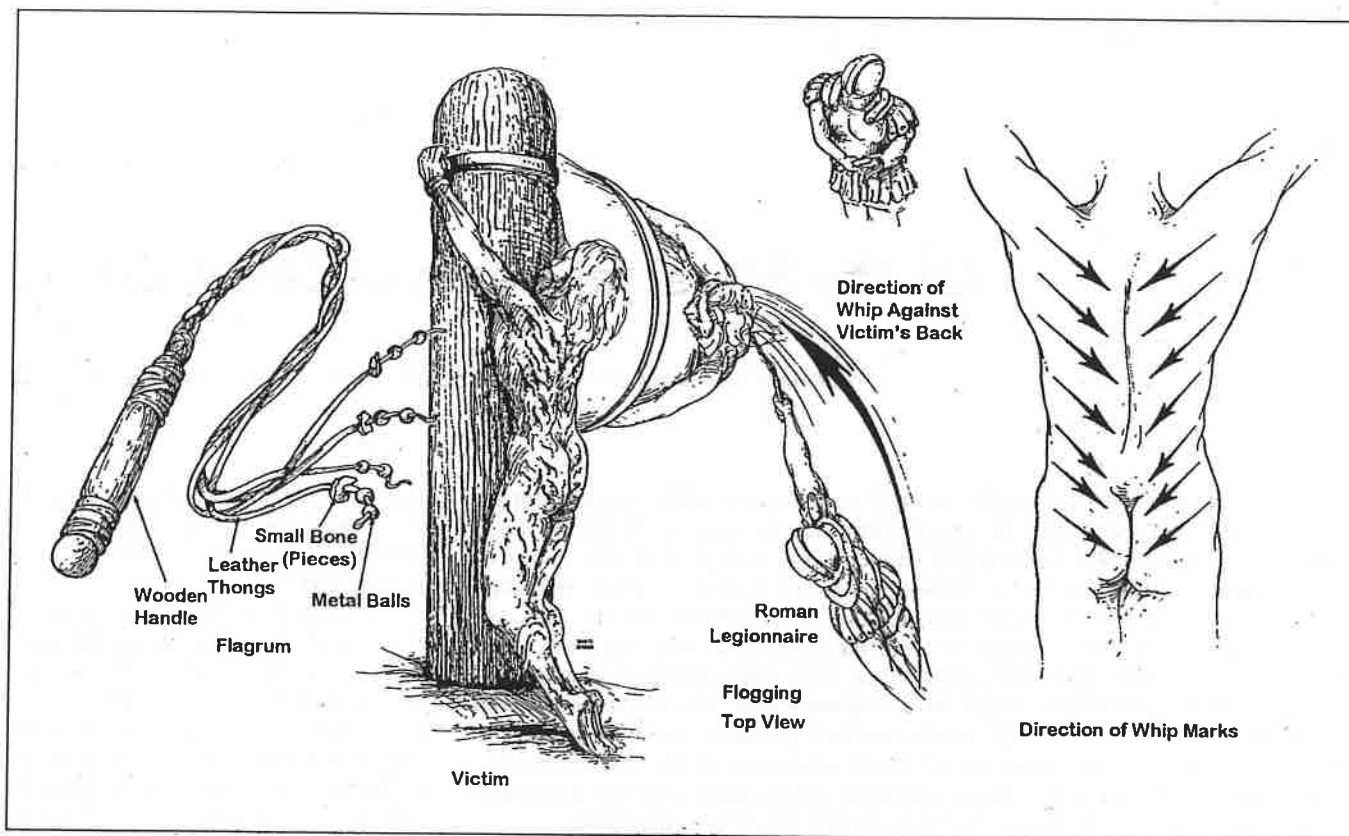


Fig 2.—Scourging. Left, Short whip (flagrum) with lead balls and sheep bones tied into leather thongs. Center left, Naked victim tied to flogging post. Deep stripelike lacerations were usually associated with considerable blood loss. Center right, View from above, showing position of lictors. Right, Inferomedial direction of wounds.

Herod Antipas, the tetrarch of Judea.<sup>1</sup> Herod likewise made no official charges and then returned Jesus to Pilate (Fig 1).<sup>1</sup> Again, Pilate could find no basis for a legal charge against Jesus, but the people persistently demanded crucifixion. Pilate finally granted their demand and handed over Jesus to be flogged (scourged) and crucified. (McDowell<sup>25</sup> has reviewed the prevailing political, religious, and economic climates in Jerusalem at the time of Jesus' death, and Bucklin<sup>5</sup> has described the various illegalities of the Jewish and Roman trials.)

#### Health of Jesus

The rigors of Jesus' ministry (that is, traveling by foot throughout Palestine) would have precluded any major physical illness or a weak general constitution. Accordingly, it is reasonable to assume that Jesus was in good physical condition before his walk to Gethsemane. However, during the 12 hours between 9 PM Thursday and 9 AM Friday, he had suffered great emotional stress (as evidenced by hematomas), abandonment by

his closest friends (the disciples), and a physical beating (after the first Jewish trial). Also, in the setting of a traumatic and sleepless night, he had been forced to walk more than 2.5 miles (4.0 km) to and from the sites of the various trials (Fig 1). These physical and emotional factors may have rendered Jesus particularly vulnerable to the adverse hemodynamic effects of the scourging.

### SCOURGING

#### Scourging Practices

Flogging was a legal preliminary to every Roman execution,<sup>28</sup> and only women and Roman senators or soldiers (except in cases of desertion) were exempt.<sup>11</sup> The usual instrument was a short whip (flagellum or flagellum) with several single or braided leather thongs of variable lengths, in which small iron balls or sharp pieces of sheep bones were tied at intervals (Fig 2).<sup>5,7,11</sup> Occasionally, staves also were used.<sup>8,12</sup> For scourging, the man was stripped of his clothing, and his hands were tied to an upright post (Fig 2).<sup>11</sup> The back, buttocks, and legs were flogged either by two soldiers

(lictors) or by one who alternated positions.<sup>5,7,11,28</sup> The severity of the scourging depended on the disposition of the lictors and was intended to weaken the victim to a state just short of collapse or death.<sup>8</sup> After the scourging, the soldiers often taunted their victim.<sup>11</sup>

#### Medical Aspects of Scourging

As the Roman soldiers repeatedly struck the victim's back with full force, the iron balls would cause deep contusions, and the leather thongs and sheep bones would cut into the skin and subcutaneous tissues.<sup>7</sup> Then, as the flogging continued, the lacerations would tear into the underlying skeletal muscles and produce quivering ribbons of bleeding flesh.<sup>2,7,26</sup> Pain and blood loss generally set the stage for circulatory shock.<sup>12</sup> The extent of blood loss may well have determined how long the victim would survive on the cross.<sup>8</sup>

#### Scourging of Jesus

At the Praetorium, Jesus was severely whipped. (Although the severity of the scourging is not dis-

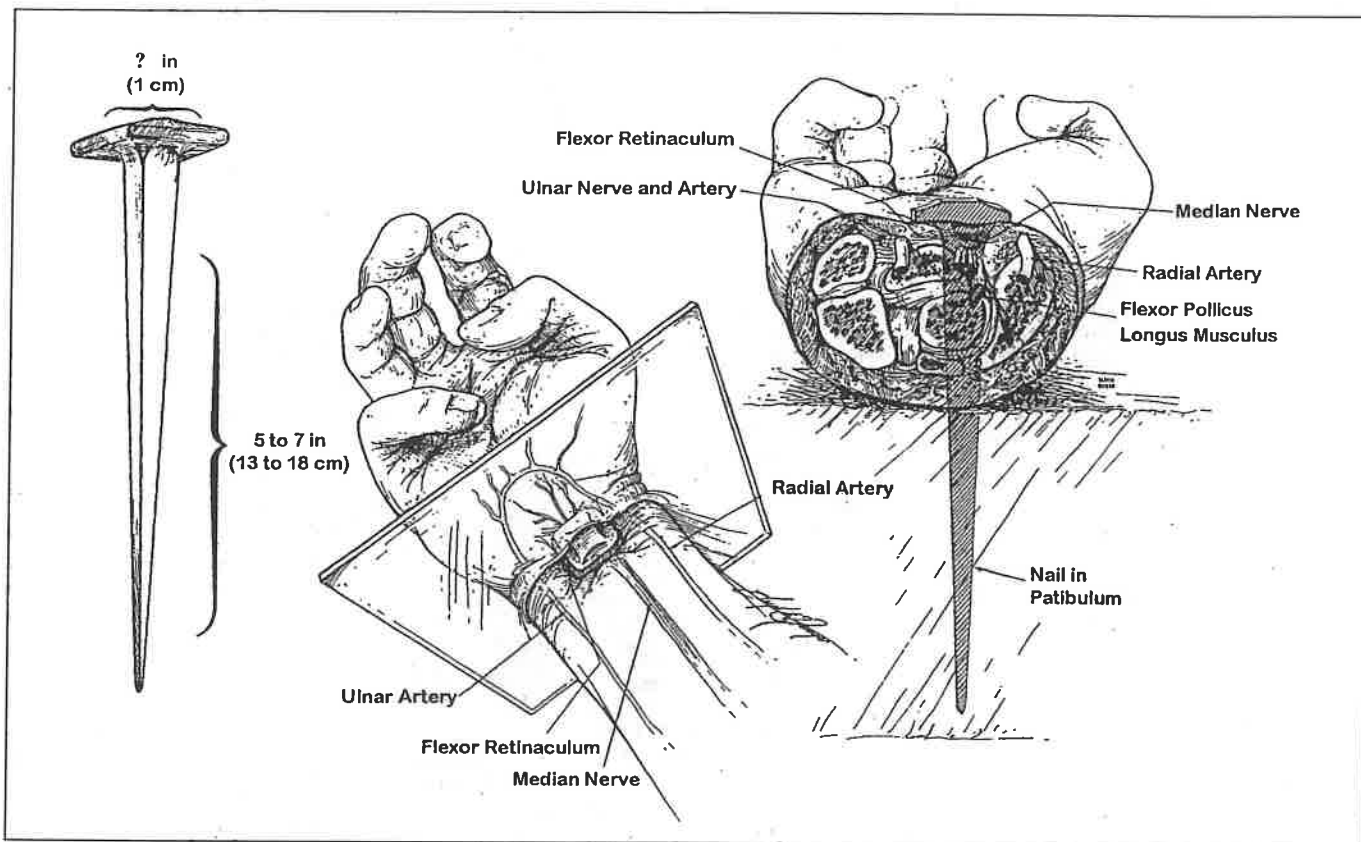


Fig 4.—Nailing of wrists. Left, Size of iron nail. Center, Location of nail in wrist, between carpals and radius. Right, Cross section of wrist, at level of plane indicated at left, showing path of nail, with probable transection of median nerve and impalement of flexor pollicis longus, but without injury to major arterial trunks and without fractures of bones.

from the flogging post to the site of crucifixion outside the city walls.<sup>8,11,30</sup> He was usually naked, unless this was prohibited by local customs.<sup>11</sup> Since the weight of the entire cross was probably well over 300 lb (136 kg), only the crossbar was carried (Fig 3).<sup>11</sup> The patibulum, weighing 75 to 125 lb. (34 to 57 kg),<sup>11,30</sup> was placed across the nape of the victim's neck and balanced along both shoulders. Usually, the outstretched arms then were tied to the crossbar.<sup>7,11</sup> The processional to the site of crucifixion was led by a complete Roman military guard, headed by a centurion.<sup>3,11</sup> One of the soldiers carried a sign (titulus) on which the condemned man's name and crime were displayed (Fig 3).<sup>3,11</sup> Later, the titulus would be attached to the top of the cross.<sup>11</sup> The Roman guard would not leave the victim until they were sure of his death.<sup>9,11</sup>

Outside the city walls was permanently located the heavy upright wooden stipes, on which the patibulum would be secured. In the case of the Tau cross, this was accomplished by means of a mortise and tenon joint, with or without reinforcement

by ropes.<sup>10,11,30</sup> To prolong the crucifixion process, a horizontal wooden block or plank, serving as a crude seat (sedile or sedulum), often was attached midway down the stipes.<sup>8,11,16</sup> Only very rarely, and probably later than the time of Christ, was an additional block (suppedaneum) employed for transfixion of the feet.<sup>9,11</sup>

At the site of execution, by law, the victim was given a bitter drink of wine mixed with myrrh (gall) as a mild analgesic.<sup>7,17</sup> The criminal was then thrown to the ground on his back, with his arms outstretched along the patibulum.<sup>11</sup> The hands could be nailed or tied to the crossbar, but nailing apparently was preferred by the Romans.<sup>8,11</sup> The archaeological remains of a crucified body, found in an ossuary near Jerusalem and dating from the time of Christ, indicate that the nails were tapered iron spikes approximately 5 to 7 in (13 to 18 cm) long with a square shaft  $\frac{3}{8}$  in (1 cm) across.<sup>23,24,30</sup> Furthermore, ossuary findings and the Shroud of Turin have documented that the nails commonly were driven through the wrists rather than the palms (Fig 4).<sup>22-24,30</sup>

After both arms were fixed to the crossbar, the patibulum and the victim, together, were lifted onto the stipes.<sup>11</sup> On the low cross, four soldiers could accomplish this relatively easily. However, on the tall cross, the soldiers used either wooden forks or ladders.<sup>11</sup>

Next, the feet were fixed to the cross, either by nails or ropes. Ossuary findings and the Shroud of Turin suggest that nailing was the preferred Roman practice.<sup>23,24,30</sup> Although the feet could be fixed to the sides of the stipes or to a wooden footrest (suppedaneum), they usually were nailed directly to the front of the stipes (Fig 5).<sup>11</sup> To accomplish this, flexion of the knees may have been quite prominent, and the bent legs may have been rotated laterally (Fig 6).<sup>23-25,30</sup>

When the nailing was completed, the titulus was attached to the cross, by nails or cords, just above the victim's head.<sup>11</sup> The soldiers and the civilian crowd often taunted and jeered the condemned man, and the soldiers customarily divided up his clothes among themselves.<sup>11,25</sup> The

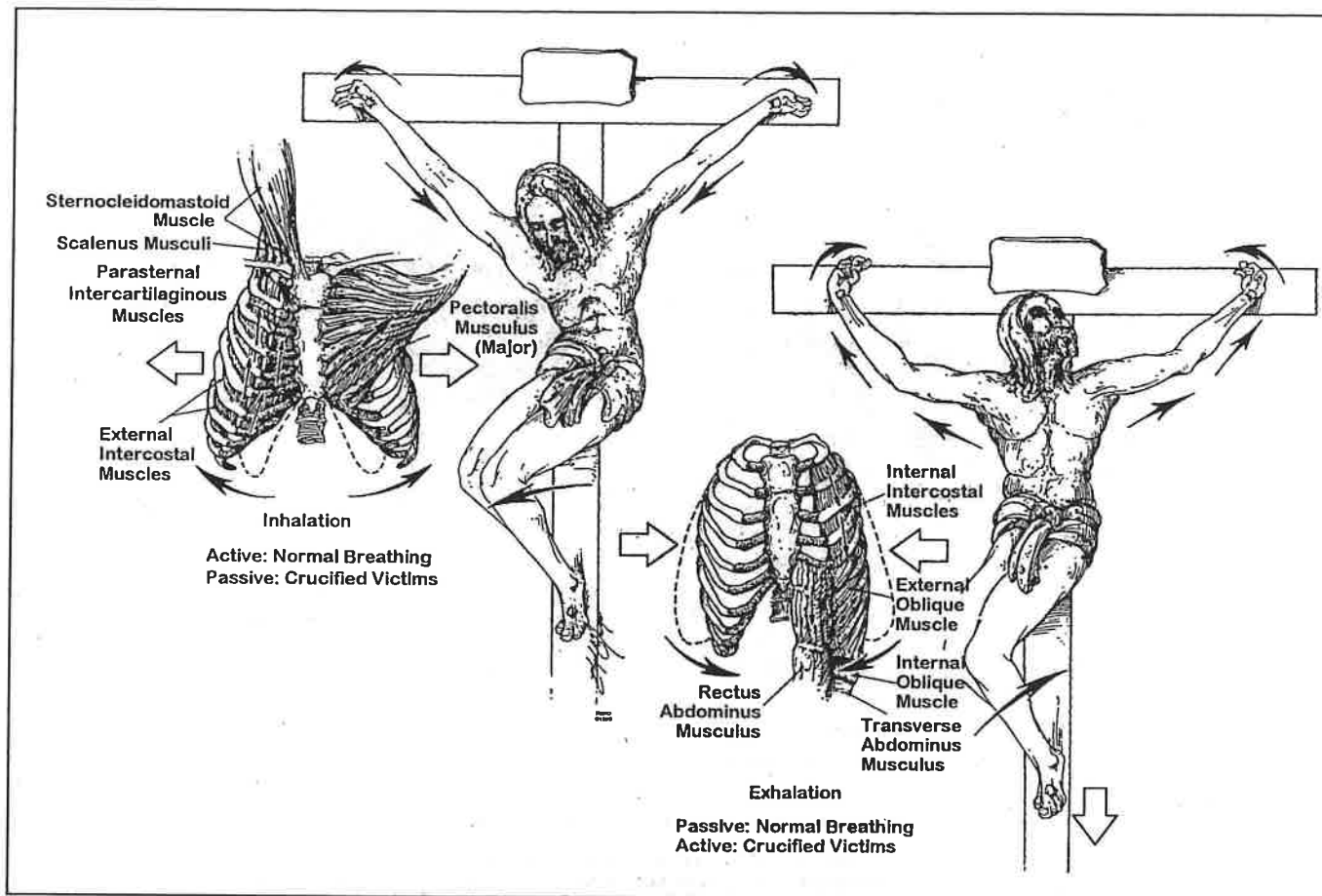


Fig 6—Respirations during crucifixion. Left, Inhalation. With elbows extended and shoulders abducted, respiratory muscles of inhalation are passively stretched and thorax is expanded. Right, Exhalation. With elbows flexed and shoulders adducted and with weight of body on nailed feet, exhalation is accomplished as active, rather than passive, process. Breaking legs below knees would place burden of exhalation on shoulder and arm muscles alone and soon would result in exhaustion asphyxia.

medial and lateral plantar nerves would have been injured by the nails (Fig 5). Although scourging may have resulted in considerable blood loss, crucifixion per se was a relatively bloodless procedure, since no major arteries, other than perhaps the deep plantar arch, pass through the favored anatomic sites of transfixion.<sup>2,10,11</sup>

The major pathophysiologic effect of crucifixion, beyond the excruciating pain, was a marked interference with normal respiration, particularly exhalation (Fig 6). The weight of the body, pulling down on the outstretched arms and shoulders, would tend to fix the intercostal muscles in an inhalation state and thereby hinder passive exhalation.<sup>2,10,11</sup> Accordingly, exhalation was primarily diaphragmatic, and breathing was shallow. It is likely that this form of respiration would not suffice and that hypercarbia would soon result. The onset of muscle cramps or tetanic

contractions, due to fatigue and hypercarbia, would hinder respiration even further.<sup>11</sup>

Adequate exhalation required lifting the body by pushing up on the feet and by flexing the elbows and adducting the shoulders (Fig 6).<sup>2</sup> However, this maneuver would place the entire weight of the body on the tarsals and would produce searing pain.<sup>7</sup> Furthermore, flexion of the elbows would cause rotation of the wrists about the iron nails and cause fiery pain along the damaged median nerves.<sup>7</sup> Lifting of the body would also painfully scrape the scourged back against the rough wooden stipes.<sup>2,7</sup> Muscle cramps and paresthesias of the outstretched and uplifted arms would add to the discomfort.<sup>7</sup> As a result, each respiratory effort would become agonizing and tiring and lead eventually to asphyxia.<sup>2,3,7,10</sup>

The actual cause of death by crucifixion was multifactorial and varied somewhat with each case, but the two

most prominent causes probably were hypovolemic shock and exhaustion asphyxia.<sup>2,3,7,10</sup> Other possible contributing factors included dehydration,<sup>7,16</sup> stress-induced arrhythmias,<sup>8</sup> and congestive heart failure with the rapid accumulation of pericardial and perhaps pleural effusions.<sup>2,7,11</sup> Crucifraction (breaking the legs below the knees), if performed, led to an asphyxic death within minutes.<sup>11</sup> Death by crucifixion was, in every sense of the word, excruciating (Latin, *excruciatius*, or "out of the cross").

#### Crucifixion of Jesus

After the scourging and the mocking, at about 9 AM, the Roman soldiers put Jesus' clothes back on him and then led him and two thieves to be crucified.<sup>1</sup> Jesus apparently was so weakened by the severe flogging that he could not carry the patibulum from the Praetorium to the site of crucifixion one third of a mile (600 to

the difficulty in explaining, with medical accuracy, the flow of both blood and water. Part of this difficulty has been based on the assumption that the blood appeared first, then the water. However, in the ancient Greek, the order of words generally denoted prominence and not necessarily a time sequence.<sup>37</sup> Therefore, it seems likely that John was emphasizing the prominence of blood rather than its appearance preceding the water.

Therefore, the water probably represented serous pleural and pericardial fluid,<sup>5,7,11</sup> and would have preceded the flow of blood and been smaller in volume than the blood. Perhaps in the setting of hypovolemia and impending acute heart failure, pleural and pericardial effusions may have developed and would have added to the volume of apparent water.<sup>5,11</sup> The blood, in contrast, may have originated from the right atrium or the right ventricle (Fig 7) or perhaps from a hemopericardium.<sup>5,7,11</sup>

Jesus' death after only three to six hours on the cross surprised even Pontius Pilate.<sup>1</sup> The fact that Jesus

cried out in a loud voice and then bowed his head and died suggests the possibility of a catastrophic terminal event. One popular explanation has been that Jesus died of cardiac rupture. In the setting of the scourging and crucifixions with associated hypovolemia, hypoxemia, and perhaps an altered coagulable state, friable non-infective thrombotic vegetations could have formed on the aortic or mitral valve. These then could have dislodged and embolized into the coronary circulation and thereby produced an acute transmural myocardial infarction. Thrombotic valvular vegetations have been reported to develop under analogous acute traumatic conditions.<sup>38</sup> Rupture of the left ventricular free wall may occur, though uncommonly, in the first few hours following infarction.<sup>40</sup>

However, another explanation may be more likely. Jesus' death may have been hastened simply by his state of exhaustion and by the severity of the scourging, with its resultant blood loss and preshock state.<sup>7</sup> The fact that he could not carry his patibulum

supports this interpretation. The actual cause of Jesus' death, like that of other crucified victims, may have been multifactorial and related primarily to hypovolemic shock, exhaustion asphyxia, and perhaps acute heart failure.<sup>2,3,5-7,10,11</sup> A fatal cardiac arrhythmia may have accounted for the apparent catastrophic terminal event.

Thus, it remains unsettled whether Jesus died of cardiac rupture or of cardiorespiratory failure. However, the important feature may be not *how* he died but rather *whether* he died. Clearly, the weight of historical and medical evidence indicates that Jesus was dead before the wound to his side was inflicted and supports the traditional view that the spear, thrust between his right ribs, probably perforated not only the right lung but also the pericardium and heart and thereby ensured his death (Fig 7). Accordingly, interpretations based on the assumption that Jesus did not die on the cross appear to be at odds with modern medical knowledge.

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